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Form 990

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2019

Open to Public Inspection

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.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

A For the 2019 calendar year, or tax year beginning 01-01-2019 , and ending 12-31-2019

B Check if applicable:  
☐ Address change  
☐ Name change  
☐ Initial return  
☐ Final return/terminated  
☐ Amended return  
☐ Application pending

C Name of organization  
GREATER TACOMA COMMUNITY FOUNDATION  
  
Doing business as  
  
Number and street (or P.O. box if mail is not delivered to street address) Room/suite  
950 PACIFIC AVENUE SUITE 1100  
  
City or town, state or province, country, and ZIP or foreign postal code  
TACOMA, WA 98402

D Employer identification number  
  
91-1007459  
  
E Telephone number  
  
(253) 383-5622  
  
G Gross receipts \$ 25,466,043

F Name and address of principal officer:  
MOHAMMAD MOUSA  
950 PACIFIC AVENUE SUITE 1100  
TACOMA, WA 98402

H(a) Is this a group return for subordinates?  
☐ Yes ☒ No  
H(b) Are all subordinates included?  
☐ Yes ☐ No  
If "No," attach a list. (see instructions)  
H(c) Group exemption number ▶

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW.GTCF.ORG

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 1977

M State of legal domicile:  
WA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities:  
PHILANTHROPIC SERVICES, FUNDING, STEWARDSHIP AND SUPPORT FOR A THRIVING PIERCE COUNTY IN PERPETUITY

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a) . . . . . 3 11

4 Number of independent voting members of the governing body (Part VI, line 1b) . . . . . 4 11

5 Total number of individuals employed in calendar year 2019 (Part V, line 2a) . . . . . 5 24

6 Total number of volunteers (estimate if necessary) . . . . . 6 56

7a Total unrelated business revenue from Part VIII, column (C), line 12 . . . . . 7a 0

7b Net unrelated business taxable income from Form 990-T, line 39 . . . . . 7b 0

Revenue

8 Contributions and grants (Part VIII, line 1h) . . . . . 10,962,243 15,375,991

9 Program service revenue (Part VIII, line 2g) . . . . . 0 0

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d ) . . . . . 5,581,427 4,305,628

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . . . 142,373 202,672

12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) . . . . . 16,686,043 19,884,291

Expenses

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3 ) . . . . . 5,875,300 8,035,470

14 Benefits paid to or for members (Part IX, column (A), line 4) . . . . . 0 0

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) . . . . . 1,781,009 2,104,471

16a Professional fundraising fees (Part IX, column (A), line 11e) . . . . . 0 0

b Total fundraising expenses (Part IX, column (D), line 25) ▶440,920

17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) . . . . . 1,042,071 1,326,185

18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) . . . . . 8,698,380 11,466,126

19 Revenue less expenses. Subtract line 18 from line 12 . . . . . 7,987,663 8,418,165

Net Assets or Fund Balances

20 Total assets (Part X, line 16) . . . . . 111,249,424 132,061,505

21 Total liabilities (Part X, line 26) . . . . . 3,691,124 2,681,905

22 Net assets or fund balances. Subtract line 21 from line 20 . . . . . 107,558,300 129,379,600

Part II Signature Block

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

Sign Here

Signature of officer  
MOHAMMAD MOUSA CFO  
Type or print name and title

2020-10-29  
Date

Paid Preparer Use Only

Print/Type preparer's name Preparer's signature Date

Check ☐ if self-employed PTIN P00601133

Firm's name ▶ DWYER PEMBERTON & COULSON PC Firm's EIN ▶ 91-1503183

Firm's address ▶ PO BOX 1614 TACOMA, WA 984011614 Phone no. (253) 572-9922

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

For Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 11282Y Form 990 (2019)

**Part III Statement of Program Service Accomplishments**Check if Schedule O contains a response or note to any line in this Part III ☐**1** Briefly describe the organization's mission:

GREATER TACOMA COMMUNITY FOUNDATION HELPS BUILD A THRIVING AND VIBRANT PIERCE COUNTY BY PROVIDING PHILANTHROPIC RESOURCES THAT SUPPORT INDIVIDUALS AND ORGANIZATIONS IN WORKING TOGETHER TO MEET THE COMMUNITY'S NEEDS AND OPPORTUNITIES, NOW AND INTO THE FUTURE.

**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

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

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

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

**4a** (Code: ) (Expenses \$ 9,625,476 including grants of \$ 8,035,470 ) (Revenue \$ 202,672 )  
See Additional Data

**4b** (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

**4c** (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

**4d** Other program services (Describe in Schedule O.)  
(Expenses \$ including grants of \$ ) (Revenue \$ )

**4e** Total program service expenses ▶ 9,625,476

**Part IV Checklist of Required Schedules**

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

**Part IV Checklist of Required Schedules** (continued)

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

**Part V Statements Regarding Other IRS Filings and Tax Compliance**Check if Schedule O contains a response or note to any line in this Part V . . . . . ☐

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable . . . . .	<b>1a</b> 29	
<b>b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . . . . .	<b>1b</b> 0	
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . .	<b>1c</b> Yes	

**Part V** **Statements Regarding Other IRS Filings and Tax Compliance** (continued)

<b>2a</b> 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 . . . . .	<div style="border: 1px solid black; width: 100px; height: 30px; display: flex; align-items: center; justify-content: center;"> <div style="border-right: 1px solid black; width: 40px; text-align: center;">2a</div> <div style="width: 60px;"></div> </div> <div style="text-align: right; margin-top: -10px;">24</div>			
<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		<b>2b</b>	Yes	
<b>3a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year? . . . . .		<b>3a</b>		No
<b>b</b> If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O</i> . . . . .		<b>3b</b>		
<b>4a</b> 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)? . . . . .		<b>4a</b>		No
<b>b</b> If "Yes," enter the name of the foreign country: <span style="border-bottom: 1px solid black; display: inline-block; width: 150px;"></span> See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
<b>5a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . . .		<b>5a</b>		No
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		<b>5b</b>		No
<b>c</b> If "Yes," to line 5a or 5b, did the organization file Form 8886-T? . . . . .		<b>5c</b>		
<b>6a</b> 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? . . . . .		<b>6a</b>	Yes	
<b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .		<b>6b</b>	Yes	
<b>7 Organizations that may receive deductible contributions under section 170(c).</b>				
<b>a</b> 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? . . . . .		<b>7a</b>	Yes	
<b>b</b> If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .		<b>7b</b>	Yes	
<b>c</b> Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .		<b>7c</b>		No
<b>d</b> If "Yes," indicate the number of Forms 8282 filed during the year . . . . .	<div style="border: 1px solid black; width: 100px; height: 20px; display: flex; align-items: center; justify-content: center;"> <div style="border-right: 1px solid black; width: 40px; text-align: center;">7d</div> <div style="width: 60px;"></div> </div>			
<b>e</b> Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		<b>7e</b>		
<b>f</b> Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .		<b>7f</b>		
<b>g</b> If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? . . . . .		<b>7g</b>		
<b>h</b> If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? . . . . .		<b>7h</b>		
<b>8 Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? . . . . .		<b>8</b>		
<b>9 Sponsoring organizations maintaining donor advised funds.</b>				
<b>a</b> Did the sponsoring organization make any taxable distributions under section 4966? . . . . .		<b>9a</b>		
<b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . . . .		<b>9b</b>		
<b>10 Section 501(c)(7) organizations.</b> Enter:				
<b>a</b> Initiation fees and capital contributions included on Part VIII, line 12 . . . . .	<div style="border: 1px solid black; width: 100px; height: 20px; display: flex; align-items: center; justify-content: center;"> <div style="border-right: 1px solid black; width: 40px; text-align: center;">10a</div> <div style="width: 60px;"></div> </div>			
<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<div style="border: 1px solid black; width: 100px; height: 20px; display: flex; align-items: center; justify-content: center;"> <div style="border-right: 1px solid black; width: 40px; text-align: center;">10b</div> <div style="width: 60px;"></div> </div>			
<b>11 Section 501(c)(12) organizations.</b> Enter:				
<b>a</b> Gross income from members or shareholders . . . . .	<div style="border: 1px solid black; width: 100px; height: 20px; display: flex; align-items: center; justify-content: center;"> <div style="border-right: 1px solid black; width: 40px; text-align: center;">11a</div> <div style="width: 60px;"></div> </div>			
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) . . . . .	<div style="border: 1px solid black; width: 100px; height: 20px; display: flex; align-items: center; justify-content: center;"> <div style="border-right: 1px solid black; width: 40px; text-align: center;">11b</div> <div style="width: 60px;"></div> </div>			
<b>12a Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?				
<b>b</b> If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	<div style="border: 1px solid black; width: 100px; height: 20px; display: flex; align-items: center; justify-content: center;"> <div style="border-right: 1px solid black; width: 40px; text-align: center;">12b</div> <div style="width: 60px;"></div> </div>	<b>12a</b>		
<b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>				
<b>a</b> 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.		<b>13a</b>		
<b>b</b> Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans . . . . .	<div style="border: 1px solid black; width: 100px; height: 20px; display: flex; align-items: center; justify-content: center;"> <div style="border-right: 1px solid black; width: 40px; text-align: center;">13b</div> <div style="width: 60px;"></div> </div>			
<b>c</b> Enter the amount of reserves on hand . . . . .	<div style="border: 1px solid black; width: 100px; height: 20px; display: flex; align-items: center; justify-content: center;"> <div style="border-right: 1px solid black; width: 40px; text-align: center;">13c</div> <div style="width: 60px;"></div> </div>			
<b>14a</b> Did the organization receive any payments for indoor tanning services during the tax year? . . . . .		<b>14a</b>		No
<b>b</b> If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i> . . . . .		<b>14b</b>		
<b>15</b> Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? . . . . . If "Yes," see instructions and file Form 720, Schedule N.		<b>15</b>		No
<b>16</b> Is the organization an educational institution subject to the section 4968 excise tax on net investment income? . . . . . If "Yes," complete Form 4720, Schedule O.		<b>16</b>		No

**Part VI**

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

Check if Schedule O contains a response or note to any line in this Part VI ☒

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year	11	
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
<b>b</b>	Enter the number of voting members included in line 1a, above, who are independent	11	
<b>2</b>	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	No
<b>3</b>	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	No
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
<b>6</b>	Did the organization have members or stockholders?	6	No
<b>7a</b>	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	No
<b>b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	No
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b>	The governing body?	8a	Yes
<b>b</b>	Each committee with authority to act on behalf of the governing body?	8b	Yes
<b>9</b>	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	No

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

		Yes	No
<b>10a</b>	Did the organization have local chapters, branches, or affiliates?	10a	No
<b>b</b>	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	
<b>11a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes
<b>b</b>	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b>	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes
<b>b</b>	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
<b>c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes
<b>13</b>	Did the organization have a written whistleblower policy?	13	Yes
<b>14</b>	Did the organization have a written document retention and destruction policy?	14	Yes
<b>15</b>	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
<b>a</b>	The organization's CEO, Executive Director, or top management official	15a	Yes
<b>b</b>	Other officers or key employees of the organization	15b	No
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	No
<b>b</b>	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

**Section C. Disclosure**

**17** List the states with which a copy of this Form 990 is required to be filed **WA**

**18** Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

**19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

**20** State the name, address, and telephone number of the person who possesses the organization's books and records:  
**GREATER TACOMA COMMUNITY FDN 950 PACIFIC AVENUE SUITE 1100 TACOMA, WA 98402 (253) 383-5622**

**Part VII****Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**Check if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

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

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

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

See instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) DWIGHT WILLIAMS CHAIR	2.00	X		X				0	0	0
(2) MARY THOMAS VICE CHAIR	2.00	X		X				0	0	0
(3) ALI MODARRES SECRETARY	1.00	X		X				0	0	0
(4) SCOTT LIMOLI TREASURER	2.00	X		X				0	0	0
(5) CARLA SANTORNO DIRECTOR	0.50	X						0	0	0
(6) BOB PITTMAN DIRECTOR	0.50	X						0	0	0
(7) BRIAN GREEN DIRECTOR	0.50	X						0	0	0
(8) LAMONT LOO DIRECTOR	0.50	X						0	0	0
(9) SEONG SHIN DIRECTOR	0.50	X						0	0	0
(10) ART WANG DIRECTOR	0.50	X						0	0	0
(11) LORI FORTE HARNICK DIRECTOR	0.50	X						0	0	0
(12) KATHI LITTMANN PRESIDENT & CEO	40.00			X				246,885	0	33,562
(13) MOHAMMAD MOUSA CFO	40.00			X				134,477	0	22,220
(14) MEGAN SUKYS VP, COMMUNICATIONS	2.00					X		106,737	0	27,350
(15) GINA ANSTEY VP OF PROGRAMS & INITIATIV	40.00					X		107,913	0	11,772

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
<b>1b Sub-Total</b> . . . . .										
<b>c Total from continuation sheets to Part VII, Section A</b> . . . . .										
<b>d Total (add lines 1b and 1c)</b> . . . . .								596,012	0	94,904

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► **4**

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

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ► **0**



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<b>Part VIII Statement of Revenue</b>														
Check if Schedule O contains a response or note to any line in this Part VIII <input type="checkbox"/>														
										<b>(A)</b> Total revenue	<b>(B)</b> Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	<b>(D)</b> Revenue excluded from tax under sections 512 - 514	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1a</b> Federated campaigns . . .	<b>1a</b>												
	<b>b</b> Membership dues . . .	<b>1b</b>												
	<b>c</b> Fundraising events . . .	<b>1c</b>												
	<b>d</b> Related organizations	<b>1d</b>												
	<b>e</b> Government grants (contributions)	<b>1e</b>												
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	15,375,991											
	<b>g</b> Noncash contributions included in lines 1a - 1f:\$	<b>1g</b>	1,482,712											
	<b>h Total.</b> Add lines 1a-1f . . . . . ▶										15,375,991			
<b>Program Service Revenue</b>			Business Code											
	<b>2a</b>													
	<b>b</b>													
	<b>c</b>													
	<b>d</b>													
	<b>e</b>													
	<b>f</b> All other program service revenue.													
	<b>g Total.</b> Add lines 2a-2f. . . . . ▶													
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts) . . . . . ▶			2,434,654						2,434,654				
	<b>4</b> Income from investment of tax-exempt bond proceeds ▶													
	<b>5</b> Royalties . . . . . ▶													
			(i) Real	(ii) Personal										
	<b>6a</b> Gross rents	<b>6a</b>												
	<b>b</b> Less: rental expenses	<b>6b</b>												
	<b>c</b> Rental income or (loss)	<b>6c</b>												
	<b>d</b> Net rental income or (loss) . . . . . ▶													
			(i) Securities	(ii) Other										
	<b>7a</b> Gross amount from sales of assets other than inventory	<b>7a</b>	7,452,726											
	<b>b</b> Less: cost or other basis and sales expenses	<b>7b</b>	5,581,752											
	<b>c</b> Gain or (loss)	<b>7c</b>	1,870,974											
	<b>d</b> Net gain or (loss) . . . . . ▶			1,870,974						1,870,974				
	<b>8a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 . . . . .			<b>8a</b>										
	<b>b</b> Less: direct expenses . . . . .			<b>8b</b>										
	<b>c</b> Net income or (loss) from fundraising events . . . ▶													
	<b>9a</b> Gross income from gaming activities. See Part IV, line 19 . . . . .			<b>9a</b>										
	<b>b</b> Less: direct expenses . . . . .			<b>9b</b>										
	<b>c</b> Net income or (loss) from gaming activities . . . ▶													
	<b>10a</b> Gross sales of inventory, less returns and allowances . . .			<b>10a</b>										
<b>b</b> Less: cost of goods sold . . .			<b>10b</b>											
<b>c</b> Net income or (loss) from sales of inventory . . . ▶														
Miscellaneous Revenue			Business Code											
<b>11a</b> ADMINISTRATIVE FEE REVENUE			561000		108,728			108,728						
<b>b</b> OTHER REVENUE			900099		93,944			93,944						
<b>c</b>														
<b>d</b> All other revenue . . . . .														
<b>e Total.</b> Add lines 11a-11d . . . . . ▶						202,672								
<b>12 Total revenue.</b> See instructions . . . . . ▶						19,884,291			202,672			0		
												4,305,628		

Form 990 (2019)

**Part IX Statement of Functional Expenses**

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

Check if Schedule O contains a response or note to any line in this Part IX ☐

<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>	<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 . . . . .	7,724,372	7,724,372		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22 . . . . .	303,098	303,098		
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16. . . . .	8,000	8,000		
<b>4</b> Benefits paid to or for members . . . . .				
<b>5</b> Compensation of current officers, directors, trustees, and key employees . . . . .	437,145	141,871	217,327	77,947
<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) . . . . .				
<b>7</b> Other salaries and wages . . . . .	1,304,622	540,951	590,848	172,823
<b>8</b> Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions) . . . . .	78,034	25,956	42,638	9,440
<b>9</b> Other employee benefits . . . . .	149,282	60,958	67,133	21,191
<b>10</b> Payroll taxes . . . . .	135,388	53,478	62,550	19,360
<b>11</b> Fees for services (non-employees):				
<b>a</b> Management . . . . .				
<b>b</b> Legal . . . . .	2,779		2,779	
<b>c</b> Accounting . . . . .	30,800		30,800	
<b>d</b> Lobbying . . . . .				
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees . . . . .	142,008		142,008	
<b>g</b> Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	501,694	420,971	48,270	32,453
<b>12</b> Advertising and promotion . . . . .	2,453	599	1,652	202
<b>13</b> Office expenses . . . . .	58,814	24,197	23,060	11,557
<b>14</b> Information technology . . . . .	85,169	29,948	31,040	24,181
<b>15</b> Royalties . . . . .				
<b>16</b> Occupancy . . . . .	142,613	49,915	67,028	25,670
<b>17</b> Travel . . . . .	7,567	4,143	2,682	742
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .				
<b>19</b> Conferences, conventions, and meetings . . . . .	198,315	142,246	27,277	28,792
<b>20</b> Interest . . . . .	762		762	
<b>21</b> Payments to affiliates . . . . .				
<b>22</b> Depreciation, depletion, and amortization . . . . .	31,106	10,887	14,620	5,599
<b>23</b> Insurance . . . . .	9,276	3,665	4,285	1,326
<b>24</b> Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
<b>a</b> COMMUNITY EVENTS	49,725	49,725		
<b>b</b> STAFF TRAINING	19,364	11,198	4,384	3,782
<b>c</b> COMMUNICATIONS	15,341	7,425	5,724	2,192
<b>d</b> DUES AND SUBSCRIPTIONS	13,743	7,972	3,993	1,778
<b>e</b> All other expenses	14,656	3,901	8,870	1,885
<b>25</b> Total functional expenses. Add lines 1 through 24e	11,466,126	9,625,476	1,399,730	440,920
<b>26</b> Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

**Part X Balance Sheet**Check if Schedule O contains a response or note to any line in this Part IX ☐

				(A) Beginning of year		(B) End of year	
<b>Assets</b>	<b>1</b>	Cash—non-interest-bearing . . . . .			<b>1</b>		
	<b>2</b>	Savings and temporary cash investments . . . . .		9,212,621	<b>2</b>	7,275,805	
	<b>3</b>	Pledges and grants receivable, net . . . . .		2,073,471	<b>3</b>	6,349,012	
	<b>4</b>	Accounts receivable, net . . . . .			<b>4</b>		
	<b>5</b>	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons . . . . .			<b>5</b>		
	<b>6</b>	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) . . . . .			<b>6</b>		
	<b>7</b>	Notes and loans receivable, net . . . . .			<b>7</b>		
	<b>8</b>	Inventories for sale or use . . . . .			<b>8</b>		
	<b>9</b>	Prepaid expenses and deferred charges . . . . .		39,203	<b>9</b>	38,787	
	<b>10a</b>	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	<b>10a</b>	206,496			
	<b>b</b>	Less: accumulated depreciation	<b>10b</b>	145,991	70,194	<b>10c</b>	60,505
	<b>11</b>	Investments—publicly traded securities . . . . .		95,986,339	<b>11</b>	114,868,308	
	<b>12</b>	Investments—other securities. See Part IV, line 11 . . . . .			<b>12</b>		
	<b>13</b>	Investments—program-related. See Part IV, line 11 . . . . .		1,375,836	<b>13</b>	1,535,402	
	<b>14</b>	Intangible assets . . . . .			<b>14</b>		
	<b>15</b>	Other assets. See Part IV, line 11 . . . . .		2,491,760	<b>15</b>	1,933,686	
<b>16</b>	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .		111,249,424	<b>16</b>	132,061,505		
<b>Liabilities</b>	<b>17</b>	Accounts payable and accrued expenses . . . . .		204,723	<b>17</b>	223,770	
	<b>18</b>	Grants payable . . . . .		1,254,399	<b>18</b>	147,727	
	<b>19</b>	Deferred revenue . . . . .		1,303,626	<b>19</b>	1,368,662	
	<b>20</b>	Tax-exempt bond liabilities . . . . .			<b>20</b>		
	<b>21</b>	Escrow or custodial account liability. Complete Part IV of Schedule D		431,871	<b>21</b>	461,363	
	<b>22</b>	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons . . . . .			<b>22</b>		
	<b>23</b>	Secured mortgages and notes payable to unrelated third parties . . . . .			<b>23</b>		
	<b>24</b>	Unsecured notes and loans payable to unrelated third parties . . . . .			<b>24</b>		
	<b>25</b>	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D		496,505	<b>25</b>	480,383	
	<b>26</b>	<b>Total liabilities.</b> Add lines 17 through 25 . . . . .		3,691,124	<b>26</b>	2,681,905	
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.</b>						
	<b>27</b>	Net assets without donor restrictions . . . . .		101,658,361	<b>27</b>	120,037,927	
	<b>28</b>	Net assets with donor restrictions . . . . .		5,899,939	<b>28</b>	9,341,673	
	<b>Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.</b>						
	<b>29</b>	Capital stock or trust principal, or current funds . . . . .			<b>29</b>		
	<b>30</b>	Paid-in or capital surplus, or land, building or equipment fund . . . . .			<b>30</b>		
	<b>31</b>	Retained earnings, endowment, accumulated income, or other funds . . . . .			<b>31</b>		
	<b>32</b>	<b>Total net assets or fund balances</b> . . . . .		107,558,300	<b>32</b>	129,379,600	
<b>33</b>	<b>Total liabilities and net assets/fund balances</b> . . . . .		111,249,424	<b>33</b>	132,061,505		

**Part XI Reconciliation of Net Assets**Check if Schedule O contains a response or note to any line in this Part XI ☒

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	19,884,291
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	11,466,126
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	8,418,165
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	107,558,300
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	13,302,211
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	100,924
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	129,379,600

**Part XII Financial Statements and Reporting**Check if Schedule O contains a response or note to any line in this Part XII ☒

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

# Additional Data

**Software ID:**  
**Software Version:**  
**EIN:** 91-1007459  
**Name:** GREATER TACOMA COMMUNITY FOUNDATION

Form 990 (2019)

**Form 990, Part III, Line 4a:**

GREATER TACOMA COMMUNITY FOUNDATION PROVIDED MORE THAN \$8 MILLION TO THE COMMUNITY THROUGH DONOR-ADVISED GRANTS, SUPPORT FOR THE ALIGNMENT AND DEVELOPMENT OF EXPANDED LEARNING OPPORTUNITIES THROUGHOUT PIERCE COUNTY, FUNDING FOR COMMUNITY-DRIVEN EFFORTS TO IMPROVE SOCIAL AND ENVIRONMENTAL CONDITIONS THROUGHOUT THE PUYALLUP WATERSHED, SCHOLARSHIPS, GENERAL OPERATING GRANTS, CAPACITY-BUILDING GRANTS, SUPPORT FOR COMMUNITY-DRIVEN CENSUS 2020 PREPARATION, GRANTS FOR GRASSROOTS PROJECTS, IMPACT INVESTING AND PHILANTHROPIC EDUCATION.

SCHEDULE A  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.  
▶ Attach to Form 990 or Form 990-EZ.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization  
GREATER TACOMA COMMUNITY FOUNDATION

Employer identification number  
91-1007459

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

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 ☐ An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university:
- 10 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
- b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
- c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
- d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
- e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f Enter the number of supported organizations . . . . .
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II

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

Section A. Public Support							
Calendar year (or fiscal year beginning in) ►		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . . .	5,075,212	8,549,192	6,577,084	10,799,687	15,375,991	46,377,166
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	<b>Total.</b> Add lines 1 through 3	5,075,212	8,549,192	6,577,084	10,799,687	15,375,991	46,377,166
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . .						12,250,503
6	<b>Public support.</b> Subtract line 5 from line 4.						34,126,663

Section B. Total Support							
Calendar year (or fiscal year beginning in) ►		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4. . . . .	5,075,212	8,549,192	6,577,084	10,799,687	15,375,991	46,377,166
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. . . .	836,434	1,720,441	1,963,211	2,615,049	2,434,654	9,569,789
9	Net income from unrelated business activities, whether or not the business is regularly carried on. . .						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). . . .	96,443	99,331	128,582	142,373	108,728	575,457
11	<b>Total support.</b> Add lines 7 through 10						56,522,412
12	Gross receipts from related activities, etc. (see instructions) . . . . .						<b>12</b> 52,670
13	<b>First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> . . . . . ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage						
14	Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)) . . . . .					14 60.380 %
15	Public support percentage for 2018 Schedule A, Part II, line 14 . . . . .					15 55.560 %
16a	<b>33 1/3% support test—2019.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . . ▶ <input checked="" type="checkbox"/>					
b	<b>33 1/3% support test—2018.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . . ▶ <input type="checkbox"/>					
17a	<b>10%-facts-and-circumstances test—2019.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ▶ <input type="checkbox"/>					
b	<b>10%-facts-and-circumstances test—2018.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ▶ <input type="checkbox"/>					
18	<b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . . ▶ <input type="checkbox"/>					

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .						
<b>2</b> 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						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 . . . . .						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. . .						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total.</b> Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</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.						
<b>c</b> Add lines 7a and 7b. .						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
<b>9</b> Amounts from line 6. . .						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. .						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
<b>c</b> Add lines 10a and 10b.						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . .						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.) . .						

