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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public.

▶ **Go to *www.irs.gov/Form990* for instructions and the latest information.**

OMB No. 1545-0047

2019

Open to Public Inspection

A For the 2019 calendar year, or tax year beginning 07-01-2019 , and ending 06-30-2020

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

C Name of organization
UNITED WAY OF KING COUNTY

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) | Room/suite
720 SECOND AVENUE

City or town, state or province, country, and ZIP or foreign postal code
SEATTLE, WA 98104

D Employer identification number
91-0565555

E Telephone number
(206) 461-3700

G Gross receipts $ 106,483,816

F Name and address of principal officer:
GORDON A MCHENRY JR
720 SECOND AVENUE
SEATTLE, WA 98104

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.UWKC.ORG

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

L Year of formation: 1921

M State of legal domicile: WA

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
UNITED WAY OF KING COUNTY AND OUR DONORS ARE BUILDING A COMMUNITY WHERE PEOPLE HAVE HOMES, STUDENTS GRADUATE AND FAMILIES ARE FINACIALLY STABLE. OUR MISSION IS TO BRING CARING PEOPLE TOGETHER TO GIVE, VOLUNTEER AND TAKE ACTION TO HELP PEOPLE IN NEED AND SOLVE OUR COMMUNITY'S TOUGHEST CHALLENGES.

Activities & Governance

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	37
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	37
5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	221
6	Total number of volunteers (estimate if necessary)	6	17,790
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 39	7b	0

Revenue

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	61,463,331	79,997,758
9	Program service revenue (Part VIII, line 2g)	190,587	283,079
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,268,511	564,107
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	54,600	-146,766
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	62,977,029	80,698,178

Expenses

13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	44,369,937	46,855,851
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)	11,093,872	11,744,693
16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b	Total fundraising expenses (Part IX, column (D), line 25) ▶6,437,251		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	5,551,536	7,599,912
18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	61,015,345	66,200,456
19	Revenue less expenses. Subtract line 18 from line 12	1,961,684	14,497,722

Net Assets or Fund Balances

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	63,562,823	79,452,151
21	Total liabilities (Part X, line 26)	12,634,444	13,729,771
22	Net assets or fund balances. Subtract line 21 from line 20	50,928,379	65,722,380

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

****** 2021-05-15
Signature of officer Date

GORDON A MCHENRY JR CHIEF EXECUTIVE OFFICER
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
		2021-05-15		P00746598

Firm's name ▶ CLARK NUBER PS — Firm's EIN ▶ 91-1194016

Firm's address ▶ 10900 NE 4TH STREET SUITE 1400
BELLEVUE, WA 98004 — Phone no. (425) 454-4919

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

UNITED WAY OF KING COUNTY BRINGS CARING PEOPLE TOGETHER TO GIVE, VOLUNTEER AND TAKE ACTION TO HELP PEOPLE IN NEED AND SOLVE OUR COMMUNITY'S TOUGHEST CHALLENGES. WE BRING TOGETHER PEOPLE AND ORGANIZATIONS WITH THE PASSION, EXPERTISE AND RESOURCES TO GET THINGS DONE. WE TAKE ON CHALLENGES LIKE MEETING BASIC NEEDS, ENDING HOMELESSNESS, AND GIVING EVERY CHILD AN EQUAL CHANCE TO SUCCEED. WE INVEST IN SOLUTIONS AND ACHIEVE RESULTS.

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 $ 10,170,991 including grants of $ 4,470,736) (Revenue $)
See Additional Data

4b (Code:) (Expenses $ 9,411,179 including grants of $ 8,503,026) (Revenue $)
See Additional Data

4c (Code:) (Expenses $ 8,515,667 including grants of $ 7,725,009) (Revenue $)
See Additional Data

See Additional Data Table

4d Other program services (Describe in Schedule O.)
(Expenses $ 27,486,272 including grants of $ 26,157,081) (Revenue $ 283,079)

4e **Total program service expenses ▶** 55,584,109

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules *(continued)*

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	85		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		Yes	

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

2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	**2a**	221		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			**2b**	Yes
3a	Did the organization have unrelated business gross income of $1,000 or more during the year? . . .			**3a**	No
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O* . . .			**3b**	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . .			**4a**	No
b	If "Yes," enter the name of the foreign country: ▶ _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . .			**5a**	No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			**5b**	No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			**5c**	
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? . . .			**6a**	No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			**6b**	
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			**7a**	Yes
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			**7b**	Yes
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			**7c**	No
d	If "Yes," indicate the number of Forms 8282 filed during the year	**7d**			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			**7e**	No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . .			**7f**	No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			**7g**	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			**7h**	
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			**8**	
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the sponsoring organization make any taxable distributions under section 4966?			**9a**	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . .			**9b**	
10	**Section 501(c)(7) organizations.** Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12 . . .	**10a**			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	**10b**			
11	**Section 501(c)(12) organizations.** Enter:				
a	Gross income from members or shareholders	**11a**			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	**11b**			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			**12a**	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	**12b**			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state? . . . . . **Note.** See the instructions for additional information the organization must report on Schedule O.			**13a**	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	**13b**