**14 First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here.** . . . . . ☐

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2019 (line 8, column (f) divided by line 13, column (f)) . . . . .	<b>15</b>	
<b>16</b> Public support percentage from 2018 Schedule A, Part III, line 15 . . . . .	<b>16</b>	

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for <b>2019</b> (line 10c, column (f) divided by line 13, column (f)) . . . . .	<b>17</b>	
<b>18</b> Investment income percentage from <b>2018</b> Schedule A, Part III, line 17 . . . . .	<b>18</b>	

**19a 33 1/3% support tests—2019.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ☐

**b 33 1/3% support tests—2018.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ☐

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions . . . . . ☐



**Part IV Supporting Organizations**

(Complete only if you checked a box on line 12 of Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of 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	No
<b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
<b>1</b>		
<b>2</b> Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>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).</i>		
<b>2</b>		
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
<b>3a</b>		
<b>b</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)? <i>If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.</i>		
<b>3b</b>		
<b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.</i>		
<b>3c</b>		
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
<b>4a</b>		
<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
<b>4b</b>		
<b>c</b> Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>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.</i>		
<b>4c</b>		
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (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).</i>		
<b>5a</b>		
<b>b</b> <b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
<b>5b</b>		
<b>c</b> <b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>5c</b>		
<b>6</b> 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? <i>If "Yes," provide detail in <b>Part VI</b>.</i>		
<b>6</b>		
<b>7</b> 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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) .</i>		
<b>7</b>		
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
<b>8</b>		
<b>9a</b> Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in <b>Part VI</b>.</i>		
<b>9a</b>		
<b>b</b> Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in <b>Part VI</b>.</i>		
<b>9b</b>		
<b>c</b> Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in <b>Part VI</b>.</i>		
<b>9c</b>		
<b>10a</b> Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
<b>10a</b>		
<b>b</b> Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).</i>		
<b>10b</b>		

Part IV

Supporting Organizations (continued)

	Yes	No
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> 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?		
<b>b</b> A family member of a person described in (a) above?		
<b>c</b> A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in <b>Part VI</b>.</i>		

Section B. Type I Supporting Organizations

	Yes	No
<b>1</b> 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? <i>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.</i>		
<b>2</b> 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? <i>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.</i>		

Section C. Type II Supporting Organizations

	Yes	No
<b>1</b> 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)? <i>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).</i>		

Section D. All Type III Supporting Organizations

	Yes	No
<b>1</b> 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?		
<b>2</b> 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? <i>If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
<b>3</b> 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? <i>If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally-Integrated Supporting Organizations

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year ( <b>see instructions</b> ):		
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete <b>line 2</b> below.		
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete <b>line 3</b> below.		
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see instructions)		
<b>2</b> Activities Test. <b>Answer (a) and (b) below.</b>		
<b>a</b> 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? <i>If "Yes," then in <b>Part VI</b> identify those supported organizations and explain 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.</i>		
<b>b</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? <i>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.</i>		
<b>3</b> Parent of Supported Organizations. <b>Answer (a) and (b) below.</b>		
<b>a</b> 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 <b>Part VI</b>.</i>		
<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> the role played by the organization in this regard.</i>		

<b>Part V</b> <b>Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations</b>			
<b>1</b> <input type="checkbox"/> Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). <b>See instructions.</b> All other Type III non-functionally integrated supporting organizations must complete Sections A through E.			
<b>Section A - Adjusted Net Income</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b>	Net short-term capital gain	<b>1</b>	
<b>2</b>	Recoveries of prior-year distributions	<b>2</b>	
<b>3</b>	Other gross income (see instructions)	<b>3</b>	
<b>4</b>	Add lines 1 through 3	<b>4</b>	
<b>5</b>	Depreciation and depletion	<b>5</b>	
<b>6</b>	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	<b>6</b>	
<b>7</b>	Other expenses (see instructions)	<b>7</b>	
<b>8</b>	<b>Adjusted Net Income</b> (subtract lines 5, 6 and 7 from line 4)	<b>8</b>	
<b>Section B - Minimum Asset Amount</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b>	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	<b>1</b>	
<b>a</b>	Average monthly value of securities	<b>1a</b>	
<b>b</b>	Average monthly cash balances	<b>1b</b>	
<b>c</b>	Fair market value of other non-exempt-use assets	<b>1c</b>	
<b>d</b>	<b>Total</b> (add lines 1a, 1b, and 1c)	<b>1d</b>	
<b>e</b>	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI):		
<b>2</b>	Acquisition indebtedness applicable to non-exempt use assets	<b>2</b>	
<b>3</b>	Subtract line 2 from line 1d	<b>3</b>	
<b>4</b>	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	<b>4</b>	
<b>5</b>	Net value of non-exempt-use assets (subtract line 4 from line 3)	<b>5</b>	
<b>6</b>	Multiply line 5 by .035	<b>6</b>	
<b>7</b>	Recoveries of prior-year distributions	<b>7</b>	
<b>8</b>	<b>Minimum Asset Amount</b> (add line 7 to line 6)	<b>8</b>	
<b>Section C - Distributable Amount</b>			Current Year
<b>1</b>	Adjusted net income for prior year (from Section A, line 8, Column A)	<b>1</b>	
<b>2</b>	Enter 85% of line 1	<b>2</b>	
<b>3</b>	Minimum asset amount for prior year (from Section B, line 8, Column A)	<b>3</b>	
<b>4</b>	Enter greater of line 2 or line 3	<b>4</b>	
<b>5</b>	Income tax imposed in prior year	<b>5</b>	
<b>6</b>	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	<b>6</b>	
<b>7</b>	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

Part V

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions	
9 Distributable amount for 2019 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required-- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019:			
a From 2014. . . . .			
b From 2015. . . . .			
c From 2016. . . . .			
d From 2017. . . . .			
e From 2018. . . . .			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7:			
\$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2019. 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 2020. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015. . . . .			
b Excess from 2016. . . . .			
c Excess from 2017. . . . .			
d Excess from 2018. . . . .			
e Excess from 2019. . . . .			

## Additional Data

**Software ID:**

**Software Version:**

**EIN:** 91-1007459

**Name:** GREATER TACOMA COMMUNITY FOUNDATION

**Part VI** **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, 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**

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SCHEDULE D  
(Form 990)

Department of the Treasury  
Internal Revenue Service

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.  
► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization  
GREATER TACOMA COMMUNITY FOUNDATION

Employer identification number  
91-1007459

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 . . . . .	93	
2 Aggregate value of contributions to (during year)	5,150,157	
3 Aggregate value of grants from (during year)	1,892,108	
4 Aggregate value at end of year . . . . .	30,918,531	

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . . . . .

☒ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? . . . . .

☒ Yes ☐ No

Part II

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

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

☐ Preservation of land for public use (e.g., recreation or education)

☐ Preservation of an historically important land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

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

	Held at the End of the Year
a Total number of conservation easements . . . . .	2a
b Total acreage restricted by conservation easements . . . . .	2b
c Number of conservation easements on a certified historic structure included in (a) . . . . .	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register . . . . .	2d

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

4 Number of states where property subject to conservation easement is located ►

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

☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ►

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$

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

☐ Yes ☐ No

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

Part III

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

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

(i) Revenue included on Form 990, Part VIII, line 1 . . . . . ► \$

(ii) Assets included in Form 990, Part X . . . . . ► \$

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

a Revenue included on Form 990, Part VIII, line 1 . . . . . ► \$

b Assets included in Form 990, Part X . . . . . ► \$

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

Cat. No. 52283D Schedule D (Form 990) 2019

Part III

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

3

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

a☐ Public exhibition

b☐ Scholarly research

c☐ Preservation for future generations

d☐ Loan or exchange programs

e☐ Other

4

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

5

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

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements.

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

1a

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

☐ Yes

☒ No

b

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

	Amount
1c	
1d	
1e	
1f	

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

☒ Yes

☐ No

b

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

☒

Part V

Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back	
1a	Beginning of year balance	69,740,985	76,561,354	67,968,403	64,615,943	69,484,324
b	Contributions	1,729,977	975,922	931,748	1,943,223	121,544
c	Net investment earnings, gains, and losses	12,263,303	-3,117,519	10,039,865	4,490,311	-3,129,520
d	Grants or scholarships	2,617,087	4,678,772	2,378,662	3,081,074	1,860,405
e	Other expenditures for facilities and programs					
f	Administrative expenses					
g	End of year balance	81,117,178	69,740,985	76,561,354	67,968,403	64,615,943

2

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

a

Board designated or quasi-endowment

97.480 %

b

Permanent endowment

2.520 %

c

Temporarily restricted endowment

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

3a

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

(i) unrelated organizations

(ii) related organizations

	Yes	No
3a(i)		No
3a(ii)		No
3b		

b

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

4

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

Part VI

Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a	Land			
b	Buildings			
c	Leasehold improvements			
d	Equipment	206,496	145,991	60,505
e	Other			
Total.	Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)			60,505

Part VII

Investments—Other Securities.

Complete if the organization answered "Yes" on Form 990, Part 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 valuation: Cost or end-of-year market value
(1) Financial derivatives . . . . .		
(2) Closely-held equity interests . . . . .		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII

Investments—Program Related.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(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 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part 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 answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.) ▶	480,383

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII ☒



**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**

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

<b>1</b>	Total revenue, gains, and other support per audited financial statements . . . . .	<b>1</b>	30,403,560
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
<b>a</b>	Net unrealized gains (losses) on investments . . . . .	<b>2a</b>	13,302,211
<b>b</b>	Donated services and use of facilities . . . . .	<b>2b</b>	
<b>c</b>	Recoveries of prior year grants . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.) . . . . .	<b>2d</b>	100,924
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	13,403,135
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	17,000,425
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b> :		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII.) . . . . .	<b>4b</b>	2,883,866
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	2,883,866
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.) . . . . .	<b>5</b>	19,884,291

**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.

<b>1</b>	Total expenses and losses per audited financial statements . . . . .	<b>1</b>	10,779,622
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
<b>a</b>	Donated services and use of facilities . . . . .	<b>2a</b>	
<b>b</b>	Prior year adjustments . . . . .	<b>2b</b>	
<b>c</b>	Other losses . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.) . . . . .	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	0
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	10,779,622
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line <b>1</b> :		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII.) . . . . .	<b>4b</b>	686,504
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	686,504
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.) . . . . .	<b>5</b>	11,466,126

**Part XIII Supplemental Information**

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

Return Reference	Explanation
See Additional Data Table	

**Part XIII**    **Supplemental Information** *(continued)*

Return Reference	Explanation

**Additional Data**

**Software ID:**  
**Software Version:**  
**EIN:** 91-1007459  
**Name:** GREATER TACOMA COMMUNITY FOUNDATION

**Supplemental Information**

Return Reference	Explanation
PART IV, LINE 2B:	EXPLANATION FOR PART IV, LINE 2B: THE GREATER TACOMA COMMUNITY FOUNDATION SERVES AS TRUSTEE FOR FIVE CHARITABLE REMAINDER UNITRUSTS. EACH UNITRUST WILL TERMINATE UPON THE DEATH OF THE UNITRUST RECIPIENT(S) AT WHICH TIME THE COMMUNITY FOUNDATION WILL ESTABLISH AN ENDOWMENT FUND TO BENEFIT CHARITABLE ORGANIZATION(S) AS SPECIFIED IN THE INDIVIDUAL TRUST AGREEMENTS.

Supplemental Information	
Return Reference	Explanation
PART X, LINE 2:	THE COMMUNITY FOUNDATION BELIEVES IT HAS NO UNCERTAIN TAX POSITIONS.

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS:	CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS 100,924.

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS:	AGENCY FUND INCOME 2,883,866.

Supplemental Information	
Return Reference	Explanation
PART XII, LINE 4B - OTHER ADJUSTMENTS:	AGENCY FUND EXPENSES 686,504.

SCHEDULE F  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.  
► Attach to Form 990.  
► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization  
GREATER TACOMA COMMUNITY FOUNDATION

Employer identification number  
91-1007459

Part I

General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

- 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☒ No
- 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
3a Sub-total . . . . .	0	0			0
b Total from continuation sheets to Part I . . . . .	0	0			0
c Totals (add lines 3a and 3b)	0	0			0



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

<b>1</b>	<b>(a)</b> Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	<b>(c)</b> Region	<b>(d)</b> Purpose of grant	<b>(e)</b> Amount of cash grant	<b>(f)</b> Manner of cash disbursement	<b>(g)</b> Amount of noncash assistance	<b>(h)</b> Description of noncash assistance	<b>(i)</b> Method of valuation (book, FMV, appraisal, other)
			NORTH AMERICA	GENERAL OPERATING SUPPORT	8,000				

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 . . . . .

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

1

<b>Part III</b>	<b>Grants and Other Assistance to Individuals Outside the United States.</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 16.
-----------------	---

Part III can be duplicated if additional space is needed.

[illegible]

**Part IV Foreign Forms**

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* . . . . . ☐ Yes ☒ 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; don't file with Form 990)* . . . . . ☐ Yes ☒ 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 ☒ 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 ☒ 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 ☒ 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; don't file with Form 990).* . . . . . ☐ Yes ☒ No

**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.

**990 Schedule F, Supplemental Information**

Return Reference	Explanation
PART III ACCOUNTING METHOD:	

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I  
(Form 990)

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

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

▶ Attach to Form 990.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

2019

Open to Public  
Inspection

Department of the  
Treasury  
Internal Revenue Service

Name of the organization  
GREATER TACOMA COMMUNITY FOUNDATION

Employer identification number

91-1007459

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . ▶ 189

3 Enter total number of other organizations listed in the line 1 table . . . . . ▶ 9

**Part III** **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) SCHOLARSHIPS	57	265,130			
(2) SPARK GRANTS	13	17,368			
(3) OTHER	21	20,600			
(3)					
(4)					
(5)					
(6)					
(7)					

**Part IV** **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
PART I, LINE 2:	PROCESS FOR MONITORING GRANTS INSIDE THE UNITED STATES IS AS FOLLOWS: - WHEN A GRANT IS AWARDED, IT IS SENT TO THE GRANTEE ALONG WITH A TRANSMITTAL LETTER THAT STATES THAT THE GRANT FUNDS MUST BE USED TO SUPPORT THE STATED PURPOSE AND, IF APPLICABLE, IN ACCORDANCE WITH THE APPROVED GRANT PROPOSAL PLAN, BUDGET AND TIMELINE. CERTAIN GRANTS REQUIRE THE SUBMISSION OF EVALUATION REPORTS AT SPECIFIED INTERVALS FOLLOWING RECEIPT OF THE GRANT. - BY ACCEPTING THE FUNDS, THE GRANTEE HAS ALSO AGREED TO ACCEPTING THE TERMS OF THE GRANT.
SCHEDULE I, PART I, LINE 2	THE SELECTION CRITERIA USED TO AWARD GRANTS IS AS FOLLOWS: - GRANTEE MUST BE A 501(C)3 TAX-EXEMPT NONPROFIT, STATE REGISTERED NONPROFIT, GOVERNMENT/AGENCY, OR THE GRANT IS FOR CHARITABLE PURPOSE AND PUBLIC BENEFIT. - THE GRANT MUST BE USED TO PROVIDE A SERVICE PRIMARILY FOR RESIDENTS OF PIERCE COUNTY - THE COMMUNITY FOUNDATION VALUES THE IMPORTANT WORK THAT NONPROFITS DO WITHIN OUR COMMUNITY AND WE INVEST IN HEALTHY, WELL-RUN NONPROFIT ORGANIZATIONS WITH CLEAR MISSION AND PROGRAMMATIC ALIGNMENT, WHO LEARN FROM THEIR CONSTITUENTS, PARTICIPATE IN FIELD BUILDING ACTIVITIES, ASSESS THEIR IMPACT, AND SHARE GREATER TACOMA COMMUNITY FOUNDATION'S VALUES. - THE GRANTEE MUST NOT DISCRIMINATE ON THE BASIS OF RACE, COLOR, RELIGION, SEXUAL ORIENTATION, PHYSICAL OR MENTAL DISABILITIES, GENDER OR NATIONAL ORIGIN; BE INCLUSIVE WITH CLIENTS, VOLUNTEERS AND STAFF - IF A GRANT IS RECOMMENDED TO BE MADE TO A PUBLIC CHARITY ACCORDING TO SECTION 509(A), THE FUNDS MUST BE SPENT FOR CHARITABLE PURPOSES AND NOT FOR PRIVATE GAIN OR POLITICAL ACTIVITIES - A RECOMMENDED GRANT WILL NOT BE MADE TO AN INDIVIDUAL OR FAMILY FOLLOWING A TRAGEDY AND WILL PROVIDE NO PRIVATE BENEFIT TO THE DONOR

Additional Data

Software ID:  
Software Version:  
EIN: 91-1007459  
Name: GREATER TACOMA COMMUNITY FOUNDATION

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ACE DEVELOPMENT FUND INC 1027 DAISY LN SW TUMWATER, WA 98512	27-1923757	501(C)(3)	5,000				FUND A SCHOOL IN INDIA
ALCHEMY INDOOR SKATEPARK AND EDUCATION CENTER PO BOX 569 TACOMA, WA 98402	46-2756372	501(C)(3)	6,000				EFFORTS TO INCREASE ACCESS TO SAFE, HEALTHY, & AFFORDABLE ACTIVE TRANSPORTATION OPTIONS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALCHEMY INDOOR SKATEPARK AND EDUCATION CENTER PO BOX 569 TACOMA, WA 98402	46-2756372	501(C)(3)	7,500				GENERAL OPERATING SUPPORT
ALCHEMY INDOOR SKATEPARK AND EDUCATION CENTER PO BOX 569 TACOMA, WA 98402	46-2756372	501(C)(3)	455				YOUTH ACCESS FUND



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALCHEMY INDOOR SKATEPARK AND EDUCATION CENTER PO BOX 569 TACOMA, WA 98402	46-2756372	501(C)(3)	1,308				POP-UP SKATEPARKS EXPANSIONS
ALCHEMY INDOOR SKATEPARK AND EDUCATION CENTER PO BOX 569 TACOMA, WA 98402	46-2756372	501(C)(3)	500				BEFORE SCHOOL SKATE CLUB IN TACOMA PUBLIC SCHOOLS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALCHEMY INDOOR SKATEPARK AND EDUCATION CENTER PO BOX 569 TACOMA, WA 98402	46-2756372	501(C)(3)	1,650				ELO PROGRAMMING IN TPS: BEFORE SCHOOL SKATE CLUB
ALZHEIMER'S ASSOCIATION WESTERN AND CENTRAL WA STATE CHAPTER NORTH TOWER SEATTLE, WA 98119	13-3039601	501(C)(3)	5,000				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMARA 5907 MARTIN LUTHER KING JR WAY SEATTLE, WA 98118	91-0577487	501(C)(3)	1,600				PROGRAMMING AT GATEWAYS FOR YOUTH & FAMILIES PROPERTY
AMARA 5907 MARTIN LUTHER KING JR WAY SEATTLE, WA 98118	91-0577487	501(C)(3)	3,400				CARE, KEEP & MAINTENANCE OF CHILDREN'S FACILITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMARA 5907 MARTIN LUTHER KING JR WAY SEATTLE, WA 98118	91-0577487	501(C)(3)	15,000				TRAUMA-INFORMED, CHILD-CENTERED WORK IN PIERCE COUNTY EMERGENCY SANCTUARY
AMERICAN CANCER SOCIETY GREAT WEST DIVISION PIERCE COUNTY 1313 BROADWAY STE 100 TACOMA, WA 98402	13-1788491	501(C)(3)	3,501				GENERAL OPERATIONS IN PIERCE COUNTY, WA

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN CANCER SOCIETY GREAT WEST DIVISION PIERCE COUNTY 1313 BROADWAY STE 100 TACOMA, WA 98402	13-1788491	501(C)(3)	813				GENERAL SUPPORT OF PIERCE COUNTY, WA
AMERICAN CANCER SOCIETY GREAT WEST DIVISION PIERCE COUNTY 1313 BROADWAY STE 100 TACOMA, WA 98402	13-1788491	501(C)(3)	6,735				RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN CANCER SOCIETY GREAT WEST DIVISION PIERCE COUNTY 1313 BROADWAY STE 100 TACOMA, WA 98402	13-1788491	501(C)(3)	198				GENERAL CHARITABLE SUPPORT
AMERICAN CANCER SOCIETY NORTHWEST DIVISION 5601 6TH AVE S STE 491 SEATTLE, WA 98109	91-0583892	501(C)(3)	12,500				CEOS AGAINST CANCER EXECUTIVE TEAM FUNDRAISING MATCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN CIVIL LIBERTIES UNION OF WASHINGTON FOUNDATION 901 5TH AVE STE 630 SEATTLE, WA 98164	23-7076867	501(C)(3)	10,000				GENERAL OPERATING SUPPORT
AMERICAN LEADERSHIP FORUM TACOMAPIERCE COUNTY PO BOX 1914 TACOMA, WA 98401	91-1442921	501(C)(3)	500				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN LEADERSHIP FORUM TACOMA PIERCE COUNTY PO BOX 1914 TACOMA, WA 98401	91-1442921	501(C)(3)	2,500				GENERAL OPERATING SUPPORT
AMERICAN LEADERSHIP FORUM TACOMA PIERCE COUNTY PO BOX 1914 TACOMA, WA 98401	91-1442921	501(C)(3)	30,000				SUPPORT OF 30TH ANNIVERSARY



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ANNIE WRIGHT SCHOOLS 827 N TACOMA AVE TACOMA, WA 98403	91-0567266	501(C)(3)	1,000				GENERAL OPERATING SUPPORT
ANNIE WRIGHT SCHOOLS 827 N TACOMA AVE TACOMA, WA 98403	91-0567266	501(C)(3)	21,300				BENEFITTING STUDENTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASIA PACIFIC CULTURAL CENTER 4851 SOUTH TACOMA WAY TACOMA, WA 98409	91-1854410	501(C)(3)	500				GENERAL OPERATING SUPPORT
ASIA PACIFIC CULTURAL CENTER 4851 SOUTH TACOMA WAY TACOMA, WA 98409	91-1854410	501(C)(3)	2,500				GOLD SPONSORSHIP: 22ND ANNUAL CELEBRATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASIA PACIFIC CULTURAL CENTER 4851 SOUTH TACOMA WAY TACOMA, WA 98409	91-1854410	501(C)(3)	20,000				CENSUS 2020 ASIA PACIFIC COMMUNITY OUTREACH
ASSOCIATED MINISTRIES OF TACOMA-PIERCE COUNTY 901 S 13TH ST TACOMA, WA 98405	91-0847534	501(C)(3)	2,000				COMMUNITY RESOURCE CONNECTION CENTER (DIRECT SERVICES)

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASSOCIATED MINISTRIES OF TACOMA-PIERCE COUNTY 901 S 13TH ST TACOMA, WA 98405	91-0847534	501(C)(3)	300				UNRESTRICTED
ASSOCIATED MINISTRIES OF TACOMA-PIERCE COUNTY 901 S 13TH ST TACOMA, WA 98405	91-0847534	501(C)(3)	3,500				SPONORSHIP OF MARCH 19, 2019 INTERFAITH WOMEN'S CONFERENCE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASSOCIATED MINISTRIES OF TACOMA-PIERCE COUNTY 901 S 13TH ST TACOMA, WA 98405	91-0847534	501(C)(3)	300				GENERAL OPERATING SUPPORT
ASSOCIATED MINISTRIES OF TACOMA-PIERCE COUNTY 901 S 13TH ST TACOMA, WA 98405	91-0847534	501(C)(3)	200				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASSOCIATED MINISTRIES OF TACOMA-PIERCE COUNTY 901 S 13TH ST TACOMA, WA 98405	91-0847534	501(C)(3)	600				GENERAL OPERATING SUPPORT
BECAUSE INTERNATIONAL 120 9TH AVE S STE 110 NAMPA, ID 83651	26-4190308	501(C)(3)	6,000				SHOES TO UGANDA REFUGEE CAMP

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BELLARMINE PREPARATORY SCHOOL 2300 S WASHINGTON ST TACOMA, WA 984051399	91-1109930	501(C)(3)	2,224				GENERAL OPERATING SUPPORT
BELLARMINE PREPARATORY SCHOOL 2300 S WASHINGTON ST TACOMA, WA 984051399	91-1109930	501(C)(3)	250				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BELLARMINE PREPARATORY SCHOOL 2300 S WASHINGTON ST TACOMA, WA 984051399	91-1109930	501(C)(3)	3,860				GENERAL OPERATING SUPPORT
BELLARMINE PREPARATORY SCHOOL 2300 S WASHINGTON ST TACOMA, WA 984051399	91-1109930	501(C)(3)	1,966				GENERAL OPERATING SUPPORT



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BIG BROTHERS BIG SISTERS OF PUGET SOUND 1600 S GRAHAM ST SEATTLE, WA 98108	91-0673185	501(C)(3)	5,775				ELO PROGRAMMING IN TPS: BIG SIBS LITTLE SIBS
BIG BROTHERS BIG SISTERS OF PUGET SOUND 1600 S GRAHAM ST SEATTLE, WA 98108	91-0673185	501(C)(3)	500				ELO PROVIDER PARTICIPATION: BIG SIBS LITTLE SIBS IN TACOMA PUBLIC SCHOOLS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BLACK GIRLS CODE PO BOX 640926 SAN FRANCISCO, CA 94164	45-4930539	501(C)(3)	5,000				GENERAL OPERATING SUPPORT
BOLD SOLUTIONS 8221 N 11TH ST TACOMA, WA 98406	94-3221636	501(C)(3)	7,500				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOYS & GIRLS CLUBS OF SOUTH PUGET SOUND 3875 S 66TH ST STE 100 TACOMA, WA 98409	91-0759832	501(C)(3)	500				GENERAL OPERATING SUPPORT
BOYS & GIRLS CLUBS OF SOUTH PUGET SOUND 3875 S 66TH ST STE 100 TACOMA, WA 98409	91-0759832	501(C)(3)	33,200				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOYS & GIRLS CLUBS OF SOUTH PUGET SOUND 3875 S 66TH ST STE 100 TACOMA, WA 98409	91-0759832	501(C)(3)	202,500				ELO SITE DIRECTOR; MANAGER TIME & PARTICIPATION; SUPPLIES AT SCHOOLS SERVED
BOYS & GIRLS CLUBS OF SOUTH PUGET SOUND 3875 S 66TH ST STE 100 TACOMA, WA 98409	91-0759832	501(C)(3)	500				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOYS & GIRLS CLUBS OF SOUTH PUGET SOUND 3875 S 66TH ST STE 100 TACOMA, WA 98409	91-0759832	501(C)(3)	3,860				GENERAL OPERATING SUPPORT
BOYS & GIRLS CLUBS OF SOUTH PUGET SOUND 3875 S 66TH ST STE 100 TACOMA, WA 98409	91-0759832	501(C)(3)	300				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOYS & GIRLS CLUBS OF SOUTH PUGET SOUND 3875 S 66TH ST STE 100 TACOMA, WA 98409	91-0759832	501(C)(3)	300				GENERAL OPERATING SUPPORT
BOYS & GIRLS CLUBS OF SOUTH PUGET SOUND 3875 S 66TH ST STE 100 TACOMA, WA 98409	91-0759832	501(C)(3)	13,978				SUPPORT OF THE DONALD G. TOPPING HOPE CENTER

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOYS & GIRLS CLUBS OF SOUTH PUGET SOUND 3875 S 66TH ST STE 100 TACOMA, WA 98409	91-0759832	501(C)(3)	2,085				GENERAL OPERATING SUPPORT
BOYS & GIRLS CLUBS OF SOUTH PUGET SOUND 3875 S 66TH ST STE 100 TACOMA, WA 98409	91-0759832	501(C)(3)	1,000				USDA MEAL PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOYS & GIRLS CLUBS OF SOUTH PUGET SOUND 3875 S 66TH ST STE 100 TACOMA, WA 98409	91-0759832	501(C)(3)	1,000				LEGACY OF HOPE GIFT
BOYS & GIRLS CLUBS OF SOUTH PUGET SOUND 3875 S 66TH ST STE 100 TACOMA, WA 98409	91-0759832	501(C)(3)	500				GENERAL OPERATING SUPPORT



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOYS & GIRLS CLUBS OF SOUTH PUGET SOUND 3875 S 66TH ST STE 100 TACOMA, WA 98409	91-0759832	501(C)(3)	6,000				NUTRITIONAL FOOD PROGRAM
CASCADE BICYCLE CLUB 7787 62ND AVE NE SEATTLE, WA 98115	91-2165219	501(C)(3)	6,000				EFFORTS THAT INCREASE ACCESS TO SAFE, HEALTHY, AND AFFORDABLE ACTIVE TRANSPORTATION OPTIONS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CASCADE BICYCLE CLUB 7787 62ND AVE NE SEATTLE, WA 98115	91-2165219	501(C)(3)	500				CHARITABLE PURPOSES
CASCADE BICYCLE CLUB 7787 62ND AVE NE SEATTLE, WA 98115	91-2165219	501(C)(3)	9,000				ACTIVE COI ACTIVITY 3.B.2.3.F: MAJOR TAYLOR PROJECT INCREASED CAPACITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CATHOLIC COMMUNITY SERVICES OF WESTERN WASHINGTON PO BOX 1235 TACOMA, WA 98405	91-1585652	501(C)(3)	300				NATIVITY HOUSE
CATHOLIC COMMUNITY SERVICES OF WESTERN WASHINGTON PO BOX 1235 TACOMA, WA 98405	91-1585652	501(C)(3)	1,211				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CATHOLIC COMMUNITY SERVICES OF WESTERN WASHINGTON PO BOX 1235 TACOMA, WA 98405	91-1585652	501(C)(3)	9,260				HOSPITALITY KITCHEN
CATHOLIC COMMUNITY SERVICES OF WESTERN WASHINGTON PO BOX 1235 TACOMA, WA 98405	91-1585652	501(C)(3)	35,000				PIERCE COUNTY COALITION TO END HOMELESSNESS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CATHOLIC COMMUNITY SERVICES OF WESTERN WASHINGTON PO BOX 1235 TACOMA, WA 98405	91-1585652	501(C)(3)	300				NATIVITY HOUSE
CENTRO LATINO 1208 S 10TH ST TACOMA, WA 98405	91-1488193	501(C)(3)	45,000				LUGAR SEGURO PARA SER CONTADO EN EL CENSO DEL 2020

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHARITIES AID FOUNDATION OF AMERICA 225 REINEKERS LN STE 375 ALEXANDRIA, VA 22314	43-1634280	501(C)(3)	1,510				PARKINSON'S UK - GENERAL OPERATING SUPPORT (ON BEHALF OF JUSTIN PERSICH)
CHARITIES AID FOUNDATION OF AMERICA 225 REINEKERS LN STE 375 ALEXANDRIA, VA 22314	43-1634280	501(C)(3)	5,435				PARKINSON'S UK: GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHARLES WRIGHT ACADEMY 7723 CHAMBERS CREEK RD W TACOMA, WA 98467	91-0673111	501(C)(3)	250				GENERAL OPERATING SUPPORT
CHARLES WRIGHT ACADEMY 7723 CHAMBERS CREEK RD W TACOMA, WA 98467	91-0673111	501(C)(3)	2,000				GROSS MEMORIAL SOCCER FIELD MAINTENANCE & CAPITAL EXPENSES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHARLES WRIGHT ACADEMY 7723 CHAMBERS CREEK RD W TACOMA, WA 98467	91-0673111	501(C)(3)	2,000				DIANE HUNT OUTDOOR CLASSROOM
CHARLES WRIGHT ACADEMY 7723 CHAMBERS CREEK RD W TACOMA, WA 98467	91-0673111	501(C)(3)	250				PHYLLIS M. BOYLE STUDENT OPPORTUNITY FUND



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHARLES WRIGHT ACADEMY 7723 CHAMBERS CREEK RD W TACOMA, WA 98467	91-0673111	501(C)(3)	600				122 YEARS RETIREMENT PARTY HELD FOR BOB GORDON, DIANE HUNT, AND JUDY HERRINGTON
CHARLES WRIGHT ACADEMY 7723 CHAMBERS CREEK RD W TACOMA, WA 98467	91-0673111	501(C)(3)	600				ANNUAL FUND

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHINESE RECONCILIATION PROJECT FOUNDATION PO BOX 7024 TACOMA, WA 98406	91-1647325	501(C)(3)	5,200				GENERAL OPERATING SUPPORT
CITY OF TACOMA OFFICE OF ENVIRONMENTAL POLICY AND SUSTAINABILITY TACOMA, WA 98402	91-6001283	GOVERNMENT	14,500				FOREST COI ACTIVITY 7.3.1: TREE COUPON PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CITY OF TACOMA TACOMA PUBLIC UTILITIES PO BOX 11007 TACOMA, WA 98411		GOVERNMENT	3,400				WARM FUND REIMBURSEMENTS (3/1-3/31/19)
CITY OF TACOMA TACOMA PUBLIC UTILITIES PO BOX 11007 TACOMA, WA 98411		GOVERNMENT	2,800				WARM FUND REIMBURSEMENT (2/1/19 - 2/28/19)

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CITY OF TACOMA TACOMA PUBLIC UTILITIES PO BOX 11007 TACOMA, WA 98411		GOVERNMENT	4,800				WARM FUND REIMBURSEMENT (1/1-1/31/2019)
CITY OF TACOMA TACOMA PUBLIC UTILITIES PO BOX 11007 TACOMA, WA 98411		GOVERNMENT	2,000				WARM FUND REIMBURSEMENTS (4/1-4/30/19)

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CITY OF TACOMA TACOMA PUBLIC UTILITIES PO BOX 11007 TACOMA, WA 98411		GOVERNMENT	6,400				TPU: WARM FUND (12/1-12/31/18)
CITY OF TACOMA TACOMA PUBLIC UTILITIES PO BOX 11007 TACOMA, WA 98411		GOVERNMENT	2,600				WARM FUND REIMBURSEMENTS (5/1-5/31/19)

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CITY OF TACOMA TACOMA PUBLIC UTILITIES PO BOX 11007 TACOMA, WA 98411		GOVERNMENT	3,800				WARM FUND REIMBURSEMENTS (10/1-10/31/19)
CITY OF TACOMA TACOMA PUBLIC UTILITIES PO BOX 11007 TACOMA, WA 98411		GOVERNMENT	1,800				WARM FUND REIMBURSEMENTS (11/1-11/30/19)

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COLLABORATIVE FOR ACADEMIC SOCIAL AND EMOTIONAL LEARNING 815 W VAN BUREN ST STE 210 CHICAGO, IL 60607	20-5884201	501(C)(3)	10,000				ANN MCKAY BRYSON SUPPORT FOR TACOMA PUBLIC SCHOOLS PROGRESS OF SEL STANDARDS
COLLEGE SUCCESS FOUNDATION EASTGATE BUILDING BELLEVUE, WA 98007	91-2036088	501(C)(3)	6,500				UP TO FOUR YEARS OF COLLEGE SUPPORT SERVICES FOR TWO DR. HSUSHI YEH SCHOLARSHIP RECIPIENTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COLLEGE SUCCESS FOUNDATION EASTGATE BUILDING BELLEVUE, WA 98007	91-2036088	501(C)(3)	500				LUNCHEON
COLLEGE SUCCESS FOUNDATION EASTGATE BUILDING BELLEVUE, WA 98007	91-2036088	501(C)(3)	41,600				CSF - TACOMA: DR. HSUSHI YEH SCHOLARSHIPS (2019)



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COLLEGE SUCCESS FOUNDATION EASTGATE BUILDING BELLEVUE, WA 98007	91-2036088	501(C)(3)	1,000				GENERAL OPERATING SUPPORT
COMMUNITIES IN SCHOOLS OF LAKEWOOD 10828 GRAVELLY LAKE DR SW STE 104 LAKEWOOD, WA 98499	91-1732922	501(C)(3)	500				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COMMUNITIES IN SCHOOLS OF LAKEWOOD 10828 GRAVELLY LAKE DR SW STE 104 LAKEWOOD, WA 98499	91-1732922	501(C)(3)	2,000				GENERAL OPERATING SUPPORT
COMMUNITIES IN SCHOOLS OF LAKEWOOD 10828 GRAVELLY LAKE DR SW STE 104 LAKEWOOD, WA 98499	91-1732922	501(C)(3)	5,000				"MY STORY COUNTS"

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COMMUNITIES IN SCHOOLS OF LAKEWOOD 10828 GRAVELLY LAKE DR SW STE 104 LAKEWOOD, WA 98499	91-1732922	501(C)(3)	4,000				"MY STORY COUNTS"
COMMUNITIES IN SCHOOLS OF PENINSULA PO BOX 684 VAUGHN, WA 98394	91-2024847	501(C)(3)	5,000				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COMMUNITIES IN SCHOOLS OF TACOMA 2141 S J ST RM 8 TACOMA, WA 98405	91-2138848	501(C)(3)	3,000				SCHOOLS TO COMMUNITY OUTREACH
COMMUNITIES IN SCHOOLS OF TACOMA 2141 S J ST RM 8 TACOMA, WA 98405	91-2138848	501(C)(3)	2,000				SCHOOLS TO COMMUNITY OUTREACH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COMMUNITY BUILDERS PO BOX 875 CLE ELUM, WA 98922	77-0616768	501(C)(3)	5,000				AFTERSCHOOL PROGRAMS
COMMUNITY PRESBYTERIAN CHURCH PO BOX 1930 BUCKLEY, WA 98321		CHURCH	7,000				WEEKEND FOOD PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COMPREHENSIVE LIFE RESOURCES 1305 TACOMA AVE S STE 305 TACOMA, WA 98402	91-0854239	501(C)(3)	30,000				ANCHOR COMMUNITY INITIATIVE IN PIERCE COUNTY
COWLITZ INDIAN TRIBE PO BOX 2006 LONGVIEW, WA 98632	91-1265477	GOVERNMENT	10,000				COWLITZ 2020 CENSUS PIERCE COUNTY COMMUNITY DEVELOPMENT PROJECT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CRYSTAL JUDSON FAMILY JUSTICE CENTER 718 COURT E TACOMA, WA 98402	91-6001359	GOVERNMENT	4,967				VSAT
CRYSTAL JUDSON FAMILY JUSTICE CENTER 718 COURT E TACOMA, WA 98402	91-6001359	GOVERNMENT	5,000				DOMESTIC VIOLENCE HELPLINE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CRYSTAL JUDSON FAMILY JUSTICE CENTER 718 COURT E TACOMA, WA 98402	91-6001359	GOVERNMENT	1,646				SHINE BRIGHTLY
DIVINE MERCY CARE 4001 FAIR RIDGE DR STE 305 FAIRFAX, VA 220332917	34-1985248	501(C)(3)	6,000				DIVINE MERCY CENTER: MEDICAL CARE FOR WOMEN



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DOWNTOWN ON THE GO 950 PACIFIC AVE STE 300 TACOMA, WA 98402	46-4368609	501(C)(4)	500				GENERAL OPERATING SUPPORT
DOWNTOWN ON THE GO 950 PACIFIC AVE STE 300 TACOMA, WA 98402	46-4368609	501(C)(4)	6,500				EFFORTS THAT INCREASE ACCESS TO SAFE, HEALTHY, AND AFFORDABLE ACTIVE TRANSPORTATION OPTIONS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DOWNTOWN ON THE GO 950 PACIFIC AVE STE 300 TACOMA, WA 98402	46-4368609	501(C)(4)	5,000				ACTIVE COI ACTIVITY 3.A.1.2.A: WALK TACOMA 2019 SERIES
DOWNTOWN ON THE GO 950 PACIFIC AVE STE 300 TACOMA, WA 98402	46-4368609	501(C)(4)	2,000				ACTIVE COI ACTIVITY 3.A.1.5.A: TRY THE BUS EVENTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DOWNTOWN ON THE GO 950 PACIFIC AVE STE 300 TACOMA, WA 98402	46-4368609	501(C)(4)	800				ACTIVE COI ACTIVITY 3.B.2.4.A: VELOFEMMES RIDE INSURANCE
DOWNTOWN ON THE GO 950 PACIFIC AVE STE 300 TACOMA, WA 98402	46-4368609	501(C)(4)	1,000				ACTIVE COI ACTIVITY 1.A.5.6.A: TRAINING ACTIVE TRANSPORTATION CHAMPIONS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DOWNTOWN ON THE GO 950 PACIFIC AVE STE 300 TACOMA, WA 98402	46-4368609	501(C)(4)	12,000				ACTIVE COI ACTIVITY 1.A.5.4.E: TRANSPORTATION ADVOCACY TRAINING
EATONVILLE AREA COUNCIL DBA EATONVILLE FAMILY AGENCY PO BOX 1764 EATONVILLE, WA 98328	91-1059530	501(C)(3)	1,500				COUNTING U

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EATONVILLE AREA COUNCIL DBA EATONVILLE FAMILY AGENCY PO BOX 1764 EATONVILLE, WA 98328	91-1059530	501(C)(3)	8,500				COUNTING U
EATONVILLE AREA COUNCIL DBA EATONVILLE FAMILY AGENCY PO BOX 1764 EATONVILLE, WA 98328	91-1059530	501(C)(3)	8,000				SUMMER YOUTH PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EMERGENCY FOOD NETWORK 3318 92ND ST S LAKEWOOD, WA 98499	94-3131776	501(C)(3)	600				PURCHASING AND DISTRIBUTING FOOD TO THOSE IN NEED
EMERGENCY FOOD NETWORK 3318 92ND ST S LAKEWOOD, WA 98499	94-3131776	501(C)(3)	250				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EMERGENCY FOOD NETWORK 3318 92ND ST S LAKEWOOD, WA 98499	94-3131776	501(C)(3)	2,500				GENERAL OPERATING SUPPORT
EMERGENCY FOOD NETWORK 3318 92ND ST S LAKEWOOD, WA 98499	94-3131776	501(C)(3)	10,000				HUNGER WALK SPONSORSHIP

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EMERGENCY FOOD NETWORK 3318 92ND ST S LAKEWOOD, WA 98499	94-3131776	501(C)(3)	500				GENERAL OPERATING SUPPORT
EMERGENCY FOOD NETWORK 3318 92ND ST S LAKEWOOD, WA 98499	94-3131776	501(C)(3)	250				GENERAL OPERATING SUPPORT



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EMERGENCY FOOD NETWORK 3318 92ND ST S LAKEWOOD, WA 98499	94-3131776	501(C)(3)	1,000				SPECIAL FOOD PURCHASES - INFANTS & YOUNG CHILDREN
EMERGENCY FOOD NETWORK 3318 92ND ST S LAKEWOOD, WA 98499	94-3131776	501(C)(3)	20,000				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EMERGENCY FOOD NETWORK 3318 92ND ST S LAKEWOOD, WA 98499	94-3131776	501(C)(3)	250				PROVIDING FOOD FOR THOSE WHO CAN'T AFFORD GROCERIES
EMERGENCY FOOD NETWORK 3318 92ND ST S LAKEWOOD, WA 98499	94-3131776	501(C)(3)	12,000				EMERGENCY FOOD SYSTEM CENSUS OUTREACH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EMERGENCY FOOD NETWORK 3318 92ND ST S LAKEWOOD, WA 98499	94-3131776	501(C)(3)	500				GENERAL OPERATING SUPPORT: IN HONOR OF TOBY MURRAY
EMERGENCY FOOD NETWORK 3318 92ND ST S LAKEWOOD, WA 98499	94-3131776	501(C)(3)	250				HUNGER WALK IN HONOR OF TOBY MURRAY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EMMANUEL LUTHERAN CHURCH 1315 N STEVENS ST TACOMA, WA 98406	91-0692625	501(C)(3)	9,066				GENERAL OPERATING SUPPORT
EMMANUEL LUTHERAN CHURCH 1315 N STEVENS ST TACOMA, WA 98406	91-0692625	501(C)(3)	800				UNRESTRICTED PURPOSES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FAB-5 1120 S 11TH ST TACOMA, WA 98405	46-0869786	501(C)(3)	5,000				FAB-5: #DESIGNTHEHILL
FAB-5 1120 S 11TH ST TACOMA, WA 98405	46-0869786	501(C)(3)	500				GENERAL FUND

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FAMILIES UNLIMITED NETWORK PO BOX 65672 UNIVERSITY PLACE, WA 98464	20-0435496	501(C)(3)	7,500				PROGRAMS
FIRST 5 FUNDAMENTALS 1501 PACIFIC AVE SE STE 203 TACOMA, WA 98402	80-0209462	501(C)(3)	15,000				PROJECT CHILD SUCCESS MOBILIZING ON THE GROUND ADVOCATES TO ENSURE THE COUNT OF YOUNG CHILDREN

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FIRST CHURCH OF CHRIST SCIENTIST TACOMA 902 DIVISION AVE TACOMA, WA 98403	91-6000741	CHURCH	7,000				GENERAL OPERATING SUPPORT
FIRST PRESBYTERIAN CHURCH 20 TACOMA AVE S TACOMA, WA 98402	91-0575942	501(C)(3)	3,501				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FIRST PRESBYTERIAN CHURCH 20 TACOMA AVE S TACOMA, WA 98402	91-0575942	501(C)(3)	3,800				GENERAL OPERATING SUPPORT
FOOTHILLS RAILS TO TRAILS COALITION PO BOX 192 PUYALLUP, WA 98371	94-3053040	501(C)(3)	1,800				CHARITABLE PURPOSES



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FOOTHILLS RAILS TO TRAILS COALITION PO BOX 192 PUYALLUP, WA 98371	94-3053040	501(C)(3)	9,000				ACTIVE COI ACTIVITY 2.A.4.4: OPPORTUNITY FUND
FOOTHILLS RAILS TO TRAILS COALITION PO BOX 192 PUYALLUP, WA 98371	94-3053040	501(C)(3)	6,000				EFFORTS TO INCREASE ACCESS TO SAFE, HEALTHY, AND AFFORDABLE ACTIVE TRANSPORTATION OPTIONS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FOREVERGREEN TRAILS 505 BROADWAY UNIT 409 TACOMA, WA 98402	74-3215815	501(C)(3)	250				PROFESSIONAL DEVELOPMENT (REIMBURSEMENT)
FOREVERGREEN TRAILS 505 BROADWAY UNIT 409 TACOMA, WA 98402	74-3215815	501(C)(3)	6,000				ACTIVE TRANSPORTATION SUPPORT & TECHNICAL ASSISTANCE, RECOGNITION & STEWARDSHIP PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FOREVERGREEN TRAILS 505 BROADWAY UNIT 409 TACOMA, WA 98402	74-3215815	501(C)(3)	7,000				EFFORTS THAT INCREASE ACCESS TO SAFE, HEALTHY, AND AFFORDABLE ACTIVE TRANSPORTATION OPTIONS
FOREVERGREEN TRAILS 505 BROADWAY UNIT 409 TACOMA, WA 98402	74-3215815	501(C)(3)	4,000				PIERCE COUNTY TRAILS DAY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FOREVERGREEN TRAILS 505 BROADWAY UNIT 409 TACOMA, WA 98402	74-3215815	501(C)(3)	500				SUPPORT FOR PIERCE COUNTY TRAILS CONFERENCE
FOREVERGREEN TRAILS 505 BROADWAY UNIT 409 TACOMA, WA 98402	74-3215815	501(C)(3)	1,000				TRAINING ACTIVE TRANSPORTATION CHAMPIONS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FOREVERGREEN TRAILS 505 BROADWAY UNIT 409 TACOMA, WA 98402	74-3215815	501(C)(3)	500				GENERAL OPERATING SUPPORT
FORTERRA 901 5TH AVE STE 2200 SEATTLE, WA 98164	94-3112461	501(C)(3)	1,500				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FORTERRA 901 5TH AVE STE 2200 SEATTLE, WA 98164	94-3112461	501(C)(3)	4,000				GREEN CITIES (TACOMA, PUYALLUP AND PIERCE COUNTY)
FORTERRA 901 5TH AVE STE 2200 SEATTLE, WA 98164	94-3112461	501(C)(3)	3,000				ASSET MAPPING OF MUNICIPAL PROPERTIES FOR DEVELOPMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FORTERRA 901 5TH AVE STE 2200 SEATTLE, WA 98164	94-3112461	501(C)(3)	5,500				CARBON RIVER FORUM
FORTERRA 901 5TH AVE STE 2200 SEATTLE, WA 98164	94-3112461	501(C)(3)	7,500				CARBON RIVER FORUM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FOSS HOME AND VILLAGE 13023 GREENWOOD AVE N SEATTLE, WA 981337197	91-0573114	501(C)(3)	40,000				FOSS BUS
FOSS WATERWAY DEVELOPMENT AUTHORITY 535 E DOCK ST STE 204 TACOMA, WA 98402		GOVERNMENT	89,188				REIMBURSEMENT FOR CAMPAIGN EXPENSES



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FOSS WATERWAY DEVELOPMENT AUTHORITY 535 E DOCK ST STE 204 TACOMA, WA 98402		GOVERNMENT	44,050				REIMBURSEMENT FOR CAMPAIGN EXPENSES
FRANCISCAN FOUNDATION WASHINGTON 1149 MARKET ST MS 10-02 TACOMA, WA 984023515	91-1145592	501(C)(3)	1,251				HOSPICE CARE IN PIERCE COUNTY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FRANCISCAN FOUNDATION WASHINGTON 1149 MARKET ST MS 10-02 TACOMA, WA 984023515	91-1145592	501(C)(3)	11,820				MEDICAL EXPENSE SHORTFALLS FOR PEOPLE WITH LIFE THREATENING ILLNESSES
FRANCISCAN FOUNDATION WASHINGTON 1149 MARKET ST MS 10-02 TACOMA, WA 984023515	91-1145592	501(C)(3)	500				CANCER AND/OR CARDIAC PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FRANCISCAN FOUNDATION WASHINGTON 1149 MARKET ST MS 10-02 TACOMA, WA 984023515	91-1145592	501(C)(3)	250				GENERAL OPERATING SUPPORT
FRIENDS OF 885 FM - KNKX 930 BROADWAY TACOMA, WA 98402	81-1095651	501(C)(3)	300				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FRIENDS OF 885 FM - KNKX 930 BROADWAY TACOMA, WA 98402	81-1095651	501(C)(3)	15,000				GENERAL OPERATING SUPPORT (IN HONOR OF THOMAS WALDRON)
FRIENDS OF 885 FM - KNKX 930 BROADWAY TACOMA, WA 98402	81-1095651	501(C)(3)	1,000				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FRIENDS OF 885 FM - KNKX 930 BROADWAY TACOMA, WA 98402	81-1095651	501(C)(3)	25,000				NEXT CAMPAIGN
FRIENDS OF 885 FM - KNKX 930 BROADWAY TACOMA, WA 98402	81-1095651	501(C)(3)	2,500				KNKX NEXT (CAPITAL CAMPAIGN)

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FRIENDS OF 885 FM - KNKX 930 BROADWAY TACOMA, WA 98402	81-1095651	501(C)(3)	500				GENERAL OPERATING SUPPORT
FRIENDS OF 885 FM - KNKX 930 BROADWAY TACOMA, WA 98402	81-1095651	501(C)(3)	500				SPRING FUND DRIVE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FRIENDS OF 885 FM - KNKX 930 BROADWAY TACOMA, WA 98402	81-1095651	501(C)(3)	500				GENERAL OPERATING SUPPORT
FRIENDS OF 885 FM - KNKX 930 BROADWAY TACOMA, WA 98402	81-1095651	501(C)(3)	250				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FRIENDS OF 88.5 FM - KNKX 930 BROADWAY TACOMA, WA 98402	81-1095651	501(C)(3)	300				GENERAL OPERATING SUPPORT
FRIENDS OF THE ROSLYN LIBRARY PO BOX 399 ROSLYN, WA 98941	91-1836519	501(C)(3)	5,000				SEUSSAPALOOSA 13 CONTRIBUTION



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GEORGE WEYERHAEUSER PACIFIC RIM BONSAI COLLECTION PO BOX 6108 FEDERAL WAY, WA 98063	61-1727426	501(C)(3)	2,500				YOUTH PROGRAMMING
GEORGE WEYERHAEUSER PACIFIC RIM BONSAI COLLECTION PO BOX 6108 FEDERAL WAY, WA 98063	61-1727426	501(C)(3)	100,000				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GEORGE WEYERHAEUSER PACIFIC RIM BONSAI COLLECTION PO BOX 6108 FEDERAL WAY, WA 98063	61-1727426	501(C)(3)	100,000				GENERAL OPERATING SUPPORT
GEORGE WEYERHAEUSER PACIFIC RIM BONSAI COLLECTION PO BOX 6108 FEDERAL WAY, WA 98063	61-1727426	501(C)(3)	124,600				BUILDING CAPACITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GEORGE WEYERHAEUSER PACIFIC RIM BONSAI COLLECTION PO BOX 6108 FEDERAL WAY, WA 98063	61-1727426	501(C)(3)	78,200				GENERAL OPERATING SUPPORT
GEORGE WEYERHAEUSER PACIFIC RIM BONSAI COLLECTION PO BOX 6108 FEDERAL WAY, WA 98063	61-1727426	501(C)(3)	126,200				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GIRL SCOUTS OF WESTERN WASHINGTON 601 VALLEY ST SEATTLE, WA 98109	91-6060940	501(C)(3)	7,600				SUMMER GIRL SCOUT CAMP EXPENSES FOR PIERCE COUNTY GIRLS
GIRL SCOUTS OF WESTERN WASHINGTON 601 VALLEY ST SEATTLE, WA 98109	91-6060940	501(C)(3)	500				RESIDENT CAMP FINANCIAL ASSISTANCE FUND

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GIRLS ON THE RUN GREATER BOSTON 89 SOUTH ST STE LL00 BOSTON, MA 02111	46-3532424	501(C)(3)	5,500				BOSTON MARATHON SOLEMATES
GIRLS ON THE RUN OF WESTSOUND PO BOX 1003 TRACYTON, WA 98393	46-2162341	501(C)(3)	1,500				ELO PROVIDER PARTICIPATION: GIRLS ON THE RUN WESTSOUND IN TACOMA PUBLIC SCHOOLS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GIRLS ON THE RUN OF WESTSOUND PO BOX 1003 TRACYTON, WA 98393	46-2162341	501(C)(3)	4,368				ELO PROGRAMMING IN TPS: GIRLS ON THE RUN WESTSOUND
GOOD SAMARITAN FOUNDATION PO BOX 5296 TACOMA, WA 984150296	91-2004312	501(C)(3)	23,200				HELPING DISABLED CHILDREN GET COMMUNICATION DEVICES AT THE CHILDREN'S THERAPY UNIT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GOOD SAMARITAN FOUNDATION PO BOX 5296 TACOMA, WA 984150296	91-2004312	501(C)(3)	5,000				CORKS & CRUSH 2019 SUPPORT
GOOD SAMARITAN FOUNDATION PO BOX 5296 TACOMA, WA 984150296	91-2004312	501(C)(3)	12,500				START

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GOOD SAMARITAN FOUNDATION PO BOX 5296 TACOMA, WA 984150296	91-2004312	501(C)(3)	3,333				GOOD SAM CHILDREN'S THERAPY UNIT
GRACE BAPTIST CHURCH 2507 N VASSAULT ST TACOMA, WA 98406	91-6032943	501(C)(3)	7,200				THE ANNUAL FUND



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GREAT PENINSULA CONSERVANCY 423 PACIFIC AVE STE 401 BREMERTON, WA 98337	91-1110978	501(C)(3)	250				GENERAL OPERATING SUPPORT
GREAT PENINSULA CONSERVANCY 423 PACIFIC AVE STE 401 BREMERTON, WA 98337	91-1110978	501(C)(3)	8,400				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GREAT PENINSULA CONSERVANCY 423 PACIFIC AVE STE 401 BREMERTON, WA 98337	91-1110978	501(C)(3)	1,000				GENERAL OPERATING SUPPORT
GREAT PENINSULA CONSERVANCY 423 PACIFIC AVE STE 401 BREMERTON, WA 98337	91-1110978	501(C)(3)	840				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GREATER LAKES MENTAL HEALTH FOUNDATION 9330 59TH AVE SW LAKEWOOD, WA 98499	91-6064184	501(C)(3)	5,000				GENERAL OPERATING SUPPORT
GREATER LAKES MENTAL HEALTH FOUNDATION 9330 59TH AVE SW LAKEWOOD, WA 98499	91-6064184	501(C)(3)	2,000				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GREATER LAKES MENTAL HEALTH FOUNDATION 9330 59TH AVE SW LAKEWOOD, WA 98499	91-6064184	501(C)(3)	2,000				GENERAL OPERATING SUPPORT
GREATER LAKES MENTAL HEALTH FOUNDATION 9330 59TH AVE SW LAKEWOOD, WA 98499	91-6064184	501(C)(3)	5,700				GENERAL SUPPORT FOR CHARITABLE PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GREATER LAKES MENTAL HEALTH FOUNDATION 9330 59TH AVE SW LAKEWOOD, WA 98499	91-6064184	501(C)(3)	1,529				EMERGENCY FUND
GREATER LAKES MENTAL HEALTH FOUNDATION 9330 59TH AVE SW LAKEWOOD, WA 98499	91-6064184	501(C)(3)	515				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GREENTRIKE 1501 PACIFIC AVE STE 202 TACOMA, WA 98402	94-3036465	501(C)(3)	3,000				GENERAL OPERATING SUPPORT
GREENTRIKE 1501 PACIFIC AVE STE 202 TACOMA, WA 98402	94-3036465	501(C)(3)	1,000				GENERAL OPERATING SUPPORT (INSPIRED BY THE GALA)

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GREENTRIKE 1501 PACIFIC AVE STE 202 TACOMA, WA 98402	94-3036465	501(C)(3)	1,000				MUSEUM OPERATIONS: RIGHT TO PLAY GALA
GREENTRIKE 1501 PACIFIC AVE STE 202 TACOMA, WA 98402	94-3036465	501(C)(3)	2,000				POP LUNCHEON

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GREENTRIKE 1501 PACIFIC AVE STE 202 TACOMA, WA 98402	94-3036465	501(C)(3)	139				GENERAL OPERATING SUPPORT
GREENTRIKE 1501 PACIFIC AVE STE 202 TACOMA, WA 98402	94-3036465	501(C)(3)	3,000				GENERAL OPERATING SUPPORT (ANNUAL BOARD DONATION)



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GREENTRIKE 1501 PACIFIC AVE STE 202 TACOMA, WA 98402	94-3036465	501(C)(3)	1,000				POWER OF PLAY LUNCHEON
GREENTRIKE 1501 PACIFIC AVE STE 202 TACOMA, WA 98402	94-3036465	501(C)(3)	5,000				MORE THAN A MUSEUM CAMPAIGN

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GREENTRIKE 1501 PACIFIC AVE STE 202 TACOMA, WA 98402	94-3036465	501(C)(3)	2,000				CHILDREN'S MUSEUM PROGRAMS (BOARD ANNUAL GIVING FUND)
GREENTRIKE 1501 PACIFIC AVE STE 202 TACOMA, WA 98402	94-3036465	501(C)(3)	10,000				MORE THAN A MUSEUM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GREENTRIKE 1501 PACIFIC AVE STE 202 TACOMA, WA 98402	94-3036465	501(C)(3)	1,000				MORE THAN A MUSEUM CAMPAIGN
GREENTRIKE 1501 PACIFIC AVE STE 202 TACOMA, WA 98402	94-3036465	501(C)(3)	10,000				CHILDREN COUNT ON YOU: CENSUS 2020

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HARBOR WILDWATCH 3110 JUDSON ST GIG HARBOR, WA 98335	20-4205938	501(C)(3)	5,000				RED BARN SUMMER PROGRAMS 2019
HARMONY HILL OF UNION 7362 E STATE RTE 106 UNION, WA 98592	94-3050703	501(C)(3)	8,000				HARMONY HILL SALARIES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HARMONY HILL OF UNION 7362 E STATE RTE 106 UNION, WA 98592	94-3050703	501(C)(3)	400				GENERAL OPERATING SUPPORT
HEARING SPEECH & DEAF CENTER (HSDC) 1625 19TH AVE SEATTLE, WA 98122	91-0681207	501(C)(3)	10,000				CENSUS OUTREACH FOR THE DEAF & HARD OF HEARING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HILLTOP ACTION COALITION 1116 EARNEST S BRAZILL ST TACOMA, WA 98405	20-8160894	501(C)(3)	7,500				COMMUNITY MOBILIZATION
HILLTOP ARTISTS PO BOX 6829 TACOMA, WA 98417	91-1667476	501(C)(3)	450				WINTER WARMER EVENT SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HILLTOP ARTISTS PO BOX 6829 TACOMA, WA 98417	91-1667476	501(C)(3)	7,500				GENERAL OPERATING SUPPORT
HILLTOP ARTISTS PO BOX 6829 TACOMA, WA 98417	91-1667476	501(C)(3)	300				YOUTH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HILLTOP ARTISTS PO BOX 6829 TACOMA, WA 98417	91-1667476	501(C)(3)	500				GENERAL OPERATING SUPPORT
HOPES PARKS 6424 N 9TH ST TACOMA, WA 98406	91-0598103	501(C)(3)	15,000				BUILDING AN ORGANIZATIONAL EQUITY FRAMEWORK



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HOPES PARKS 6424 N 9TH ST TACOMA, WA 98406	91-0598103	501(C)(3)	2,500				GENERAL OPERATING SUPPORT
HOPES PARKS 6424 N 9TH ST TACOMA, WA 98406	91-0598103	501(C)(3)	19,900				SERVING ABUSED OR DISFIGURED CHILDREN

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HUMANE SOCIETY FOR TACOMA-PIERCE COUNTY 2608 CENTER ST TACOMA, WA 98409	91-0577128	501(C)(3)	500				GENERAL OPERATING SUPPORT
HUMANE SOCIETY FOR TACOMA-PIERCE COUNTY 2608 CENTER ST TACOMA, WA 98409	91-0577128	501(C)(3)	2,500				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HUMANE SOCIETY FOR TACOMA-PIERCE COUNTY 2608 CENTER ST TACOMA, WA 98409	91-0577128	501(C)(3)	695				GENERAL OPERATING SUPPORT
HUMANE SOCIETY FOR TACOMA-PIERCE COUNTY 2608 CENTER ST TACOMA, WA 98409	91-0577128	501(C)(3)	250				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HUMANE SOCIETY FOR TACOMA-PIERCE COUNTY 2608 CENTER ST TACOMA, WA 98409	91-0577128	501(C)(3)	540				GENERAL OPERATING SUPPORT
HUMANE SOCIETY FOR TACOMA-PIERCE COUNTY 2608 CENTER ST TACOMA, WA 98409	91-0577128	501(C)(3)	9,260				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HUMANE SOCIETY FOR TACOMA-PIERCE COUNTY 2608 CENTER ST TACOMA, WA 98409	91-0577128	501(C)(3)	3,380				GENERAL OPERATING SUPPORT
HUMANE SOCIETY FOR TACOMA-PIERCE COUNTY 2608 CENTER ST TACOMA, WA 98409	91-0577128	501(C)(3)	200				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IMMANUEL PRESBYTERIAN CHURCH 901 N J ST TACOMA, WA 98403	91-6001673	CHURCH	2,600				SUPPORTING COMMUNITY AND CHURCH PROGRAMS
IMMANUEL PRESBYTERIAN CHURCH 901 N J ST TACOMA, WA 98403	91-6001673	CHURCH	21,100				GENERAL CHARITABLE PURPOSES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INDIGENOUS EDUCATION FOUNDATION OF TANZANIA PO BOX 133 OGALLALA, NE 69153	20-4408954	501(C)(3)	5,000				GENERAL OPERATING SUPPORT
INSIDE BOOKS PROJECT C/O 12TH STREET BOOKS AUSTIN, TX 78701	27-5409456	501(C)(3)	5,000				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INTERFAITH COUNCIL TO PREVENT HOMELESSNESS PO BOX 330 VASHON, WA 98070	74-3101551	501(C)(3)	5,000				AREA OF GREATEST NEED
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	1,885				NORTHWIND ART CENTER: 1885 CIRCLE



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	8,100				CIVIC PURPOSES AND ASSISTANCE OF YOUTH AND SENIORS
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	10,000				DOVE HOUSE/JUVENILE COURT: PREVENTING HOMELESSNESS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	1,000				UNIVERSITY WOMEN'S FOUNDATION SCHOLARSHIP
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	11,200				JEFFERSON COUNTY HISTORICAL SOCIETY RESEARCH CENTER

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	25,000				NORTH OLYMPIC LAND TRUST: GENERAL OPERATING SUPPORT
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	500				EXECUTIVE DIRECTOR'S GATHERING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	10,000				DOVE HOUSE/JUVENILE COURT: PREVENTING HOMELESSNESS PROJECT
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	4,000				PORCH DE SALOMAN: GENERAL FUND

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	2,500				PORT TOWNSEND PUBLIC LIBRARY FOUNDATION: ANNUAL DISTRIBUTION
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	3,000				PORT TOWNSEND MARINE SCIENCE CENTER: GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	1,000				NW WATERSHED INSTITUTE: GENERAL OPERATING SUPPORT
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	5,000				JEFFERSON LAND TRUST: UNRESTRICTED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	1,000				GENERAL OPERATING SUPPORT
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	5,000				OLYMPIC MUSIC FESTIVAL: CO-SPONSORSHIP OF AN OMF FELLOWSHIP WITH EARLL & RENA MURMAN

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	1,000				PROSPERITY WORKS: GENERAL OPERATING SUPPORT
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	1,500				PORT TOWNSEND SCHOOL OF THE ARTS: PDA FACILITATION



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	2,000				CREATIVITY FOR PEACE: GENERAL OPERATING SUPPORT
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	250				COLLEGE OF THE HOLY CROSS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	1,000				MARINE SCIENCE CENTER: GENERAL OPERATING SUPPORT
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	2,500				JEFFERSON COMMUNITY FOUNDATION: GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	1,000				COPPER CANYON PRESS: GENERAL OPERATING SUPPORT
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	1,000				JUMPING MOUSE: UNRESTRICTED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	1,200				PORT TOWNSEND FILM INSTITUTE: DONATION FOR OSCARS PARTY AND DESSERT RUN
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	1,000				HUMANE SOCIETY OF JEFFERSON COUNTY: UNRESTRICTED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	1,000				SOMOS UN PUEBLO UNIDO: GENERAL OPERATING SUPPORT
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	1,000				DOVE HOUSE: UNRESTRICTED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	2,500				PORT TOWNSEND SCHOOL OF THE ARTS: VISITING ARTIST PROGRAM
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	250				MARINE SCIENCE CENTER - JAN NORTH TABLE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	350				YONKERS PARTNERS IN EDUCATION: GENERAL OPERATING SUPPORT
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	900				QUIMPER UNITARIAN UNIVERSALIST FELLOWSHIP

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	2,000				STRONGER TOWNS: SKILLMATION
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	1,000				JUMPING MOUSE: GENERAL OPERATING SUPPORT



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	1,000				KPTZ PUBLIC RADIO: GENERAL OPERATING SUPPORT
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	10,000				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	20,112				TRANSFER OF TROLIN FUND FROM GTCF TO JCF
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	500				DISCOVERY BEHAVIORAL HEALTH CARE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	1,000				JUMPING MOUSE: GENERAL OPERATING SUPPORT
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	500				KEY CITY PUBLIC THEATER (IN MEMORY OF LAWRASON DRISCOLL)

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	1,000				SUNRISE ROTARY VOTECH SCHOLARSHIP
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	7,500				JEFFERSON LAND TRUST: OPERATIONS - UNRESTRICTED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	6,000				STEEL CITY MEN'S CHORUS: UNRESTRICTED
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	1,500				ED GATHERINGS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	450				KEY CITY PUBLIC THEATER
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	13,644				PORT TOWNSEND SCHOOL OF THE ARTS: GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	1,000				JUMPING MOUSE: GENERAL OPERATING SUPPORT
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	1,000				DEB JOHNSON SCHOLARSHIP

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	3,000				JCF GENERAL OPERATIONS
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	1,000				BARB MARSEILLE ARTS SCHOLARSHIP



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	5,000				FRIENDS OF SANTA CRUZ RIVER: TUBAC NATURE CENTER OUTDOOR CLASSROOM
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	2,200				CHILDREN'S ORTHOPEDIC HOSPITAL FOR UNCOMPENSATED CARE OF JEFFERSON CO. KIDS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	2,000				NORTH OLYMPIC LAND TRUST
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	153				TRANSFER OF REMAINDER OF TROLIN FUND FROM GTCF TO JCF

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	5,000				OLYMPIC PENINSULA YMCA (SEQUIM BRANCH) - ANNUAL CAMPAIGN
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	10,100				JEFFERSON COMMUNITY FOUNDATION: ANNUAL DISBURSEMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	4,000				PORT TOWNSEND MARINE SCIENCE CENTER - MARINE MAMMAL STRANDING NETWORK
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	84-1682682	501(C)(3)	5,000				NW MARITIME CENTER - GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KBTC ASSOCIATION 2320 S 19TH ST TACOMA, WA 98405	56-2551392	501(C)(3)	250				GENERAL OPERATING SUPPORT
KBTC ASSOCIATION 2320 S 19TH ST TACOMA, WA 98405	56-2551392	501(C)(3)	250				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KBTC ASSOCIATION 2320 S 19TH ST TACOMA, WA 98405	56-2551392	501(C)(3)	23,008				ELO PROGRAMMING IN TPS: KIDS AFTERSCHOOL PROGRAM
KBTC ASSOCIATION 2320 S 19TH ST TACOMA, WA 98405	56-2551392	501(C)(3)	300				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KBTC ASSOCIATION 2320 S 19TH ST TACOMA, WA 98405	56-2551392	501(C)(3)	1,000				KIDS AFTERSCHOOL PROGRAM IN TACOMA PUBLIC SCHOOLS
KBTC ASSOCIATION 2320 S 19TH ST TACOMA, WA 98405	56-2551392	501(C)(3)	500				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KBTC ASSOCIATION 2320 S 19TH ST TACOMA, WA 98405	56-2551392	501(C)(3)	67,500				ELO SITE DIRECTOR; MANAGER TIME AND PARTICIPATION, SUPPLIES AT SCHOOLS SERVED
KBTC ASSOCIATION 2320 S 19TH ST TACOMA, WA 98405	56-2551392	501(C)(3)	300				GENERAL OPERATING SUPPORT



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KITSAP COMMUNITY FOUNDATION PO BOX 3670 SILVERDALE, WA 98383	94-3205217	501(C)(3)	203,500				2020 CENSUS: COMPLETE COUNT COMMITTEE LOGISTICS, TRAINING, AND MATERIALS
KROWNLESS KINGS 1809 S HOSMER ST TACOMA, WA 98405	82-2821008	501(C)(3)	2,000				ELO PROVIDER PARTICIPATION: KROWNLESS KIDS IN TACOMA PUBLIC SCHOOLS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KROWNLESS KINGS 1809 S HOSMER ST TACOMA, WA 98405	82-2821008	501(C)(3)	18,480				ELO PROGRAMMING IN TPS: KROWNLESS KIDS
LAKEWOLD GARDENS PO BOX 39780 LAKEWOOD, WA 98496	94-3041320	501(C)(3)	500				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LAKEWOLD GARDENS PO BOX 39780 LAKEWOOD, WA 98496	94-3041320	501(C)(3)	1,000				BOARD DEVELOPMENT SERVICES: THE PHILANTHROPY COLLECTIVE
LAKEWOLD GARDENS PO BOX 39780 LAKEWOOD, WA 98496	94-3041320	501(C)(3)	40,000				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LAKEWOLD GARDENS PO BOX 39780 LAKEWOOD, WA 98496	94-3041320	501(C)(3)	695				GENERAL OPERATING SUPPORT
LAKEWOLD GARDENS PO BOX 39780 LAKEWOOD, WA 98496	94-3041320	501(C)(3)	91,200				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LAKEWOLD GARDENS PO BOX 39780 LAKEWOOD, WA 98496	94-3041320	501(C)(3)	148,100				GENERAL OPERATING SUPPORT
LAKEWOLD GARDENS PO BOX 39780 LAKEWOOD, WA 98496	94-3041320	501(C)(3)	4,000				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
L'ARCHE TAHOMA HOPE COMMUNITY 12302 VICKERY AVE E TACOMA, WA 98446	91-1206208	501(C)(3)	500				GENERAL OPERATING SUPPORT
L'ARCHE TAHOMA HOPE COMMUNITY 12302 VICKERY AVE E TACOMA, WA 98446	91-1206208	501(C)(3)	500				UNRESTRICTED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
L'ARCHE TAHOMA HOPE COMMUNITY 12302 VICKERY AVE E TACOMA, WA 98446	91-1206208	501(C)(3)	6,800				GENERAL OPERATING SUPPORT
L'ARCHE TAHOMA HOPE COMMUNITY 12302 VICKERY AVE E TACOMA, WA 98446	91-1206208	501(C)(3)	1,000				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
L'ARCHE TAHOMA HOPE COMMUNITY 12302 VICKERY AVE E TACOMA, WA 98446	91-1206208	501(C)(3)	900				GENERAL OPERATING SUPPORT
L'ARCHE TAHOMA HOPE COMMUNITY 12302 VICKERY AVE E TACOMA, WA 98446	91-1206208	501(C)(3)	500				GENERAL OPERATING SUPPORT



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LEADERSHIP FOUNDATIONS 902 MARKET ST TACOMA, WA 98402	25-1741353	501(C)(3)	3,000				PROYECTO MOLE MY FAMILY COUNTS
LEADERSHIP FOUNDATIONS 902 MARKET ST TACOMA, WA 98402	25-1741353	501(C)(3)	3,000				PROYECTO MOLE MY FAMILY COUNTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LEMAY - AMERICA'S CAR MUSEUM 2702 E D ST TACOMA, WA 98421	91-1867848	501(C)(3)	5,000				CAPITAL FUND
LEMAY - AMERICA'S CAR MUSEUM 2702 E D ST TACOMA, WA 98421	91-1867848	501(C)(3)	250				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LEMAY - AMERICA'S CAR MUSEUM 2702 E D ST TACOMA, WA 98421	91-1867848	501(C)(3)	20,000				CAPITAL SUPPORT
LEMAY - AMERICA'S CAR MUSEUM 2702 E D ST TACOMA, WA 98421	91-1867848	501(C)(3)	10,000				OPERATING FUND

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LEMAY - AMERICA'S CAR MUSEUM 2702 E D ST TACOMA, WA 98421	91-1867848	501(C)(3)	417				GENERAL OPERATING SUPPORT
LEMAY - AMERICA'S CAR MUSEUM 2702 E D ST TACOMA, WA 98421	91-1867848	501(C)(3)	5,000				OPERATIONS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LEMAY - AMERICA'S CAR MUSEUM 2702 E D ST TACOMA, WA 98421	91-1867848	501(C)(3)	2,000				FOR CAPITAL ACCOUNT
LIFE CHRISTIAN ACADEMY 1717 S UNION TACOMA, WA 984051997	71-0942420	501(C)(3)	6,400				STUDENT SCHOLARSHIPS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MARY BRIDGE BRIGADE MS 311-1-MBB TACOMA, WA 984150299	91-6030192	501(C)(3)	27,931				FRANCES C. PETERSEN LEUKEMIA FUND
MARY BRIDGE CHILDREN'S FOUNDATION PO BOX 5296 TACOMA, WA 984150296	94-3030039	501(C)(3)	900				GENERAL OPERATING SUPPORT FOR MARY BRIDGE CHILDREN'S FOUNDATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MARY BRIDGE CHILDREN'S FOUNDATION PO BOX 5296 TACOMA, WA 984150296	94-3030039	501(C)(3)	7,735				HELPING DISABLED CHILDREN GET COMMUNICATION DEVICES
MARY BRIDGE CHILDREN'S FOUNDATION PO BOX 5296 TACOMA, WA 984150296	94-3030039	501(C)(3)	11,820				UNCOMPENSATED CARE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MARY BRIDGE CHILDREN'S FOUNDATION PO BOX 5296 TACOMA, WA 984150296	94-3030039	501(C)(3)	204				GENERAL CHARITABLE SUPPORT
MARY BRIDGE CHILDREN'S FOUNDATION PO BOX 5296 TACOMA, WA 984150296	94-3030039	501(C)(3)	5,200				CARE/KEEP/MAINTENANCE OF CRIPPLED CHILDREN AT MARY BRIDGE CHILDREN'S HOSPITAL



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MARY BRIDGE CHILDREN'S FOUNDATION PO BOX 5296 TACOMA, WA 984150296	94-3030039	501(C)(3)	30,000				MARY BRIDGE CHILDRENS CLINIC: NEW CHILDRENS CLINIC IN GIG HARBOR
MASON UNITED METHODIST CHURCH 2710 N MADISON ST TACOMA, WA 98407	31-1813333	501(C)(3)	1,170				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MASON UNITED METHODIST CHURCH 2710 N MADISON ST TACOMA, WA 98407	31-1813333	501(C)(3)	4,550				GENERAL OPERATING SUPPORT
MULTICARE HEALTH FOUNDATION PO BOX 5296 TACOMA, WA 984150296	91-1514257	501(C)(3)	250				2019 ROCK THE FOUNDATION: IN MEMORY OF ROBERT B WHITNEY JR, M.D.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MULTICARE HEALTH FOUNDATION PO BOX 5296 TACOMA, WA 984150296	91-1514257	501(C)(3)	250				GENERAL OPERATING SUPPORT
MULTICARE HEALTH FOUNDATION PO BOX 5296 TACOMA, WA 984150296	91-1514257	501(C)(3)	500				CANCER AND/OR CARDIAC PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MULTICARE HEALTH FOUNDATION PO BOX 5296 TACOMA, WA 984150296	91-1514257	501(C)(3)	15,000				COMMUNITY HEALTH ACTION TEAM
MULTICARE HEALTH FOUNDATION PO BOX 5296 TACOMA, WA 984150296	91-1514257	501(C)(3)	15,000				KIDS' MENTAL HEALTH PIERCE COUNTY AND YOUTH INCLUSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MULTICARE HEALTH SYSTEM PO BOX 5299 TACOMA, WA 984150299	91-1352172	501(C)(3)	41,896				GENERAL PURPOSES AT TACOMA GENERAL HOSPITAL
MULTICARE HEALTH SYSTEM PO BOX 5299 TACOMA, WA 984150299	91-1352172	501(C)(3)	10,300				GENERAL CHARITABLE PURPOSE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MULTICARE HEALTH SYSTEM PO BOX 5299 TACOMA, WA 984150299	91-1352172	501(C)(3)	10,500				GENERAL OPERATING SUPPORT
MULTICULTURAL CHILD AND FAMILY HOPE CENTER 2021 S 19TH ST TACOMA, WA 98405	35-2266626	501(C)(3)	3,000				CENSUS OUTREACH FOR LOW-INCOME CHILDREN, ETHNIC FAMILIES AND HOMELESS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MULTICULTURAL CHILD AND FAMILY HOPE CENTER 2021 S 19TH ST TACOMA, WA 98405	35-2266626	501(C)(3)	4,500				CENSUS OUTREACH FOR LOW-INCOME CHILDREN, ETHNIC FAMILIES AND HOMELESS
MUSEUM OF GLASS 1801 DOCK ST TACOMA, WA 98402	91-1669422	501(C)(3)	6,900				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MUSEUM OF GLASS 1801 DOCK ST TACOMA, WA 98402	91-1669422	501(C)(3)	1,000				GENERAL OPERATING SUPPORT
MUSEUM OF GLASS 1801 DOCK ST TACOMA, WA 98402	91-1669422	501(C)(3)	250				GENERAL OPERATING SUPPORT



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MUSEUM OF GLASS 1801 DOCK ST TACOMA, WA 98402	91-1669422	501(C)(3)	1,000				GENERAL OPERATING SUPPORT
MUSEUM OF GLASS 1801 DOCK ST TACOMA, WA 98402	91-1669422	501(C)(3)	417				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MUSEUM OF GLASS 1801 DOCK ST TACOMA, WA 98402	91-1669422	501(C)(3)	1,100				SUPPORT OF CURRENT AND FUTURE EXHIBITIONS
MUSEUM OF GLASS 1801 DOCK ST TACOMA, WA 98402	91-1669422	501(C)(3)	8,900				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MUSEUM OF GLASS 1801 DOCK ST TACOMA, WA 98402	91-1669422	501(C)(3)	250				GENERAL OPERATING SUPPORT
MUSEUM OF GLASS 1801 DOCK ST TACOMA, WA 98402	91-1669422	501(C)(3)	1,000				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL WILDLIFE FEDERATION 11100 WILDLIFE CENTER DR RESTON, VA 20190	53-0204616	501(C)(3)	6,260				GENERAL OPERATING SUPPORT
NEW PHOEBE HOUSE ASSOCIATION PO BOX 5245 TACOMA, WA 98415	33-1023012	501(C)(3)	10,000				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NORTH MASON RESOURCES PO BOX 2052 BELFAIR, WA 98528	27-1532961	501(C)(3)	10,000				2020 CENSUS WORK
NORTHERN NEW JERSEY COMMUNITY FOUNDATION 1 UNIVERSITY PLAZA DR STE 128 HACKENSACK, NJ 07601	22-3603171	501(C)(3)	120,148				ESTABLISH NEW DONOR ADVISED FUND: "THE ALFRED H CHAN FAMILY FOUNDATION FUND"

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NORTHWEST IMMIGRANT RIGHTS PROJECT 615 2ND AVE STE 400 SEATTLE, WA 98104	91-1393082	501(C)(3)	500				GENERAL OPERATING FUNDS
NORTHWEST IMMIGRANT RIGHTS PROJECT 615 2ND AVE STE 400 SEATTLE, WA 98104	91-1393082	501(C)(3)	20,000				AREA OF GREATEST NEED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NORTHWEST IMMIGRANT RIGHTS PROJECT 615 2ND AVE STE 400 SEATTLE, WA 98104	91-1393082	501(C)(3)	250				GENERAL OPERATING SUPPORT
NORTHWEST TREK FOUNDATION 11610 TREK DR E EATONVILLE, WA 98328	23-7438056	501(C)(3)	8,600				MAINTAINING PHYSICAL PLANT & EDUCATIONAL INSTITUTE COLLECTIONS AT NORTHWEST TREK

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NORTHWEST TREK FOUNDATION 11610 TREK DR E EATONVILLE, WA 98328	23-7438056	501(C)(3)	9,390				GENERAL OPERATING SUPPORT
NORTHWEST TREK FOUNDATION 11610 TREK DR E EATONVILLE, WA 98328	23-7438056	501(C)(3)	1,200				CAPITAL IMPROVEMENTS/MAJOR RENOVATIONS/GRAPHICS/IMPROVEMENTS/EQUIPMENT



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NORTHWEST ULTIMATE ASSOCIATION DISCNW PO BOX 85112 SEATTLE, WA 98145	91-1720259	501(C)(3)	2,500				ELO PROVIDER PARTICIPATION: ULTIMATE FRISBEE IN TACOMA PUBLIC SCHOOLS
NORTHWEST ULTIMATE ASSOCIATION DISCNW PO BOX 85112 SEATTLE, WA 98145	91-1720259	501(C)(3)	4,200				ELO PROGRAMMING IN TPS: ULTIMATE FRISBEE (SESSION 1)

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NORTHWEST ULTIMATE ASSOCIATION DISCNW PO BOX 85112 SEATTLE, WA 98145	91-1720259	501(C)(3)	16,800				ELO PROGRAMMING IN TPS: ULTIMATE FRISBEE
NOURISH PIERCE COUNTY 1702 S 72ND ST STE E TACOMA, WA 98408	91-1198391	501(C)(3)	750				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NOURISH PIERCE COUNTY 1702 S 72ND ST STE E TACOMA, WA 98408	91-1198391	501(C)(3)	500				GENERAL OPERATING SUPPORT
NOURISH PIERCE COUNTY 1702 S 72ND ST STE E TACOMA, WA 98408	91-1198391	501(C)(3)	2,630				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NOURISH PIERCE COUNTY 1702 S 72ND ST STE E TACOMA, WA 98408	91-1198391	501(C)(3)	1,000				GRAHAM FOOD BANK AT HOLY DISCIPLES CHURCH
NOURISH PIERCE COUNTY 1702 S 72ND ST STE E TACOMA, WA 98408	91-1198391	501(C)(3)	50,000				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NOURISH PIERCE COUNTY 1702 S 72ND ST STE E TACOMA, WA 98408	91-1198391	501(C)(3)	250				GENERAL OPERATING SUPPORT
NOURISH PIERCE COUNTY 1702 S 72ND ST STE E TACOMA, WA 98408	91-1198391	501(C)(3)	3,000				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NOURISH PIERCE COUNTY 1702 S 72ND ST STE E TACOMA, WA 98408	91-1198391	501(C)(3)	300				UNRESTRICTED
NOURISH PIERCE COUNTY 1702 S 72ND ST STE E TACOMA, WA 98408	91-1198391	501(C)(3)	1,050				FISH FOOD BANKS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NOURISH PIERCE COUNTY 1702 S 72ND ST STE E TACOMA, WA 98408	91-1198391	501(C)(3)	1,000				GENERAL FUND
NW FURNITURE BANK 117 PUYALLUP AVE TACOMA, WA 98421	22-3939593	501(C)(3)	2,000				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NW FURNITURE BANK 117 PUYALLUP AVE TACOMA, WA 98421	22-3939593	501(C)(3)	250				FURNITURE FOR FAMILIES TRANSITIONING INTO THEIR OWN HOMES
NW FURNITURE BANK 117 PUYALLUP AVE TACOMA, WA 98421	22-3939593	501(C)(3)	50,000				VANCOUVER, WA EXPANSION



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OASIS YOUTH CENTER 2215 PACIFIC AVE TACOMA, WA 98402	91-1385245	501(C)(3)	7,500				GENERAL OPERATING SUPPORT
OASIS YOUTH CENTER 2215 PACIFIC AVE TACOMA, WA 98402	91-1385245	501(C)(3)	500				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OASIS YOUTH CENTER 2215 PACIFIC AVE TACOMA, WA 98402	91-1385245	501(C)(3)	12,500				GENERAL OPERATING SUPPORT
OPPORTUNITY CENTER OF ORTING DBA THE HAVEN TEEN CENTER PO BOX 1423 ORTING, WA 98360	91-2112227	501(C)(3)	2,000				THE HAVEN TEEN CENTER

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OPPORTUNITY CENTER OF ORTING DBA THE HAVEN TEEN CENTER PO BOX 1423 ORTING, WA 98360	91-2112227	501(C)(3)	7,500				ORTING TEEN CENTER: PROGRAMS
PACIFIC HARBORS COUNCIL BOY SCOUTS OF AMERICA 4802 S 19TH ST TACOMA, WA 98405	91-0564954	501(C)(3)	813				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PACIFIC HARBORS COUNCIL BOY SCOUTS OF AMERICA 4802 S 19TH ST TACOMA, WA 98405	91-0564954	501(C)(3)	8,800				SUMMER BOY SCOUT CAMP EXPENSES FOR PIERCE COUNTY BOYS
PACIFIC LUTHERAN UNIVERSITY 12180 PARK AVE S TACOMA, WA 98447	91-0565571	501(C)(3)	2,000				LUTE VOTE CENSUS SERIES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PACIFIC LUTHERAN UNIVERSITY 12180 PARK AVE S TACOMA, WA 98447	91-0565571	501(C)(3)	1,250				Q CLUB SCHOLARSHIPS
PACIFIC LUTHERAN UNIVERSITY 12180 PARK AVE S TACOMA, WA 98447	91-0565571	501(C)(3)	240				HALEY INFORMATION CENTER AT THE LIBRARY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PACIFIC LUTHERAN UNIVERSITY 12180 PARK AVE S TACOMA, WA 98447	91-0565571	501(C)(3)	1,250				Q CLUB SCHOLARSHIPS
PACIFIC LUTHERAN UNIVERSITY 12180 PARK AVE S TACOMA, WA 98447	91-0565571	501(C)(3)	2,500				HOLOCAUST CONFERENCE SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PACIFIC LUTHERAN UNIVERSITY 12180 PARK AVE S TACOMA, WA 98447	91-0565571	501(C)(3)	11,820				SCHOLARSHIPS
PACIFIC LUTHERAN UNIVERSITY 12180 PARK AVE S TACOMA, WA 98447	91-0565571	501(C)(3)	5,000				HOLOCAUST SCHOLARSHIPS KRM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PACIFIC LUTHERAN UNIVERSITY 12180 PARK AVE S TACOMA, WA 98447	91-0565571	501(C)(3)	9,500				GENERAL OPERATING SUPPORT
PACIFIC LUTHERAN UNIVERSITY 12180 PARK AVE S TACOMA, WA 98447	91-0565571	501(C)(3)	10,400				NURSING SCHOLARSHIPS FOR TRANSFER STUDENTS FROM TCC, HIGHLINE, AND OLYMPIC COLLEGE



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PACIFIC LUTHERAN UNIVERSITY 12180 PARK AVE S TACOMA, WA 98447	91-0565571	501(C)(3)	2,500				KURT MAYER SCHOLARSHIP IN HOLOCAUST STUDIES
PARTNERS FOR PARKS PO BOX 98352 LAKEWOOD, WA 98496	76-0808398	501(C)(3)	5,000				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PCAF 3009 S 40TH ST TACOMA, WA 98409	91-1385245	501(C)(3)	15,000				LEADERSHIP RETREATS AND EQUITY TRAININGS FOR BOARD, STAFF, AND VOLUNTEERS
PCAF 3009 S 40TH ST TACOMA, WA 98409	91-1385245	501(C)(3)	500				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PCAF 3009 S 40TH ST TACOMA, WA 98409	91-1385245	501(C)(3)	500				GENERAL OPERATING SUPPORT
PCAF 3009 S 40TH ST TACOMA, WA 98409	91-1385245	501(C)(3)	500				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PCAF 3009 S 40TH ST TACOMA, WA 98409	91-1385245	501(C)(3)	30,000				LGBTQ COLLABORATION - CENSUS PRIDE
PCAF 3009 S 40TH ST TACOMA, WA 98409	91-1385245	501(C)(3)	1,000				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PCAF 3009 S 40TH ST TACOMA, WA 98409	91-1385245	501(C)(3)	7,500				GENERAL OPERATING SUPPORT
PEACE COMMUNITY CENTER 2106 S CUSHMAN AVE TACOMA, WA 98405	91-1746986	501(C)(3)	1,000				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PEACE COMMUNITY CENTER 2106 S CUSHMAN AVE TACOMA, WA 98405	91-1746986	501(C)(3)	1,000				LEARNERS TO LEADERS DINNER GIFT
PEACE COMMUNITY CENTER 2106 S CUSHMAN AVE TACOMA, WA 98405	91-1746986	501(C)(3)	500				UNRESTRICTED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PEACE COMMUNITY CENTER 2106 S CUSHMAN AVE TACOMA, WA 98405	91-1746986	501(C)(3)	250				GENERAL OPERATING SUPPORT
PEACE COMMUNITY CENTER 2106 S CUSHMAN AVE TACOMA, WA 98405	91-1746986	501(C)(3)	67,500				ELO SITE DIRECTOR; MANAGER TIME AND PARTICIPATION; SUPPLIES AT SCHOOLS SERVED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PEACE WORKS UNITED INC 10011 BRIDGEPORT WAY SW STE 1500-245 LAKEWOOD, WA 98499	83-1532853	501(C)(3)	12,000				WHAT BOX DO I CHECK? WHY THE 2020 CENSUS MATTERS TO BLACK AMERICANS AND AFRICAN IMMIGRANTS.
PHILANTHROPY NORTHWEST 2101 4TH AVE STE 650 SEATTLE, WA 98121	91-1110995	501(C)(3)	20,000				WASHINGTON CENSUS EQUITY FUND



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PIERCE COLLEGE FOUNDATION 1601 39TH AVE SE PUYALLUP, WA 98374	91-1039199	501(C)(3)	2,000				GENERAL OPERATING SUPPORT
PIERCE COLLEGE FOUNDATION 1601 39TH AVE SE PUYALLUP, WA 98374	91-1039199	501(C)(3)	10,000				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PIERCE COLLEGE FOUNDATION 1601 39TH AVE SE PUYALLUP, WA 98374	91-1039199	501(C)(3)	10,000				SUCCESS CAMPAIGN
PIERCE COLLEGE FOUNDATION 1601 39TH AVE SE PUYALLUP, WA 98374	91-1039199	501(C)(3)	2,500				STUDENT SUPPORT FUND

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PIERCE COLLEGE FOUNDATION 1601 39TH AVE SE PUYALLUP, WA 98374	91-1039199	501(C)(3)	500				SUPPORT FOR UNMET STUDENT NEED TO "FILL THE GAP BETWEEN STUDENT NEEDS AND PUBLIC SUPPORT"
PIERCE COLLEGE FOUNDATION 1601 39TH AVE SE PUYALLUP, WA 98374	91-1039199	501(C)(3)	15,465				SCHOLARSHIPS/EDUCATIONAL EXPENSES FOR DISABLED STUDENTS IN FINANCIAL NEED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PIERCE CONSERVATION DISTRICT PO BOX 1057 PUYALLUP, WA 98371	91-0894461	GOVERNMENT	6,700				AGCOI ACTIVITY: RURAL CLIMATE DIALOGUES
PIERCE CONSERVATION DISTRICT PO BOX 1057 PUYALLUP, WA 98371	91-0894461	GOVERNMENT	1,000				NITTY GRITTY: FOOD AND GARDENING CONNECTIONS IN TACOMA PUBLIC SCHOOLS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PIERCE CONSERVATION DISTRICT PO BOX 1057 PUYALLUP, WA 98371	91-0894461	GOVERNMENT	1,000				STRATEGIC SUPPORT (ACTIVITY REIMBURSEMENT)
PIERCE CONSERVATION DISTRICT PO BOX 1057 PUYALLUP, WA 98371	91-0894461	GOVERNMENT	1,042				2ND ANNUAL COVER CROP ROUNDTABLE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PIERCE CONSERVATION DISTRICT PO BOX 1057 PUYALLUP, WA 98371	91-0894461	GOVERNMENT	9,900				EECOI EVALUATION
PIERCE CONSERVATION DISTRICT PO BOX 1057 PUYALLUP, WA 98371	91-0894461	GOVERNMENT	5,250				CONTINUATION OF SPANISH SPEAKING CULTURAL AMBASSADOR TEAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PIERCE CONSERVATION DISTRICT PO BOX 1057 PUYALLUP, WA 98371	91-0894461	GOVERNMENT	7,280				NITTY GRITTY: FOOD AND GARDENING CONNECTIONS
PIERCE CONSERVATION DISTRICT PO BOX 1057 PUYALLUP, WA 98371	91-0894461	GOVERNMENT	8,000				STEERING COMMITTEE STIPENDS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PIERCE CONSERVATION DISTRICT PO BOX 1057 PUYALLUP, WA 98371	91-0894461	GOVERNMENT	2,500				ON FARM COMPOSTING SHORT COURSE
PIERCE CONSERVATION DISTRICT PO BOX 1057 PUYALLUP, WA 98371	91-0894461	GOVERNMENT	17,510				RURAL CLIMATE DIALOGUES



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PIERCE CONSERVATION DISTRICT PO BOX 1057 PUYALLUP, WA 98371	91-0894461	GOVERNMENT	500				PLACE COMMUNITY OF PRACTICE - STIPEND FOR MONTY SMITH
PIERCE CONSERVATION DISTRICT PO BOX 1057 PUYALLUP, WA 98371	91-0894461	GOVERNMENT	5,280				REINVENTING ENVIRONMENTAL EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PIERCE CONSERVATION DISTRICT PO BOX 1057 PUYALLUP, WA 98371	91-0894461	GOVERNMENT	4,500				COMMUNITY COUNCIL
PIERCE CONSERVATION DISTRICT PO BOX 1057 PUYALLUP, WA 98371	91-0894461	GOVERNMENT	11,700				COMMUNITY WORKING TEAM RESEARCH AND DEVELOPMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PIERCE CONSERVATION DISTRICT PO BOX 1057 PUYALLUP, WA 98371	91-0894461	GOVERNMENT	9,900				COMMUNITY CREATED RESEARCH & COMMUNITY CREATED ACTIVITIES
PIERCE CONSERVATION DISTRICT PO BOX 1057 PUYALLUP, WA 98371	91-0894461	GOVERNMENT	3,436				BREAKING THE CYCLE WITHOUT BREAKING THE CULTURE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PIERCE CONSERVATION DISTRICT PO BOX 1057 PUYALLUP, WA 98371	91-0894461	GOVERNMENT	8,330				FARM FOUNDATIONS TRAINING
PIERCE CONSERVATION DISTRICT PO BOX 1057 PUYALLUP, WA 98371	91-0894461	GOVERNMENT	6,825				AGRI COI EQUITY SUBCOMMITTEE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PIERCE CONSERVATION DISTRICT PO BOX 1057 PUYALLUP, WA 98371	91-0894461	GOVERNMENT	1,000				PRACTICING, LEARNING AND CONNECTING TO THE ENVIRONMENT, A COMMUNITY OF PRACTICE
PIERCE CONSERVATION DISTRICT PO BOX 1057 PUYALLUP, WA 98371	91-0894461	GOVERNMENT	7,920				CREATION OF A SPANISH SPEAKING CULTURAL AMBASSADOR TEAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PIERCE CONSERVATION DISTRICT PO BOX 1057 PUYALLUP, WA 98371	91-0894461	GOVERNMENT	8,800				LEADERSHIP TEAM SUPPORT
PIERCE CONSERVATION DISTRICT PO BOX 1057 PUYALLUP, WA 98371	91-0894461	GOVERNMENT	2,500				WORK PLANNING FACILITATION SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PIERCE CONSERVATION DISTRICT PO BOX 1057 PUYALLUP, WA 98371	91-0894461	GOVERNMENT	5,000				COMMUNITY RESERVED SUPPORT PILOT (COMMUNITY SUPPORT)
PIERCE COUNTY LIBRARY FOUNDATION 3005 112TH ST E TACOMA, WA 984462215	51-0180293	501(C)(3)	600				LIBRARY COLLECTIONS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PIERCE COUNTY LIBRARY FOUNDATION 3005 112TH ST E TACOMA, WA 984462215	51-0180293	501(C)(3)	1,100				PURCHASING MATERIALS FOR THE PENINSULA LIBRARY
PIERCE COUNTY LIBRARY FOUNDATION 3005 112TH ST E TACOMA, WA 984462215	51-0180293	501(C)(3)	1,400				SUPPORTING THE STEILACOOM LIBRARY



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PIERCE COUNTY LIBRARY FOUNDATION 3005 112TH ST E TACOMA, WA 984462215	51-0180293	501(C)(3)	400				SUPPORTING LIBRARY SERVICES AT THE KEY CENTER LIBRARY
PIERCE COUNTY LIBRARY FOUNDATION 3005 112TH ST E TACOMA, WA 984462215	51-0180293	501(C)(3)	500				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PIERCE COUNTY LIBRARY FOUNDATION 3005 112TH ST E TACOMA, WA 984462215	51-0180293	501(C)(3)	600				SUPPORTING OUTREACH EFFORTS
PIERCE COUNTY LIBRARY FOUNDATION 3005 112TH ST E TACOMA, WA 984462215	51-0180293	501(C)(3)	500				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PIERCE COUNTY LIBRARY FOUNDATION 3005 112TH ST E TACOMA, WA 984462215	51-0180293	501(C)(3)	10,000				GENERAL SUPPORT (TO BE USED AS MATCHING FUNDS)
PLANNED PARENTHOOD OF THE GREAT NORTHWEST AND THE HAWAIIAN ISLANDS 2001 E MADISON ST SEATTLE, WA 98122	91-0686012	501(C)(3)	250				PIERCE COUNTY, WA: GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PLANNED PARENTHOOD OF THE GREAT NORTHWEST AND THE HAWAIIAN ISLANDS 2001 E MADISON ST SEATTLE, WA 98122	91-0686012	501(C)(3)	550				GENERAL OPERATING SUPPORT
PLANNED PARENTHOOD OF THE GREAT NORTHWEST AND THE HAWAIIAN ISLANDS 2001 E MADISON ST SEATTLE, WA 98122	91-0686012	501(C)(3)	550				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PLANNED PARENTHOOD OF THE GREAT NORTHWEST AND THE HAWAIIAN ISLANDS 2001 E MADISON ST SEATTLE, WA 98122	91-0686012	501(C)(3)	10,000				GENERAL OPERATING SUPPORT
PLANNED PARENTHOOD OF THE GREAT NORTHWEST AND THE HAWAIIAN ISLANDS 2001 E MADISON ST SEATTLE, WA 98122	91-0686012	501(C)(3)	150				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PLANNED PARENTHOOD OF THE GREAT NORTHWEST AND THE HAWAIIAN ISLANDS 2001 E MADISON ST SEATTLE, WA 98122	91-0686012	501(C)(3)	500				GENERAL OPERATING SUPPORT
PLANNED PARENTHOOD OF THE GREAT NORTHWEST AND THE HAWAIIAN ISLANDS 2001 E MADISON ST SEATTLE, WA 98122	91-0686012	501(C)(3)	515				GENERAL SUPPORT OF TACOMA AREA PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PLANNED PARENTHOOD OF THE GREAT NORTHWEST AND THE HAWAIIAN ISLANDS 2001 E MADISON ST SEATTLE, WA 98122	91-0686012	501(C)(3)	250				SEXUAL AND REPRODUCTIVE HEALTH CARE TO WOMEN AND MEN IN THE PACIFIC NORTHWEST
PLATEAU OUTREACH MINISTRIES PO BOX 391 ENUMCLAW, WA 98022	91-1965830	501(C)(3)	5,000				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
POINT DEFIANCE ZOOLOGICAL SOCIETY 5400 N PEARL ST TACOMA, WA 98407	91-6066667	501(C)(3)	6,735				NEW EXHIBIT ACQUISITION SPECIAL EMPHASIS WHEN POSSIBLE
POINT DEFIANCE ZOOLOGICAL SOCIETY 5400 N PEARL ST TACOMA, WA 98407	91-6066667	501(C)(3)	4,000				AQUARIUM - GENERAL SUPPORT



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
POINT DEFIANCE ZOOLOGICAL SOCIETY 5400 N PEARL ST TACOMA, WA 98407	91-6066667	501(C)(3)	7,825				GENERAL OPERATING SUPPORT
POINT DEFIANCE ZOOLOGICAL SOCIETY 5400 N PEARL ST TACOMA, WA 98407	91-6066667	501(C)(3)	1,967				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
POINT DEFIANCE ZOOLOGICAL SOCIETY 5400 N PEARL ST TACOMA, WA 98407	91-6066667	501(C)(3)	2,500				SUPPORT AS RESTRICTED BY DONOR
POINT DEFIANCE ZOOLOGICAL SOCIETY 5400 N PEARL ST TACOMA, WA 98407	91-6066667	501(C)(3)	1,700				SUPPORT AS DETERMINED BY THE SOCIETY'S BOARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
POINT DEFIANCE ZOOLOGICAL SOCIETY 5400 N PEARL ST TACOMA, WA 98407	91-6066667	501(C)(3)	16,400				SUPPORT AS RESTRICTED BY DONOR
POINT DEFIANCE ZOOLOGICAL SOCIETY 5400 N PEARL ST TACOMA, WA 98407	91-6066667	501(C)(3)	900				SUPPORT AS RESTRICTED BY DONOR

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PRIESTS OF THE SACRED HEART PO BOX 367 HALES CORNERS, WI 53130	39-1243521	501(C)(3)	9,260				SACRED HEART MONASTERY IN HALES CORNERS, WI
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	82-1723455	501(C)(3)	15,000				THE STORY OF THE CENSUS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	82-1723455	501(C)(3)	100				EEOCI EVALUATION
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	82-1723455	501(C)(3)	1,500				JHFS QUARTERLY CONVENINGS & REPORT CARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	82-1723455	501(C)(3)	22,734				JHFS ASSISTANT COORDINATOR
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	82-1723455	501(C)(3)	57,840				JHFS COI COORDINATOR

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	82-1723455	501(C)(3)	73,500				AG COI COORDINATION
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	82-1723455	501(C)(3)	625				COORDINATOR EXPENSES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	82-1723455	501(C)(3)	10,000				COMMUNITY ENGAGEMENT AND ASSISTANT STAFF
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	82-1723455	501(C)(3)	2,000				EQUITY OPPORTUNITY FUND



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	82-1723455	501(C)(3)	4,000				COMMUNICATION FUND
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	82-1723455	501(C)(3)	200,000				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	82-1723455	501(C)(3)	800				DIVERSITY, EQUITY, AND INCLUSION (DEI) COMMUNITY OF PRACTICE
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	82-1723455	501(C)(3)	1,000				SCOI COORDINATOR EXPENSES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	82-1723455	501(C)(3)	540				DIVERSITY, EQUITY, AND INCLUSION (DEI) WORKSHOP(S) & TRAINING(S)
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	82-1723455	501(C)(3)	9,074				AT COI COMMUNITY ENGAGEMENT LEAD SALARY, BENEFITS, AND EXPENSES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	82-1723455	501(C)(3)	80,157				SCOI COORDINATOR
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	82-1723455	501(C)(3)	2,500				STORMWATER BMP WORKSHOPS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	82-1723455	501(C)(3)	1,500				SUPPORT AND APPRECIATION OF EXISTING MEMBERS
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	82-1723455	501(C)(3)	5,600				FARMER PROFESSIONAL DEVELOPMENT FUNDS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	82-1723455	501(C)(3)	12,137				PROFESSIONAL AND ORGANIZATIONAL DEVELOPMENT
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	82-1723455	501(C)(3)	22,005				EEOCI ADMINISTRATIVE COORDINATOR

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	82-1723455	501(C)(3)	78,360				FORESTS COI MANAGER STAFF POSITION
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	82-1723455	501(C)(3)	1,280				COLLABORATIVE EXPLORATION OF WAYS TO REINVENT ENVIRONMENTAL EDUCATION ACROSS THE PW

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	82-1723455	501(C)(3)	3,000				COI OPERATIONS FLEX
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	82-1723455	501(C)(3)	68,946				AT COI MANAGER SALARY, BENEFITS, AND EXPENSES



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	82-1723455	501(C)(3)	2,800				BUILDING AND SUSTAINING CAPACITY: STEERING COMMITTEE
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	82-1723455	501(C)(3)	85,204				EEOCI MANAGER

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	82-1723455	501(C)(3)	319				STRATEGIC AND ADMINISTRATIVE SUPPORT
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	82-1723455	501(C)(3)	3,500				FACILITATOR FOR WORKPLANNING FOR 2020

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	82-1723455	501(C)(3)	1,655				BMP WORKSHOPS
R MERLE PALMER MINORITY SCHOLARSHIP FOUNDATION PO BOX 7119 TACOMA, WA 98417	91-1742581	501(C)(3)	10,000				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
R MERLE PALMER MINORITY SCHOLARSHIP FOUNDATION PO BOX 7119 TACOMA, WA 98417	91-1742581	501(C)(3)	20,000				GENERAL OPERATING SUPPORT
R MERLE PALMER MINORITY SCHOLARSHIP FOUNDATION PO BOX 7119 TACOMA, WA 98417	91-1742581	501(C)(3)	1,000				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
R MERLE PALMER MINORITY SCHOLARSHIP FOUNDATION PO BOX 7119 TACOMA, WA 98417	91-1742581	501(C)(3)	10,000				COMMUNITY & YOUTH MOBILIZATION IN TILlicum, PARKLAND, AND PIERCE COUNTY
R MERLE PALMER MINORITY SCHOLARSHIP FOUNDATION PO BOX 7119 TACOMA, WA 98417	91-1742581	501(C)(3)	719				SCHOLARSHIPS FOR PIERCE COUNTY HIGH SCHOOL GRADUATES STUDYING STEM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
R MERLE PALMER MINORITY SCHOLARSHIP FOUNDATION PO BOX 7119 TACOMA, WA 98417	91-1742581	501(C)(3)	3,000				GENERAL OPERATING SUPPORT
R MERLE PALMER MINORITY SCHOLARSHIP FOUNDATION PO BOX 7119 TACOMA, WA 98417	91-1742581	501(C)(3)	26,300				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RAIN READINESS ACCELERATION AND INNOVATION NETWORK 2304 JEFFERSON AVENUE TACOMA, WA 98402	46-3319126	501(C)(3)	10,000				RAIN 2019 IGEM RAINMAKERS
RAINBOW CENTER 2215 PACIFIC AVE TACOMA, WA 98402	91-1859897	501(C)(3)	500				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RAINBOW CENTER 2215 PACIFIC AVE TACOMA, WA 98402	91-1859897	501(C)(3)	500				GENERAL OPERATING SUPPORT
RAINBOW CENTER 2215 PACIFIC AVE TACOMA, WA 98402	91-1859897	501(C)(3)	10,000				GENERAL OPERATING SUPPORT



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RAINIER FOOTHILLS WELLNESS FOUNDATION PO BOX 905 ENUMCLAW, WA 98022	91-1192604	501(C)(3)	5,000				CARE VAN
REBUILDING HOPE THE SEXUAL ASSAULT CENTER FOR PIERCE COUNTY 101 E 26TH ST STE 200 TACOMA, WA 98421	91-0962226	501(C)(3)	3,500				COUNT ME IN!

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
REBUILDING HOPE THE SEXUAL ASSAULT CENTER FOR PIERCE COUNTY 101 E 26TH ST STE 200 TACOMA, WA 98421	91-0962226	501(C)(3)	3,500				COUNT ME IN!
REBUILDING HOPE THE SEXUAL ASSAULT CENTER FOR PIERCE COUNTY 101 E 26TH ST STE 200 TACOMA, WA 98421	91-0962226	501(C)(3)	500				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RESCUE MISSION PO BOX 1912 TACOMA, WA 98401	91-0565014	501(C)(3)	600				GENERAL OPERATING SUPPORT
RESCUE MISSION PO BOX 1912 TACOMA, WA 98401	91-0565014	501(C)(3)	7,500				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RESCUE MISSION PO BOX 1912 TACOMA, WA 98401	91-0565014	501(C)(3)	2,000				GENERAL OPERATING SUPPORT
RESCUE MISSION PO BOX 1912 TACOMA, WA 98401	91-0565014	501(C)(3)	2,500				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RESCUE MISSION PO BOX 1912 TACOMA, WA 98401	91-0565014	501(C)(3)	2,500				GENERAL OPERATING SUPPORT
RESCUE MISSION PO BOX 1912 TACOMA, WA 98401	91-0565014	501(C)(3)	6,735				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RESCUE MISSION PO BOX 1912 TACOMA, WA 98401	91-0565014	501(C)(3)	695				GENERAL OPERATING SUPPORT
RESCUE MISSION PO BOX 1912 TACOMA, WA 98401	91-0565014	501(C)(3)	3,499				GENERAL OPERATIONS IN TACOMA, WA

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RESCUE MISSION PO BOX 1912 TACOMA, WA 98401	91-0565014	501(C)(3)	500				EMERGENCY FAMILY SHELTER FUND
RESCUE MISSION PO BOX 1912 TACOMA, WA 98401	91-0565014	501(C)(3)	9,260				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RESCUE MISSION PO BOX 1912 TACOMA, WA 98401	91-0565014	501(C)(3)	500				GENERAL OPERATING SUPPORT
RESCUE MISSION PO BOX 1912 TACOMA, WA 98401	91-0565014	501(C)(3)	500				GENERAL OPERATING SUPPORT



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ROCK PAPER SCISSORS FOUNDATION PO BOX 44643 TACOMA, WA 98448	80-0944341	501(C)(3)	10,395				ELO PROGRAMMING IN TPS: L.I.L.Y. YOUTH MENTORSHIP PROGRAM
ROCK PAPER SCISSORS FOUNDATION PO BOX 44643 TACOMA, WA 98448	80-0944341	501(C)(3)	500				ELO PROVIDER PARTICIPATION: L.I.L.Y. YOUTH MENTORSHIP PROGRAM IN TACOMA PUBLIC SCHOOLS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ROTARY CLUB OF UPPER KITTITAS COUNTY FOUNDATION PO BOX 1035 CLE ELUM, WA 98922	46-5013224	501(C)(3)	10,000				SUNCADIA OWNERS UKC ROTARY SCHOLARSHIP PROGRAM
RURAL DEVELOPMENT INITIATIVES 150 SHELTON-MCMURPHEY BLVD STE 201 EUGENE, OR 97401	93-1073746	501(C)(3)	7,000				2019 COHORT PROJECT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RURAL DEVELOPMENT INITIATIVES 150 SHELTON-MCMURPHEY BLVD STE 201 EUGENE, OR 97401	93-1073746	501(C)(3)	13,000				RURAL LEADERSHIP COHORT
SAFE STREETS CAMPAIGN 622 TACOMA AVE S FL 1 TACOMA, WA 98402	91-1704402	501(C)(3)	5,000				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SAFE STREETS CAMPAIGN 622 TACOMA AVE S FL 1 TACOMA, WA 98402	91-1704402	501(C)(3)	1,500				LEVERAGING COMMUNITY COALITIONS AND GRASSROOTS NETWORKS TO PROMOTE THE 2020 CENSUS
SAFE STREETS CAMPAIGN 622 TACOMA AVE S FL 1 TACOMA, WA 98402	91-1704402	501(C)(3)	18,500				LEVERAGING COMMUNITY COALITIONS AND GRASSROOTS NETWORKS TO PROMOTE THE 2020 CENSUS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SAFE STREETS CAMPAIGN 622 TACOMA AVE S FL 1 TACOMA, WA 98402	91-1704402	501(C)(3)	500				GENERAL OPERATING SUPPORT
SALVATION ARMY NORTHWEST DIVISION PO BOX 9219 SEATTLE, WA 98109	94-1156347	501(C)(3)	5,070				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SCHOOL'S OUT WASHINGTON 801 23RD AVE S STE A SEATTLE, WA 98144	46-0809713	501(C)(3)	110,220				TACOMA WHOLE CHILD PARTNERSHIP: PSELI COACHING
SCHOOL'S OUT WASHINGTON 801 23RD AVE S STE A SEATTLE, WA 98144	46-0809713	501(C)(3)	1,150				TACOMA WHOLE CHILD PARTNERSHIP: SEL PQA SCOPE OF WORK PHASE 2 (2018PQ-043)

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SCHOOL'S OUT WASHINGTON 801 23RD AVE S STE A SEATTLE, WA 98144	46-0809713	501(C)(3)	16,503				TACOMA WHOLE CHILD PARTNERSHIP: FALL/SPRING SCOPE (2018PQ-013)
SCHOOL'S OUT WASHINGTON 801 23RD AVE S STE A SEATTLE, WA 98144	46-0809713	501(C)(3)	1,150				TACOMA WHOLE CHILD PARTNERSHIP: SEL PQA SCOPE OF WORK PHASE 1 (2018PQ-042)

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SCHOOL'S OUT WASHINGTON 801 23RD AVE S STE A SEATTLE, WA 98144	46-0809713	501(C)(3)	15,000				TACOMA WHOLE CHILD PARTNERSHIP: PSELI COACHING CONSULTING
SCHOOL'S OUT WASHINGTON 801 23RD AVE S STE A SEATTLE, WA 98144	46-0809713	501(C)(3)	1,150				TACOMA WHOLE CHILD PARTNERSHIP: YPQA SCOPE OF WORK (2018PQ-041)



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SCHOOL'S OUT WASHINGTON 801 23RD AVE S STE A SEATTLE, WA 98144	46-0809713	501(C)(3)	5,000				SUMMER BLAST - TRAINING
SECOND CYCLE 1205 MARTIN LUTHER KING JR WAY TACOMA, WA 98405	45-2637950	501(C)(3)	4,400				ACTIVE COI ACTIVITY 3.B.2.2.C: SECOND CYCLE 2019 YOUTH ACCESS FUND

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SECOND CYCLE 1205 MARTIN LUTHER KING JR WAY TACOMA, WA 98405	45-2637950	501(C)(3)	1,000				ACTIVE COI ACTIVITY 4.C.1.2: PROFESSIONAL DEVELOPMENT (REIMBURSEMENT)
SECOND CYCLE 1205 MARTIN LUTHER KING JR WAY TACOMA, WA 98405	45-2637950	501(C)(3)	7,500				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SECOND CYCLE 1205 MARTIN LUTHER KING JR WAY TACOMA, WA 98405	45-2637950	501(C)(3)	7,000				EFFORTS THAT INCREASE ACCESS TO SAFE, HEALTHY, AND AFFORDABLE ACTIVE TRANSPORTATION OPTIONS
SHANAMAN TACOMA PIERCE COUNTY SPORTS MUSEUM PO BOX 1614 TACOMA, WA 984011614	91-1648184	501(C)(3)	15,000				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SHARED HOUSING SERVICES 901 S 11TH ST TACOMA, WA 98405	91-1557248	501(C)(3)	5,000				LET'S ALL GET COUNTED IN PIERCE COUNTY!
SHARED HOUSING SERVICES 901 S 11TH ST TACOMA, WA 98405	91-1557248	501(C)(3)	1,211				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SKYLINE PRESBYTERIAN CHURCH 6301 WESTGATE BLVD TACOMA, WA 98406	23-6393377	501(C)(3)	10,000				GENERAL OPERATING SUPPORT
SOUTHERN ADVENTIST UNIVERSITY ADVANCEMENT COLLEGEDALE, TN 37315	62-0536733	501(C)(3)	30,000				MARVIN ROBERTSON ENDOWED SCHOLARSHIP FUND

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOUTHWESTERN WASHINGTON SYNOD ELCA 420 121ST ST S TACOMA, WA 98444	36-3513680	501(C)(3)	5,489				SALISHAN MISSION
ST JOHN BOSCO CATHOLIC CHURCH 315 N MAIN ST WOODSTOCK, VA 22664	31-1525496	501(C)(3)	10,000				HISTORICAL CHURCH RESTORATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
STEP BY STEP FAMILY SUPPORT CENTER PO BOX 488 MILTON, WA 98354	91-1871945	501(C)(3)	5,000				PURCHASE OF CHINA AT NEW FACILITY
STEP BY STEP FAMILY SUPPORT CENTER PO BOX 488 MILTON, WA 98354	91-1871945	501(C)(3)	1,000				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SUMNER-BONNEY LAKE EDUCATIONAL FOUNDATION 1202 WOOD AVE SUMNER, WA 98390	30-0128156	501(C)(3)	400				SCHOLARSHIPS FOR STUDENTS MAJORING IN EDUCATION
SUMNER-BONNEY LAKE EDUCATIONAL FOUNDATION 1202 WOOD AVE SUMNER, WA 98390	30-0128156	501(C)(3)	400				SCHOLARSHIPS FOR STUDENTS MAJORING IN COMMUNICATIONS OR MUSIC



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SUMNER-BONNEY LAKE EDUCATIONAL FOUNDATION 1202 WOOD AVE SUMNER, WA 98390	30-0128156	501(C)(3)	400				PROVIDING SCHOLARSHIPS
SUMNER-BONNEY LAKE EDUCATIONAL FOUNDATION 1202 WOOD AVE SUMNER, WA 98390	30-0128156	501(C)(3)	2,800				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SUMNER-BONNEY LAKE EDUCATIONAL FOUNDATION 1202 WOOD AVE SUMNER, WA 98390	30-0128156	501(C)(3)	400				SCHOLARSHIPS TO STUDENTS STUDYING THE ARTS, MUSIC, OR JOURNALISM
SUMNER-BONNEY LAKE EDUCATIONAL FOUNDATION 1202 WOOD AVE SUMNER, WA 98390	30-0128156	501(C)(3)	500				STUDENT SCHOLARSHIPS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SUMNER-BONNEY LAKE EDUCATIONAL FOUNDATION 1202 WOOD AVE SUMNER, WA 98390	30-0128156	501(C)(3)	400				GENERAL OPERATING SUPPORT
SUMNER-BONNEY LAKE EDUCATIONAL FOUNDATION 1202 WOOD AVE SUMNER, WA 98390	30-0128156	501(C)(3)	4,500				PROVIDING SCHOLARSHIPS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SUMNER-BONNEY LAKE EDUCATIONAL FOUNDATION 1202 WOOD AVE SUMNER, WA 98390	30-0128156	501(C)(3)	1,300				GENERAL OPERATING SUPPORT
SUSTAINABLE CONNECTIONS 1707 ELLIS ST STE 221 BELLINGHAM, WA 98225	75-3041952	501(C)(3)	32,800				AGRI COI ACTIVITY 1.A.1: PIERCE COUNTY FRESH BUY LOCAL MARKETING PROGRAM EXPANSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SUSTAINABLE CONNECTIONS 1707 ELLIS ST STE 221 BELLINGHAM, WA 98225	75-3041952	501(C)(3)	28,600				AGRI COI ACTIVITY 1.A.1: PIERCE COUNTY FRESH BUY LOCAL MARKETING PROGRAM EXPANSION
SUSTAINABLE CONNECTIONS 1707 ELLIS ST STE 221 BELLINGHAM, WA 98225	75-3041952	501(C)(3)	495				AGRICULTURE COI ACTIVITY 4.B.2: OPPORTUNITY FUND - DESIGN OF NEW PIERCE COUNTY FRESH LOGO

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SUSTAINABLE CONNECTIONS 1707 ELLIS ST STE 221 BELLINGHAM, WA 98225	75-3041952	501(C)(3)	2,178				AGRI COI ACTIVITY 1.A.1: PIERCE COUNTY FRESH
SYMPHONY TACOMA 901 BROADWAY STE 600 TACOMA, WA 98402	91-6032976	501(C)(3)	2,180				ELO PROGRAMMING IN TPS: SYMPHONY2U ELEMENTARY SCHOOL OUTREACH PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SYMPHONY TACOMA 901 BROADWAY STE 600 TACOMA, WA 98402	91-6032976	501(C)(3)	500				ANNUAL FUND
SYMPHONY TACOMA 901 BROADWAY STE 600 TACOMA, WA 98402	91-6032976	501(C)(3)	4,300				ELO PROGRAMMING IN TPS: SYMPHONY2U ELEMENTARY SCHOOL OUTREACH PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SYMPHONY TACOMA 901 BROADWAY STE 600 TACOMA, WA 98402	91-6032976	501(C)(3)	2,500				GENERAL OPERATING SUPPORT
SYMPHONY TACOMA 901 BROADWAY STE 600 TACOMA, WA 98402	91-6032976	501(C)(3)	2,500				ANNUAL FUND



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SYMPHONY TACOMA 901 BROADWAY STE 600 TACOMA, WA 98402	91-6032976	501(C)(3)	500				SYMPHONY2U ELEMENTARY SCHOOL OUTREACH PROGRAM IN TACOMA PUBLIC SCHOOLS
SYMPHONY TACOMA 901 BROADWAY STE 600 TACOMA, WA 98402	91-6032976	501(C)(3)	10,000				SYMPHONY TACOMA GALA - AREA OF GREATEST NEED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SYMPHONY TACOMA 901 BROADWAY STE 600 TACOMA, WA 98402	91-6032976	501(C)(3)	5,000				GENERAL OPERATING SUPPORT
SYMPHONY TACOMA 901 BROADWAY STE 600 TACOMA, WA 98402	91-6032976	501(C)(3)	500				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SYMPHONY TACOMA 901 BROADWAY STE 600 TACOMA, WA 98402	91-6032976	501(C)(3)	1,400				GENERAL OPERATING SUPPORT
SYMPHONY TACOMA 901 BROADWAY STE 600 TACOMA, WA 98402	91-6032976	501(C)(3)	5,000				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA AREA COALITION OF INDIVIDUALS WITH DISABILITIES (TACID) 6315 S 19TH ST TACOMA, WA 98466	91-1125538	501(C)(3)	10,000				"I COUNT"
TACOMA AREA COALITION OF INDIVIDUALS WITH DISABILITIES (TACID) 6315 S 19TH ST TACOMA, WA 98466	91-1125538	501(C)(3)	15,000				ADAPTIVE YOGA AND OTHER PROGRAMMING TO ENHANCE PHYSICAL AND EMOTIONAL WELL-BEING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA ART MUSEUM 1701 PACIFIC AVE TACOMA, WA 984023214	91-0697444	501(C)(3)	500				AFTER SCHOOL ARTS PROGRAM
TACOMA ART MUSEUM 1701 PACIFIC AVE TACOMA, WA 984023214	91-0697444	501(C)(3)	250				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA ART MUSEUM 1701 PACIFIC AVE TACOMA, WA 984023214	91-0697444	501(C)(3)	1,500				FREE NEIGHBORHOOD NIGHTS
TACOMA ART MUSEUM 1701 PACIFIC AVE TACOMA, WA 984023214	91-0697444	501(C)(3)	417				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA ART MUSEUM 1701 PACIFIC AVE TACOMA, WA 984023214	91-0697444	501(C)(3)	3,000				GENERAL OPERATING SUPPORT
TACOMA ART MUSEUM 1701 PACIFIC AVE TACOMA, WA 984023214	91-0697444	501(C)(3)	2,500				GALA SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA ART MUSEUM 1701 PACIFIC AVE TACOMA, WA 984023214	91-0697444	501(C)(3)	3,000				ELO PROVIDER PARTICIPATION: SKETCH CLUB IN TACOMA PUBLIC SCHOOLS
TACOMA ART MUSEUM 1701 PACIFIC AVE TACOMA, WA 984023214	91-0697444	501(C)(3)	2,500				IMPRESSIONIST RESTORATION



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA ART MUSEUM 1701 PACIFIC AVE TACOMA, WA 984023214	91-0697444	501(C)(3)	1,200				GENERAL OPERATING SUPPORT
TACOMA ART MUSEUM 1701 PACIFIC AVE TACOMA, WA 984023214	91-0697444	501(C)(3)	180				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA ART MUSEUM 1701 PACIFIC AVE TACOMA, WA 984023214	91-0697444	501(C)(3)	5,910				GENERAL OPERATING SUPPORT
TACOMA ART MUSEUM 1701 PACIFIC AVE TACOMA, WA 984023214	91-0697444	501(C)(3)	515				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA ARTS LIVE 901 BROADWAY STE 700 TACOMA, WA 984024415	91-1106878	501(C)(3)	300				YOUTH PROGRAMS
TACOMA ARTS LIVE 901 BROADWAY STE 700 TACOMA, WA 984024415	91-1106878	501(C)(3)	3,500				FIRST NIGHT 2020

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA ARTS LIVE 901 BROADWAY STE 700 TACOMA, WA 984024415	91-1106878	501(C)(3)	6,735				EDUCATIONAL PROGRAMS
TACOMA ARTS LIVE 901 BROADWAY STE 700 TACOMA, WA 984024415	91-1106878	501(C)(3)	1,000				PROFESSIONAL REGIONAL THEATER PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA ARTS LIVE 901 BROADWAY STE 700 TACOMA, WA 984024415	91-1106878	501(C)(3)	67,500				ELO SITE DIRECTOR; MANAGER TIME AND PARTICIPATION; SUPPLIES AT SCHOOLS SERVED
TACOMA ARTS LIVE 901 BROADWAY STE 700 TACOMA, WA 984024415	91-1106878	501(C)(3)	1,000				CULTURAL ARTS PROGRAM: BALLET, WORLD DRUMMING, MUSIC, DRAMA IN TACOMA SCHOOLS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA ARTS LIVE 901 BROADWAY STE 700 TACOMA, WA 984024415	91-1106878	501(C)(3)	500				GENERAL OPERATING SUPPORT
TACOMA ATHLETIC COMMISSION PO BOX 11304 TACOMA, WA 98411	91-0515947	501(C)(3)	2,200				TACOMA ATHLETIC COMMISSION SCHOLARSHIP

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA ATHLETIC COMMISSION PO BOX 11304 TACOMA, WA 98411	91-0515947	501(C)(3)	900				CLAY HUNTINGTON SPORTS COMMUNICATIONS SCHOLARSHIP
TACOMA ATHLETIC COMMISSION PO BOX 11304 TACOMA, WA 98411	91-0515947	501(C)(3)	3,860				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA COMMUNITY BOAT BUILDERS 1120 EAST D ST TACOMA, WA 98421	46-1724422	501(C)(3)	7,500				GENERAL OPERATING SUPPORT
TACOMA COMMUNITY BOAT BUILDERS 1120 EAST D ST TACOMA, WA 98421	46-1724422	501(C)(3)	250				SUPPORT FOR RESIDENTS OF REMANN HALL



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA COMMUNITY BOAT BUILDERS 1120 EAST D ST TACOMA, WA 98421	46-1724422	501(C)(3)	15,000				GENERAL OPERATING SUPPORT
TACOMA COMMUNITY COLLEGE FINANCIAL AID SERVICES/ATTN SCHOLARSHIP COORDINATOR TACOMA, WA 984666100		SCHOOL	1,200				ANDRE STOUT AFRICAN AMERICAN SCHOLARSHIP

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA COMMUNITY COLLEGE FOUNDATION 6501 S 19TH ST BLDG 6 TACOMA, WA 98466	91-6073780	501(C)(3)	5,000				SCHOLARSHIP FUND
TACOMA COMMUNITY COLLEGE FOUNDATION 6501 S 19TH ST BLDG 6 TACOMA, WA 98466	91-6073780	501(C)(3)	4,700				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA COMMUNITY HOUSE 1314 S L ST TACOMA, WA 98405	91-0570872	501(C)(3)	500				ELO PROVIDER PARTICIPATION: READ2ME IN TACOMA PUBLIC SCHOOLS
TACOMA COMMUNITY HOUSE 1314 S L ST TACOMA, WA 98405	91-0570872	501(C)(3)	20,000				UNITING COMMUNITIES CAPITAL CAMPAIGN

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA COMMUNITY HOUSE 1314 S L ST TACOMA, WA 98405	91-0570872	501(C)(3)	500				GENERAL OPERATING SUPPORT
TACOMA COMMUNITY HOUSE 1314 S L ST TACOMA, WA 98405	91-0570872	501(C)(3)	2,310				ELO PROGRAMMING IN TPS: READ2ME

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA COMMUNITY HOUSE 1314 S L ST TACOMA, WA 98405	91-0570872	501(C)(3)	5,000				GENERAL OPERATING SUPPORT
TACOMA COMMUNITY HOUSE 1314 S L ST TACOMA, WA 98405	91-0570872	501(C)(3)	10,000				CAPITAL CAMPAIGN

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA COMMUNITY HOUSE 1314 S L ST TACOMA, WA 98405	91-0570872	501(C)(3)	20,000				TCH/REACH COMPLETE COUNT 2020
TACOMA COMMUNITY HOUSE 1314 S L ST TACOMA, WA 98405	91-0570872	501(C)(3)	250				PROVIDE SOCIAL SERVICES TO IMMIGRANTS TO HELP THEM BECOME SELF-SUFFICIENT CITIZENS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA COMMUNITY HOUSE 1314 S L ST TACOMA, WA 98405	91-0570872	501(C)(3)	10,000				UNRESTRICTED
TACOMA COMMUNITY HOUSE 1314 S L ST TACOMA, WA 98405	91-0570872	501(C)(3)	10,000				CAPITAL CAMPAIGN

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA DELTA FOUNDATION PO BOX 39316 TACOMA, WA 98496	90-0646066	501(C)(3)	5,000				DELTA SIGMA THETA SORORITY TACOMA ALUMNAE CHAPTER-2020 CENSUS COMPLETION
TACOMA ELKS LODGE NO 174 BPOE PO BOX 11008 TACOMA, WA 98411	91-0142850	501(C)(8)	8,450				TALL ELKS FUND



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA ELKS LODGE NO 174 BPOE PO BOX 11008 TACOMA, WA 98411	91-0142850	501(C)(8)	3,344				PROGRAMS THAT BENEFIT CHILDREN
TACOMA GARDEN CLUB PO BOX 64235 UNIVERSITY PLACE, WA 984640235	91-6032230	501(C)(3)	200				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA GARDEN CLUB PO BOX 64235 UNIVERSITY PLACE, WA 984640235	91-6032230	501(C)(3)	8,500				MEMBER EDUCATION, STRATEGIC PLANNING, AND CHILDREN'S DISCOVERY PORGRAM
TACOMA HOUSING AUTHORITY 902 S L ST TACOMA, WA 98405		501(C)(3)	100,000				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA HOUSING AUTHORITY 902 S L ST TACOMA, WA 98405		501(C)(3)	30,000				REIMBURSEMENT FOR ARCHITECTURAL AND COMMUNITY ENGAGEMENT WORK BY MITHUN ARCHITECTS
TACOMA HOUSING AUTHORITY 902 S L ST TACOMA, WA 98405		501(C)(3)	10,000				2020 CENSUS AWARENESS CAMPAIGN TO LOW-INCOME TACOMA RESIDENTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA LITTLE THEATRE AND DRAMA LEAGUE 210 N I ST TACOMA, WA 98403	91-0485763	501(C)(3)	5,000				AREA OF GREATEST NEED
TACOMA LITTLE THEATRE AND DRAMA LEAGUE 210 N I ST TACOMA, WA 98403	91-0485763	501(C)(3)	500				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA LITTLE THEATRE AND DRAMA LEAGUE 210 N I ST TACOMA, WA 98403	91-0485763	501(C)(3)	500				GENERAL OPERATING SUPPORT
TACOMA LITTLE THEATRE AND DRAMA LEAGUE 210 N I ST TACOMA, WA 98403	91-0485763	501(C)(3)	100				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA OPERA ASSOCIATION 47 ST HELENS AVE STE 201 TACOMA, WA 98402	91-1237511	501(C)(3)	10,000				GENERAL OPERATING SUPPORT
TACOMA OPERA ASSOCIATION 47 ST HELENS AVE STE 201 TACOMA, WA 98402	91-1237511	501(C)(3)	500				GENERAL OPERATIONS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA OPERA ASSOCIATION 47 ST HELENS AVE STE 201 TACOMA, WA 98402	91-1237511	501(C)(3)	1,000				GENERAL OPERATING SUPPORT
TACOMA OPERA ASSOCIATION 47 ST HELENS AVE STE 201 TACOMA, WA 98402	91-1237511	501(C)(3)	515				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA OPERA ASSOCIATION 47 ST HELENS AVE STE 201 TACOMA, WA 98402	91-1237511	501(C)(3)	1,000				GENERAL OPERATING SUPPORT
TACOMA OPERA ASSOCIATION 47 ST HELENS AVE STE 201 TACOMA, WA 98402	91-1237511	501(C)(3)	1,300				GENERAL OPERATING SUPPORT



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA OPERA ASSOCIATION 47 ST HELENS AVE STE 201 TACOMA, WA 98402	91-1237511	501(C)(3)	10,000				GENERAL OPERATING SUPPORT
TACOMA OPERA ASSOCIATION 47 ST HELENS AVE STE 201 TACOMA, WA 98402	91-1237511	501(C)(3)	1,000				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA PIERCE COUNTY HABITAT FOR HUMANITY 4824 S TACOMA WAY TACOMA, WA 98409	58-1735531	501(C)(3)	1,000				PROPERTY ACQUISITION
TACOMA PIERCE COUNTY HABITAT FOR HUMANITY 4824 S TACOMA WAY TACOMA, WA 98409	58-1735531	501(C)(3)	500				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA PIERCE COUNTY HABITAT FOR HUMANITY 4824 S TACOMA WAY TACOMA, WA 98409	58-1735531	501(C)(3)	1,000				CHANGING LIVES LUNCHEON
TACOMA PIERCE COUNTY HABITAT FOR HUMANITY 4824 S TACOMA WAY TACOMA, WA 98409	58-1735531	501(C)(3)	500				OPERATIONS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA PIERCE COUNTY HABITAT FOR HUMANITY 4824 S TACOMA WAY TACOMA, WA 98409	58-1735531	501(C)(3)	250				GENERAL OPERATING SUPPORT
TACOMA PIERCE COUNTY HABITAT FOR HUMANITY 4824 S TACOMA WAY TACOMA, WA 98409	58-1735531	501(C)(3)	10,000				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA PIERCE COUNTY HABITAT FOR HUMANITY 4824 S TACOMA WAY TACOMA, WA 98409	58-1735531	501(C)(3)	25,000				GENERAL OPERATING SUPPORT
TACOMA PIERCE COUNTY HABITAT FOR HUMANITY 4824 S TACOMA WAY TACOMA, WA 98409	58-1735531	501(C)(3)	5,000				HABI_CHAT: YOU COUNT! CENSUS 2020

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

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
TACOMA PIERCE COUNTY SPORTS COMMISSION DBA TACOMA SOUTH SOUND SPORTS 1119 PACIFIC AVE STE 500 TACOMA, WA 98402	94-3154901	501(C)(6)	5,000				METRO PARKS FOUNDATION: FOSS WATERWAY DEVELOPMENT AUTHORITY / WATERWAY PARK DEVELOPMENT
TACOMA PIERCE COUNTY SPORTS COMMISSION DBA TACOMA SOUTH SOUND SPORTS 1119 PACIFIC AVE STE 500 TACOMA, WA 98402	94-3154901	501(C)(6)	1,500				TACOMA ATHLETIC COMMISSION: 2020 SCHOLARSHIPS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA PIERCE COUNTY SPORTS COMMISSION DBA TACOMA SOUTH SOUND SPORTS 1119 PACIFIC AVE STE 500 TACOMA, WA 98402	94-3154901	501(C)(6)	1,500				BETHEL SCHOOL DISTRICT FOUNDATION: BETHEL ATHLETIC HALL OF FAME
TACOMA PIERCE COUNTY SPORTS COMMISSION DBA TACOMA SOUTH SOUND SPORTS 1119 PACIFIC AVE STE 500 TACOMA, WA 98402	94-3154901	501(C)(6)	1,500				SHANAMAN SPORTS MUSEUM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA PIERCE COUNTY SPORTS COMMISSION DBA TACOMA SOUTH SOUND SPORTS 1119 PACIFIC AVE STE 500 TACOMA, WA 98402	94-3154901	501(C)(6)	500				GOLDEN GLOVES BOXING
TACOMA PUBLIC SCHOOLS BUDGET OFFICE TACOMA, WA 98405		GOVERNMENT	1,005,398				2019 PSELI INSTALLMENT (2 OF 2)



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA PUBLIC SCHOOLS BUDGET OFFICE TACOMA, WA 98405		GOVERNMENT	481,323				2019/20 WALLACE FUNDING (PAYMENT 1 OF 2)
TACOMA PUBLIC SCHOOLS BUDGET OFFICE TACOMA, WA 98405		GOVERNMENT	20,000				TEACHER/STUDENT EXPERIENCES, FIELD TRIPS, PLANNING, DEVELOPMENT, AND SUPPLIES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA PUBLIC SCHOOLS BUDGET OFFICE TACOMA, WA 98405		GOVERNMENT	500				TONE PROGRAM: IN HONOR OF THE HOLIDAYS
TACOMA REFUGEE CHOIR PO BOX 2321 TACOMA, WA 98401	82-2515143	501(C)(3)	2,500				2020 CENSUS SONG AND VIDEO AND OUTREACH COLLABORATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA REFUGEE CHOIR PO BOX 2321 TACOMA, WA 98401	82-2515143	501(C)(3)	17,500				2020 CENSUS SONG AND VIDEO AND OUTREACH COLLABORATION
TACOMA SEED 2201 S TACOMA WAY PMB 128 TACOMA, WA 98409	82-5099194	501(C)(3)	35,476				JHFS COI ACTIVITY 2.1.2: URBAN FARMING REENTRY PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA SEED 2201 S TACOMA WAY PMB 128 TACOMA, WA 98409	82-5099194	501(C)(3)	9,900				COMMUNITY BASED PARTICIPATORY RESEARCH & COMMUNITY CREATED ACTIVITIES
TACOMA SOUTH PUGET SOUND MESA MORKEN CENTER FOR LEARNING TECHNOLOGY TACOMA, WA 98447	91-0565571	501(C)(3)	1,500				TACOMA/SOUTH PUGET SOUND MESA (MATH ENGINEERING SCIENCE ACHIEVEMENT) IN TPS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA SOUTH PUGET SOUND MESA MORKEN CENTER FOR LEARNING TECHNOLOGY TACOMA, WA 98447	91-0565571	501(C)(3)	17,325				ELO PROGRAMMING IN TPS: TACOMA/SOUTH PUGET SOUND MESA (MATH ENGINEERING SCIENCE ACHIEVEMENT)
TACOMA TREE FOUNDATION PO BOX 7234 TACOMA, WA 98417	83-2505388	501(C)(3)	2,500				HILLTOP TREE PLANTING AND DISTRIBUTION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA TREE FOUNDATION PO BOX 7234 TACOMA, WA 98417	83-2505388	501(C)(3)	1,000				ELO PROVIDER PARTICIPATION: NATURE EXPLORERS PROGRAM IN TACOMA PUBLIC SCHOOLS
TACOMA TREE FOUNDATION PO BOX 7234 TACOMA, WA 98417	83-2505388	501(C)(3)	11,250				FORESTS COI ACTIVITY 7.4.2: CAPACITY BUILDING - TACOMA TREE FOUNDATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA TREE FOUNDATION PO BOX 7234 TACOMA, WA 98417	83-2505388	501(C)(3)	3,360				ELO PROGRAMMING IN TPS: NATURE EXPLORERS PROGRAM (SESSION 1)
TACOMA TREE FOUNDATION PO BOX 7234 TACOMA, WA 98417	83-2505388	501(C)(3)	11,100				FOREST COI ACTIVITY 7.3.5: CULTIVATING COMMUNITY WITH GRIT CITY TREE PLANTINGS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA URBAN LEAGUE 2550 S YAKIMA AVE TACOMA, WA 98405	91-0826302	501(C)(3)	45,000				MAKE BLACK COUNT!
TACOMA URBAN LEAGUE 2550 S YAKIMA AVE TACOMA, WA 98405	91-0826302	501(C)(3)	350				ELIZABETH WESLEY YOUTH MERIT INCENTIVE AWARD - MERIT AWARD



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA URBAN LEAGUE 2550 S YAKIMA AVE TACOMA, WA 98405	91-0826302	501(C)(3)	500				GENERAL OPERATING SUPPORT
TACOMA URBAN LEAGUE 2550 S YAKIMA AVE TACOMA, WA 98405	91-0826302	501(C)(3)	4,000				CAREER EMPOWERMENT ACADEMY (CEA)

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA URBAN LEAGUE 2550 S YAKIMA AVE TACOMA, WA 98405	91-0826302	501(C)(3)	10,000				GENERAL OPERATING SUPPORT
TACOMA URBAN LEAGUE 2550 S YAKIMA AVE TACOMA, WA 98405	91-0826302	501(C)(3)	10,000				SCHOLARSHIPS AT CLOVER PARK AND TCC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA URBAN LEAGUE 2550 S YAKIMA AVE TACOMA, WA 98405	91-0826302	501(C)(3)	1,000				ELO PROVIDER PARTICIPATION: MALE INVOLVEMENT PROGRAM (MIP) IN TACOMA PUBLIC SCHOOLS
TACOMA URBAN LEAGUE 2550 S YAKIMA AVE TACOMA, WA 98405	91-0826302	501(C)(3)	1,000				ELO PROVIDER PARTICIPATION: SISTERHOOD IN THE CITY IN TACOMA PUBLIC SCHOOLS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA URBAN LEAGUE 2550 S YAKIMA AVE TACOMA, WA 98405	91-0826302	501(C)(3)	11,550				ELO PROGRAMMING IN TPS: SISTERHOOD IN THE CITY
TACOMA URBAN LEAGUE 2550 S YAKIMA AVE TACOMA, WA 98405	91-0826302	501(C)(3)	2,000				ENVIRONMENTAL JUSTICE CAMPS FOR GIRLS OF COLOR

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA URBAN LEAGUE 2550 S YAKIMA AVE TACOMA, WA 98405	91-0826302	501(C)(3)	5,775				ELO PROGRAMMING IN TPS: MALE INVOLVEMENT PROGRAM (MIP)
TACOMA URBAN LEAGUE 2550 S YAKIMA AVE TACOMA, WA 98405	91-0826302	501(C)(3)	5,000				AFRICAN AMERICAN FINANCIAL CAPABILITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA URBAN LEAGUE 2550 S YAKIMA AVE TACOMA, WA 98405	91-0826302	501(C)(3)	3,000				BLACK EMPOWERMENT CENTER
TACOMA-PIERCE COUNTY HEALTH DEPARTMENT 3629 S D ST MS 001 TACOMA, WA 984186813	91-1488160	GOVERNMENT	13,600				INCENTIVES/GIFTS/ESSENTIALS FOR UNWED FIRST TIME MOTHERS IN PIERCE COUNTY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA-PIERCE COUNTY HEALTH DEPARTMENT 3629 S D ST MS 001 TACOMA, WA 984186813	91-1488160	GOVERNMENT	6,000				STORM COI ACTIVITY 3.6.3: STAFF SUPPORT FUNDS
TAHOMA AUDUBON SOCIETY 2917 MORRISON RD W UNIVERSITY PLACE, WA 98466	23-7450873	501(C)(3)	500				UNRESTRICTED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TAHOMA AUDUBON SOCIETY 2917 MORRISON RD W UNIVERSITY PLACE, WA 98466	23-7450873	501(C)(3)	12,600				GENERAL OPERATING SUPPORT
TAHOMA AUDUBON SOCIETY 2917 MORRISON RD W UNIVERSITY PLACE, WA 98466	23-7450873	501(C)(3)	800				GENERAL OPERATING SUPPORT



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TAHOMA AUDUBON SOCIETY 2917 MORRISON RD W UNIVERSITY PLACE, WA 98466	23-7450873	501(C)(3)	1,400				GENERAL OPERATING SUPPORT
TAHOMA AUDUBON SOCIETY 2917 MORRISON RD W UNIVERSITY PLACE, WA 98466	23-7450873	501(C)(3)	1,100				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TAHOMA AUDUBON SOCIETY 2917 MORRISON RD W UNIVERSITY PLACE, WA 98466	23-7450873	501(C)(3)	500				GENERAL OPERATING SUPPORT
TAHOMA AUDUBON SOCIETY 2917 MORRISON RD W UNIVERSITY PLACE, WA 98466	23-7450873	501(C)(3)	600				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TAHOMA AUDUBON SOCIETY 2917 MORRISON RD W UNIVERSITY PLACE, WA 98466	23-7450873	501(C)(3)	500				GENERAL OPERATING SUPPORT
TAHOMA AUDUBON SOCIETY 2917 MORRISON RD W UNIVERSITY PLACE, WA 98466	23-7450873	501(C)(3)	300				GENERAL OPERATING SUPPORT: IN HONOR OF MARSHA WILLIAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TAHOMA AUDUBON SOCIETY 2917 MORRISON RD W UNIVERSITY PLACE, WA 98466	23-7450873	501(C)(3)	1,000				GENERAL OPERATING SUPPORT
TEAMCHILD 1225 S WELLER ST STE 420 SEATTLE, WA 98144	91-1930194	501(C)(3)	7,500				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TECHBRIDGE GIRLS 114 LINDEN ST OAKLAND, CA 94607	27-4162514	501(C)(3)	3,000				ELO PROVIDER PARTICIPATION: TECHBRIDGE GIRLS INSPIRE IN TACOMA PUBLIC SCHOOLS
TECHBRIDGE GIRLS 114 LINDEN ST OAKLAND, CA 94607	27-4162514	501(C)(3)	4,200				ELO PROGRAMMING IN TPS: TECHBRIDGE GIRLS INSPIRE (SESSION 1)

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TECHBRIDGE GIRLS 114 LINDEN ST OAKLAND, CA 94607	27-4162514	501(C)(3)	16,800				ELO PROGRAMMING IN TPS: TECHBRIDGE GIRLS INSPIRE
THE COFFEE OASIS 837 4TH ST BREMERTON, WA 98337	91-1745050	501(C)(3)	5,000				TACOMA

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE FIRST TEE OF SOUTH PUGET SOUND 7108 LAKEWOOD DR W TACOMA, WA 98467	45-1781054	501(C)(3)	1,000				ELO PROVIDER PARTICIPATION: NATIONAL SCHOOL PROGRAM IN TACOMA PUBLIC SCHOOLS
THE FIRST TEE OF SOUTH PUGET SOUND 7108 LAKEWOOD DR W TACOMA, WA 98467	45-1781054	501(C)(3)	5,000				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE FIRST TEE OF SOUTH PUGET SOUND 7108 LAKEWOOD DR W TACOMA, WA 98467	45-1781054	501(C)(3)	8,505				ELO PROGRAMMING IN TPS: NATIONAL SCHOOL PROGRAM
THE FORUM FOR YOUTH INVESTMENT 7064 EASTERN AVE NW WASHINGTON, DC 200122031	52-2242472	501(C)(3)	5,000				READY BY 21 NATIONAL MEETING SPONSORSHIP



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE GOODTIMES PROJECT 7400 SAND POINT WAY NE 101S SEATTLE, WA 98115	46-2489916	501(C)(3)	13,000				GENERAL OPERATING SUPPORT
THE MUSTARD SEED PROJECT OF KEY PENINSULA PO BOX 182 VAUGHN, WA 98394	61-1537566	501(C)(3)	500				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE MUSTARD SEED PROJECT OF KEY PENINSULA PO BOX 182 VAUGHN, WA 98394	61-1537566	501(C)(3)	2,500				GENERAL OPERATING SUPPORT
THE MUSTARD SEED PROJECT OF KEY PENINSULA PO BOX 182 VAUGHN, WA 98394	61-1537566	501(C)(3)	250				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE MUSTARD SEED PROJECT OF KEY PENINSULA PO BOX 182 VAUGHN, WA 98394	61-1537566	501(C)(3)	5,000				ASSISTED LIVING PROJECT
THE REFORMATION PROJECT PO BOX 14862 LENEXA, KS 66285	46-1012806	501(C)(3)	10,000				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE SALVATION ARMY 1110 S PUGET SOUND AVE TACOMA, WA 98405	94-1156347	501(C)(3)	500				EMERGENCY FAMILY LODGE
THE SALVATION ARMY 1110 S PUGET SOUND AVE TACOMA, WA 98405	94-1156347	501(C)(3)	500				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE SALVATION ARMY 1110 S PUGET SOUND AVE TACOMA, WA 98405	94-1156347	501(C)(3)	1,211				GENERAL OPERATING SUPPORT
THE SALVATION ARMY 1110 S PUGET SOUND AVE TACOMA, WA 98405	94-1156347	501(C)(3)	300				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE SALVATION ARMY 1110 S PUGET SOUND AVE TACOMA, WA 98405	94-1156347	501(C)(3)	300				GENERAL OPERATING SUPPORT
THE SALVATION ARMY 1110 S PUGET SOUND AVE TACOMA, WA 98405	94-1156347	501(C)(3)	973				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE SALVATION ARMY 1110 S PUGET SOUND AVE TACOMA, WA 98405	94-1156347	501(C)(3)	2,500				GENERAL OPERATING SUPPORT
THE SALVATION ARMY 1110 S PUGET SOUND AVE TACOMA, WA 98405	94-1156347	501(C)(3)	500				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE SALVATION ARMY 1110 S PUGET SOUND AVE TACOMA, WA 98405	94-1156347	501(C)(3)	813				GENERAL OPERATING SUPPORT
THE SALVATION ARMY 1110 S PUGET SOUND AVE TACOMA, WA 98405	94-1156347	501(C)(3)	3,501				GENERAL OPERATIONS IN PIERCE COUNTY, WA



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE VEDANTA SOCIETY OF WESTERN WASHINGTON 2716 BROADWAY AVE E SEATTLE, WA 981023909	81-6187530	501(C)(3)	40,000				TRACTOR WITH IMPLEMENTS
TOYS FOR KIDS 4008 243RD PL SE ISSAQUAH, WA 98029	91-2099219	501(C)(3)	5,000				DAVE HENDERSON SCHOLARSHIP

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TRINITY PRESBYTERIAN CHURCH 1615 6TH AVE TACOMA, WA 98405	23-6393377	501(C)(3)	55,000				BRYANT NEIGHBORHOOD COMMUNITY CENTER
UNITED WAY OF PIERCE COUNTY PO BOX 2215 TACOMA, WA 984012215	91-0650669	501(C)(3)	500				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF PIERCE COUNTY PO BOX 2215 TACOMA, WA 984012215	91-0650669	501(C)(3)	250				GENERAL OPERATING SUPPORT
UNITED WAY OF PIERCE COUNTY PO BOX 2215 TACOMA, WA 984012215	91-0650669	501(C)(3)	1,000				ANNUAL CAMPAIGN

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF PIERCE COUNTY PO BOX 2215 TACOMA, WA 984012215	91-0650669	501(C)(3)	834				GENERAL OPERATING SUPPORT
UNITED WAY OF PIERCE COUNTY PO BOX 2215 TACOMA, WA 984012215	91-0650669	501(C)(3)	15,000				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF PUGET SOUND CORPORATE FOUNDATION RELATIONS TACOMA, WA 98416	91-0564961	501(C)(3)	250				GENERAL OPERATING SUPPORT
UNIVERSITY OF PUGET SOUND CORPORATE FOUNDATION RELATIONS TACOMA, WA 98416	91-0564961	501(C)(3)	2,500				UNIVERSITY OF PUGET SOUND STUDENTS FOR THE 2020 CENSUS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF PUGET SOUND CORPORATE FOUNDATION RELATIONS TACOMA, WA 98416	91-0564961	501(C)(3)	2,500				UNIVERSITY OF PUGET SOUND STUDENTS FOR THE 2020 CENSUS
UNIVERSITY OF PUGET SOUND CORPORATE FOUNDATION RELATIONS TACOMA, WA 98416	91-0564961	501(C)(3)	11,820				SCHOLARSHIPS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF PUGET SOUND CORPORATE FOUNDATION RELATIONS TACOMA, WA 98416	91-0564961	501(C)(3)	1,080				ERNA F. GUILFOIL SCHOLARSHIP FUND
UNIVERSITY OF PUGET SOUND CORPORATE FOUNDATION RELATIONS TACOMA, WA 98416	91-0564961	501(C)(3)	813				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF PUGET SOUND CORPORATE FOUNDATION RELATIONS TACOMA, WA 98416	91-0564961	501(C)(3)	41,896				GENERAL PURPOSES
UNIVERSITY OF WASHINGTON SCHOOL OF MEDICINE SEATTLE, WA 981956350	94-3079432	501(C)(3)	5,910				SCHOLARSHIPS TO MINORITY STUDENTS



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF WASHINGTON SCHOOL OF MEDICINE SEATTLE, WA 981956350	94-3079432	501(C)(3)	400				MEDICAL RESEARCH
UNIVERSITY OF WASHINGTON TACOMA UNIVERSITY ADVANCEMENT TACOMA, WA 98402	94-3079432	501(C)(3)	2,000				UW TACOMA URBAN STUDIES PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF WASHINGTON TACOMA UNIVERSITY ADVANCEMENT TACOMA, WA 98402	94-3079432	501(C)(3)	46,750				A6 TSELI IMPLEMENTATION COACH (1/16/19 - 6/30/19)
UNIVERSITY OF WASHINGTON TACOMA UNIVERSITY ADVANCEMENT TACOMA, WA 98402	94-3079432	501(C)(3)	2,000				ENVIRONMENTAL EDUCATION COI ACTIVITY 4.2.1: STEERING COMMITTEE - STIPEND FOR ELLEN MOORE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF WASHINGTON TACOMA 1900 COMMERCE ST BOX 358430 TACOMA, WA 98402	94-3079432	501(C)(3)	6,735				URBAN WATERS PROJECT SPECIAL EMPHASIS WHEN POSSIBLE
UNIVERSITY OF WASHINGTON TACOMA UNIVERSITY ADVANCEMENT TACOMA, WA 98402	94-3079432	501(C)(3)	2,500				TABLE AT JULY 20, 2019 SUMMER FUNDRAISER

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF WASHINGTON TACOMA UNIVERSITY ADVANCEMENT TACOMA, WA 98402	94-3079432	501(C)(3)	5,000				STORM COI ACTIVITY 3.6.3: STAFF SUPPORT FUNDS
UNIVERSITY OF WASHINGTON TACOMA UNIVERSITY ADVANCEMENT TACOMA, WA 98402	94-3079432	501(C)(3)	2,000				SCHOLARSHIP FOR NURSING PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF WASHINGTON TACOMA UNIVERSITY ADVANCEMENT TACOMA, WA 98402	94-3079432	501(C)(3)	30,000				CEN - CENTER FOR APPLIED URBAN RESEARCH: SUPPORT OF WOMEN'S ECONOMIC OPPORTUNITY
UNIVERSITY OF WASHINGTON TACOMA UNIVERSITY ADVANCEMENT TACOMA, WA 98402	94-3079432	501(C)(3)	30,000				CEN - CENTER FOR APPLIED URBAN RESEARCH: SUPPORT OF PIERCE COUNTY 2020 CENSUS EFFORTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF WASHINGTON TACOMA UNIVERSITY ADVANCEMENT TACOMA, WA 98402	94-3079432	501(C)(3)	2,500				STUDENT EMERGENCY AID
URBAN GRACE THE DOWNTOWN CHURCH 902 MARKET ST TACOMA, WA 98402	91-0577139	501(C)(3)	500				BUILDING MAINTENANCE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
URBAN GRACE THE DOWNTOWN CHURCH 902 MARKET ST TACOMA, WA 98402	91-0577139	501(C)(3)	15,000				GENERAL OPERATING SUPPORT
URBAN GRACE THE DOWNTOWN CHURCH 902 MARKET ST TACOMA, WA 98402	91-0577139	501(C)(3)	15,000				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VASHON HOUSEHOLD PO BOX 413 VASHON ISLAND, WA 98070	91-1517448	501(C)(3)	5,000				AREA OF GREATEST NEED
VASHON MAURY COMMUNITY FOOD BANK PO BOX 1205 VASHON ISLAND, WA 98070	94-3165664	501(C)(3)	5,000				AREA OF GREATEST NEED



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VASHON MAURY ISLAND LAND TRUST PO BOX 2031 VASHON ISLAND, WA 98070	94-3123021	501(C)(3)	15,000				GENERAL OPERATING SUPPORT
VASHON YOUTH AND FAMILY SERVICES PO BOX 237 VASHON ISLAND, WA 98070	91-1025994	501(C)(3)	5,000				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VINE MAPLE PLACE PO BOX 1092 MAPLE VALLEY, WA 98038	91-2082308	501(C)(3)	5,000				GENERAL OPERATING SUPPORT
VINE MAPLE PLACE PO BOX 1092 MAPLE VALLEY, WA 98038	91-2082308	501(C)(3)	7,500				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VINE MAPLE PLACE PO BOX 1092 MAPLE VALLEY, WA 98038	91-2082308	501(C)(3)	2,500				GIVE BIG - SUMMER CAMP
WASHINGTON FARM FORESTRY ASSOCIATION PO BOX 1010 CHEHALIS, WA 98532	91-6058341	501(C)(5)	7,290				FOREST COI ACTIVITY 3.2.2: HANDS-ON FOREST MANAGEMENT CLASSES AT RAPJOHN TREE FARM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WASHINGTON OUTDOOR SCHOOL PO BOX 327 ROSLYN, WA 98941	47-1791198	501(C)(3)	5,000				PATRON FUND
WASHINGTON STATE HISTORICAL SOCIETY 1911 PACIFIC AVE TACOMA, WA 98402	91-6000557	501(C)(3)	250				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WASHINGTON STATE HISTORICAL SOCIETY 1911 PACIFIC AVE TACOMA, WA 98402	91-6000557	501(C)(3)	500				FREE FIELD TRIPS TO THE MUSEUM FOR CHILDREN WHO OTHERWISE WOULD BE UNABLE TO VISIT
WASHINGTON STATE HISTORICAL SOCIETY 1911 PACIFIC AVE TACOMA, WA 98402	91-6000557	501(C)(3)	500				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WASHINGTON STATE HISTORICAL SOCIETY 1911 PACIFIC AVE TACOMA, WA 98402	91-6000557	501(C)(3)	10,000				SCHOOL TRANSPORTATION FUND
WASHINGTON STATE HISTORICAL SOCIETY 1911 PACIFIC AVE TACOMA, WA 98402	91-6000557	501(C)(3)	500				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WASHINGTON STATE UNIVERSITY OFFICE OF GRANT RESEARCH DEVELOPMEN PULLMAN, WA 99164	91-1075542	501(C)(3)	6,047				WSU EXTENSION FORESTRY - SMALL FORESTLAND OWNER EDUCATION PROGRAMMING
WASHINGTON STATE UNIVERSITY OFFICE OF GRANT RESEARCH DEVELOPMEN PULLMAN, WA 99164	91-1075542	501(C)(3)	30,500				WSU EXTENSION FORESTRY - SMALL FORESTLAND OWNER EDUCATION PROGRAMMING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WASHINGTON STATE UNIVERSITY OFFICE OF GRANT RESEARCH DEVELOPMEN PULLMAN, WA 99164	91-1075542	501(C)(3)	8,833				WSU EXTENSION FORESTRY - SMALL FORESTLAND OWNER EDUCATION PROGRAMMING
WHITE OAK FARM AND EDUCATION CENTER PO BOX 450 WILLIAMS, OR 97544	41-2078214	501(C)(3)	5,000				GENERAL OPERATING SUPPORT



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WHITE RIVER COMMUNITY OUTREACH PO BOX 7053 BONNEY LAKE, WA 98391	41-0721672	CHURCH	5,000				WHITE RIVER COMMUNITY OUTREACH: GENERAL OPERATING SUPPORT
WOMEN MAKE MOVIES 115 W 29TH ST STE 1200 NEW YORK, NY 10001	13-2740460	501(C)(3)	25,000				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WOMEN MAKE MOVIES 115 W 29TH ST STE 1200 NEW YORK, NY 10001	13-2740460	501(C)(3)	45,000				"LOST IN TRANSLATIONS"
WONGENERATION 14205 215TH AVE E BONNEY LAKE, WA 98321	27-1366252	501(C)(3)	5,000				PRAIRIE RIDGE COMMUNITY COALITION- PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WORLD VISION PO BOX 9716 FEDERAL WAY, WA 980639716	95-1922279	501(C)(3)	9,260				GENERAL OPERATING SUPPORT
WRITE253 2602 S 38TH ST TACOMA, WA 98409	81-3531110	501(C)(3)	7,500				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YMCA OF GREATER SEATTLE 2100 24TH AVE S SEATTLE, WA 98144	91-0482710	501(C)(3)	5,000				ARLINGTON DRIVE CAMPUS: MENTAL HEALTH SUPPORT DELIVERED THROUGH ACCELERATOR Y PROGRAM
YMCA OF GREATER SEATTLE 2100 24TH AVE S SEATTLE, WA 98144	91-0482710	501(C)(3)	10,000				ARLINGTON DRIVE CAMPUS: MENTAL HEALTH SUPPORT DELIVERED THROUGH ACCELERATOR Y PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE 201 TACOMA, WA 98405	91-0565562	501(C)(3)	600				PUYALLUP FRIENDS AND SERVANTS PROGRAM
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE 201 TACOMA, WA 98405	91-0565562	501(C)(3)	2,000				YMCA BROTHERHOOD AND SISTERHOOD IN TACOMA PUBLIC SCHOOLS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE 201 TACOMA, WA 98405	91-0565562	501(C)(3)	1,200				ANNUAL FUND
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE 201 TACOMA, WA 98405	91-0565562	501(C)(3)	800				DESERVING/NEEDY YMCA MEMBER BOYS TO ATTEND CAMP SEYMOUR

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE 201 TACOMA, WA 98405	91-0565562	501(C)(3)	2,251				TOM TAYLOR YMCA - GENERAL OPERATING SUPPORT
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE 201 TACOMA, WA 98405	91-0565562	501(C)(3)	2,400				CAMP SEYMOUR: TUITION ASSISTANCE FOR ENVIRONMENT CAMP PROGRAM FOR UNDERSERVED CHILDREN

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE 201 TACOMA, WA 98405	91-0565562	501(C)(3)	100				MAINTENANCE/UPKEEP OF CAMP SEYMOUR SUMMER CAMP
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE 201 TACOMA, WA 98405	91-0565562	501(C)(3)	6,930				ELO PROGRAMMING IN TPS: YMCA BROTHERHOOD AND SISTERHOOD



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE 201 TACOMA, WA 98405	91-0565562	501(C)(3)	50,000				MATCH FOR FRANKO PLEDGE: CAPITAL CAMPAIGN FOR MORGAN BRANCH REPLACEMENT
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE 201 TACOMA, WA 98405	91-0565562	501(C)(3)	5,000				ANNUAL CAMPAIGN: MORGAN BRANCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE 201 TACOMA, WA 98405	91-0565562	501(C)(3)	2,700				GENERAL OPERATING SUPPORT
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE 201 TACOMA, WA 98405	91-0565562	501(C)(3)	1,500				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE 201 TACOMA, WA 98405	91-0565562	501(C)(3)	1,300				GENERAL OPERATING SUPPORT
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE 201 TACOMA, WA 98405	91-0565562	501(C)(3)	3,000				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE 201 TACOMA, WA 98405	91-0565562	501(C)(3)	1,900				GENERAL OPERATING SUPPORT
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE 201 TACOMA, WA 98405	91-0565562	501(C)(3)	3,200				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE 201 TACOMA, WA 98405	91-0565562	501(C)(3)	600				GENERAL OPERATING SUPPORT
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE 201 TACOMA, WA 98405	91-0565562	501(C)(3)	1,200				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE 201 TACOMA, WA 98405	91-0565562	501(C)(3)	200				GENERAL OPERATING SUPPORT
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE 201 TACOMA, WA 98405	91-0565562	501(C)(3)	2,200				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE 201 TACOMA, WA 98405	91-0565562	501(C)(3)	500				GENERAL OPERATING SUPPORT
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE 201 TACOMA, WA 98405	91-0565562	501(C)(3)	1,400				SUPPORTING THE GENERAL OPERATIONS OF CAMP SEYMOUR

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE 201 TACOMA, WA 98405	91-0565562	501(C)(3)	1,500				GENERAL OPERATING SUPPORT
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE 201 TACOMA, WA 98405	91-0565562	501(C)(3)	200				GENERAL OPERATING SUPPORT



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE 201 TACOMA, WA 98405	91-0565562	501(C)(3)	2,600				GENERAL OPERATING SUPPORT
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE 201 TACOMA, WA 98405	91-0565562	501(C)(3)	11,400				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE 201 TACOMA, WA 98405	91-0565562	501(C)(3)	4,700				GENERAL OPERATING SUPPORT
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE 201 TACOMA, WA 98405	91-0565562	501(C)(3)	1,300				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE 201 TACOMA, WA 98405	91-0565562	501(C)(3)	2,000				2019 ANNUAL CAMPAIGN
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE 201 TACOMA, WA 98405	91-0565562	501(C)(3)	4,500				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE 201 TACOMA, WA 98405	91-0565562	501(C)(3)	1,200				GENERAL OPERATING SUPPORT
YOUTH SERVICES OF KITTITAS COUNTY PO BOX 523 ELLENSBURG, WA 98926	23-7113222	501(C)(3)	5,000				MENTOR PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YWCA PIERCE COUNTY 405 BROADWAY TACOMA, WA 98402	91-0565026	501(C)(3)	2,500				GENERAL OPERATING SUPPORT
YWCA PIERCE COUNTY 405 BROADWAY TACOMA, WA 98402	91-0565026	501(C)(3)	1,000				ELO PROVIDER PARTICIPATION: READY SET ART! IN TACOMA PUBLIC SCHOOLS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YWCA PIERCE COUNTY 405 BROADWAY TACOMA, WA 98402	91-0565026	501(C)(3)	1,200				GENERAL OPERATING SUPPORT
YWCA PIERCE COUNTY 405 BROADWAY TACOMA, WA 98402	91-0565026	501(C)(3)	1,000				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YWCA PIERCE COUNTY 405 BROADWAY TACOMA, WA 98402	91-0565026	501(C)(3)	6,200				GENERAL OPERATING SUPPORT
YWCA PIERCE COUNTY 405 BROADWAY TACOMA, WA 98402	91-0565026	501(C)(3)	8,400				ELO PROGRAMMING IN TPS: READY SET ART!

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YWCA PIERCE COUNTY 405 BROADWAY TACOMA, WA 98402	91-0565026	501(C)(3)	4,550				GENERAL OPERATING SUPPORT
YWCA PIERCE COUNTY 405 BROADWAY TACOMA, WA 98402	91-0565026	501(C)(3)	1,000				CAPITAL CAMPAIGN (PURCHASE OF FENCE HOUSE WITH THE INSCRIPTION "COMMUNITY")



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YWCA PIERCE COUNTY 405 BROADWAY TACOMA, WA 98402	91-0565026	501(C)(3)	3,600				GENERAL OPERATING SUPPORT
YWCA PIERCE COUNTY 405 BROADWAY TACOMA, WA 98402	91-0565026	501(C)(3)	4,700				TO PROVIDE "GRACIOUS SPACES" TRAINING TO OTHER ORGANIZATIONS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YWCA PIERCE COUNTY 405 BROADWAY TACOMA, WA 98402	91-0565026	501(C)(3)	2,000				GENERAL OPERATING SUPPORT
YWCA PIERCE COUNTY 405 BROADWAY TACOMA, WA 98402	91-0565026	501(C)(3)	5,000				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YWCA PIERCE COUNTY 405 BROADWAY TACOMA, WA 98402	91-0565026	501(C)(3)	450				CAPITAL SUPPORT
YWCA PIERCE COUNTY 405 BROADWAY TACOMA, WA 98402	91-0565026	501(C)(3)	1,000				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YWCA PIERCE COUNTY 405 BROADWAY TACOMA, WA 98402	91-0565026	501(C)(3)	2,500				GENERAL OPERATING SUPPORT
YWCA PIERCE COUNTY 405 BROADWAY TACOMA, WA 98402	91-0565026	501(C)(3)	10,000				GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YWCA PIERCE COUNTY 405 BROADWAY TACOMA, WA 98402	91-0565026	501(C)(3)	15,000				STAFF TRAINING THAT IS NOT OTHERWISE FUNDED

Schedule J (Form 990)	Compensation Information	OMB No. 1545-0047
		2019
		Open to Public Inspection
Department of the Treasury Internal Revenue Service	For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ▶ Attach to Form 990. ▶ Go to <a href="http://www.irs.gov/Form990">www.irs.gov/Form990</a> for instructions and the latest information.	
Name of the organization GREATER TACOMA COMMUNITY FOUNDATION		Employer identification number 91-1007459

Part I Questions Regarding Compensation		Yes	No
<b>1a</b> Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use		
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence		
<input type="checkbox"/> Tax idemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees		
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
<b>b</b> If any of the boxes on Line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain		1b	
<b>2</b> Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?		2	
<b>3</b> Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
<input checked="" type="checkbox"/> Compensation committee	<input checked="" type="checkbox"/> Written employment contract		
<input type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study		
<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee		
<b>4</b> During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
<b>a</b> Receive a severance payment or change-of-control payment?		4a	No
<b>b</b> Participate in, or receive payment from, a supplemental nonqualified retirement plan?		4b	No
<b>c</b> Participate in, or receive payment from, an equity-based compensation arrangement?		4c	No
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
<b>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</b>			
<b>5</b> For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
<b>a</b> The organization?		5a	No
<b>b</b> Any related organization?		5b	No
If "Yes," on line 5a or 5b, describe in Part III.			
<b>6</b> For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
<b>a</b> The organization?		6a	No
<b>b</b> Any related organization?		6b	No
If "Yes," on line 6a or 6b, describe in Part III.			
<b>7</b> For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.		7	Yes
<b>8</b> Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.		8	No
<b>9</b> If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?		9	

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

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

[illegible]

**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
PART I, LINE 7	REPRESENTS BONUS AT YEAR-END WHICH IS BASED ON REVIEW OF PERFORMANCE BY THE EXECUTIVE COMMITTEE



SCHEDULE M  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Noncash Contributions

►Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.  
► Attach to Form 990.  
►Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization  
GREATER TACOMA COMMUNITY FOUNDATION

Employer identification number  
91-1007459

Part I

Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art . . . .				
2 Art—Historical treasures . .				
3 Art—Fractional interests . .				
4 Books and publications . .				
5 Clothing and household goods . . . . .				
6 Cars and other vehicles . . .				
7 Boats and planes . . . . .				
8 Intellectual property . . . .				
9 Securities—Publicly traded .	X	21,977	1,482,712	MARKET VALUE
10 Securities—Closely held stock .				
11 Securities—Partnership, LLC, or trust interests . . . . .				
12 Securities—Miscellaneous . .				
13 Qualified conservation contribution—Historic structures . . . . .				
14 Qualified conservation contribution—Other . . . .				
15 Real estate—Residential . .				
16 Real estate—Commercial . .				
17 Real estate—Other . . . .				
18 Collectibles . . . . .				
19 Food inventory . . . . .				
20 Drugs and medical supplies .				
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . .				
24 Archeological artifacts . . . .				
25 Other ► ( )				
26 Other ► ( )				
27 Other ► ( )				
28 Other ► ( )				

29

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

29

30a

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

30a

Yes

No

b

If "Yes," describe the arrangement in Part II.

31

Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

31

Yes

32a

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

32a

No

b

If "Yes," describe in Part II.

33

If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

**Part II** **Supplemental Information.** 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
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**SCHEDULE O**  
(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

GREATER TACOMA COMMUNITY FOUNDATION

**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2019**

**Open to Public Inspection**

**Employer identification number**

91-1007459

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE AUDIT COMMITTEE THOROUGHLY REVIEWS THE FORM 990 AND RECOMMENDS IT TO THE BOARD OF DIRECTORS FOR ACCEPTANCE. BEFORE VOTING TO ACCEPT THE FORM 990 AND FILING WITH THE IRS, ALL BOARD MEMBERS ARE PROVIDED WITH AN ELECTRONIC COPY OF THE FORM 990.

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
FORM 990, PART VI, SECTION B, LINE 12C	<p>EACH YEAR THE CONFLICT OF INTEREST POLICY IS DISTRIBUTED IN WRITING TO ALL STAFF AND VOLUNTEERS. THE POLICY STATES THE PURPOSE OF THE POLICY, WHO IS COVERED, AND THE DUTIES OF A COVERED PERSON; EXPLAINS WHEN A CONFLICT OF INTEREST DOES OR DOES NOT EXIST; DESCRIBES THE DISCLOSURE/EVALUATION PROCESS AND PROCEDURES FOR ACTING ON CONFLICT OF INTEREST TRANSACTIONS. EACH YEAR ALL STAFF MEMBERS AND VOLUNTEERS ARE REQUIRED TO FILL OUT AN ACKNOWLEDGMENT STATEMENT WHERE THEY DESCRIBE ANY AND ALL CONNECTIONS, RELATIONSHIPS OR SITUATIONS WHICH MAY BE A CONFLICT OF INTEREST WITH THE COMMUNITY FOUNDATION. BY SIGNING THE ACKNOWLEDGMENT FORM, THEY INDICATE THAT THEY HAVE CAREFULLY READ THE CONFLICT OF INTEREST POLICY AND THEIR RESPONSES ARE COMPLETE, TRUE AND ACCURATE. AT COMMITTEE AND BOARD MEETINGS THROUGHOUT THE YEAR, STAFF AND VOLUNTEERS WHO HAVE A CONFLICT OF INTEREST WITH A MATTER THAT IS BEFORE THE COMMITTEE OR BOARD VERBALLY DISCLOSE THE CONFLICT AND ABSTAIN FROM DISCUSSION AND VOTING. THE ABSTENTION IS DOCUMENTED IN THE MEETING MINUTES.</p>

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15A	<p>DURING THE FIRST QUARTER OF THE YEAR, THE EXECUTIVE COMMITTEE REVIEWS THE PRESIDENT/CEO GOALS FOR THE YEAR. IN THE FOURTH QUARTER OF THE YEAR, BOARD MEMBERS COMPLETE AN EVALUATION OF THE PRESIDENT/CEO'S PERFORMANCE AND THE PRESIDENT/CEO COMPLETES A SELF ASSESSMENT. THE EXECUTIVE COMMITTEE REVIEWS THE RESULTS OF THE PERFORMANCE EVALUATION AND THE PRESIDENT/CEO'S SELF ASSESSMENT. THE EXECUTIVE COMMITTEE REVIEWS COMPARABLE SALARY DATA AND DETERMINES THE PRESIDENT/CEO'S SALARY AND BENEFITS FOR THE UPCOMING YEAR. THE EXECUTIVE COMMITTEE VOTES ON THE RECOMMENDED ACTION AND DOCUMENTS THE PROCESS, THE NAMES OF MEMBERS PRESENT, AS WELL AS ANY STATED CONFLICTS OF INTEREST AND ABSTENTIONS IN ITS MEETING MINUTES. IN EXECUTIVE SESSION AT THE DECEMBER BOARD MEETING, THE EXECUTIVE COMMITTEE REPORTS ON THE RESULTS OF THE PERFORMANCE EVALUATION, THE PRESIDENT/CEO'S SELF-ASSESSMENT AND THE PRESIDENT/CEO'S COMPENSATION FOR THE UPCOMING YEAR.</p>

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 18	THE COMMUNITY FOUNDATION MAKES ITS FORMS 1023 AND 990 AVAILABLE UPON REQUEST TO THE GENERAL PUBLIC.

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE COMMUNITY FOUNDATION MAKES ITS FINANCIAL STATEMENTS AVAILABLE ON ITS WEBSITE AND MAKES ITS GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY AVAILABLE UPON REQUEST.

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
FORM 990, PART XI, LINE 9:	CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS 100,924.



## 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XII, LINE 2C:	THE COMMUNITY FOUNDATION'S AUDIT COMMITTEE IS RESPONSIBLE FOR THE DETAILED REVIEW OF THE AUDITED CONSOLIDATED FINANCIAL STATEMENTS. THE BOARD OF DIRECTORS VOTES TO ACCEPT THE AUDITED FINANCIAL STATEMENTS BASED ON THE RECOMMENDATION OF THE AUDIT COMMITTEE. THE AUDIT COMMITTEE IS RESPONSIBLE FOR THE PROCESS OF SELECTING THE INDEPENDENT AUDITOR. THE BOARD OF DIRECTORS VOTES TO APPROVE THE SELECTION OF THE INDEPENDENT AUDITOR BASED ON THE RECOMMENDATION OF THE AUDIT COMMITTEE.

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 1:	TOTAL REVENUE IS GTCF-ONLY, NOT CONSOLIDATED REVENUE. THE AMOUNT ON LINE 1 CAN BE FOUND IN THE SUPPLEMENTAL SCHEDULES OF THE AUDITED FINANCIAL STATEMENTS.

SCHEDULE R  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.  
► Attach to Form 990.  
► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization  
GREATER TACOMA COMMUNITY FOUNDATION

Employer identification number  
91-1007459

Part I

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

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

Part II

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1)THE FRIENDS OF LAKEWOLD PO BOX 39780  LAKEWOOD, WA 98439 94-3041320	PRESERVE LAKEWOLD GARDENS AS AN INSPIRATIONAL AND EDUCATIONAL EXPERIENCE.	WA	501(C)(3)	509(A)(2)	GREATER TACOMA COMMUNITY FOUNDATION	Yes	
(2)GEORGE WEYERHAEUSER PACIFIC RIM BONSAI COLLECTION 2515 S 336TH ST  FEDERAL WAY, WA 98003 61-1727426	PRESERVE GEORGE WEYERHAEUSER PACIFIC RIM BONSAI COLLECTION	WA	501(C)(3)	509(A)(3) - TYPE 1	GREATER TACOMA COMMUNITY FOUNDATION	Yes	
(3)THE ASSET STEWARDSHIP FOUNDATION 950 PACIFIC AVENUE SUITE 110  TACOMA, WA 98402 26-1088224	SUPPORT THE PURPOSES OF GTCF THROUGH RECEIPT AND HOLDING OF GIFTS	WA	501(C)(3)	509(A)(3) - TYPE 1	GREATER TACOMA COMMUNITY FOUNDATION	Yes	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

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

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

**Part V Transactions With Related Organizations.** 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.**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
<b>a</b> Receipt of <b>(i)</b> interest, <b>(ii)</b> annuities, <b>(iii)</b> royalties, or <b>(iv)</b> rent from a controlled entity . . . . .	<b>1a</b>	No
<b>b</b> Gift, grant, or capital contribution to related organization(s) . . . . .	<b>1b</b> Yes	
<b>c</b> Gift, grant, or capital contribution from related organization(s) . . . . .	<b>1c</b> Yes	
<b>d</b> Loans or loan guarantees to or for related organization(s) . . . . .	<b>1d</b>	No
<b>e</b> Loans or loan guarantees by related organization(s) . . . . .	<b>1e</b>	No
<b>f</b> Dividends from related organization(s) . . . . .	<b>1f</b>	No
<b>g</b> Sale of assets to related organization(s) . . . . .	<b>1g</b>	No
<b>h</b> Purchase of assets from related organization(s) . . . . .	<b>1h</b>	No
<b>i</b> Exchange of assets with related organization(s) . . . . .	<b>1i</b>	No
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) . . . . .	<b>1j</b>	No
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) . . . . .	<b>1k</b>	No
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) . . . . .	<b>1l</b>	No
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) . . . . .	<b>1m</b>	No
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) . . . . .	<b>1n</b>	No
<b>o</b> Sharing of paid employees with related organization(s) . . . . .	<b>1o</b>	No
<b>p</b> Reimbursement paid to related organization(s) for expenses . . . . .	<b>1p</b>	No
<b>q</b> Reimbursement paid by related organization(s) for expenses . . . . .	<b>1q</b>	No
<b>r</b> Other transfer of cash or property to related organization(s) . . . . .	<b>1r</b>	No
<b>s</b> Other transfer of cash or property from related organization(s) . . . . .	<b>1s</b>	No

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) THE FRIENDS OF LAKEWOLD	B	285,495	COST
(2) GEORGE WEYERHAEUSER PACIFIC RIM BONSAI COLLECTION	B	531,500	COST
(3) ASSET STEWARDSHIP FOUNDATION	C	1,465,052	COST

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

[illegible]

**Part VII**   **Supplemental Information**

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

Return Reference	Explanation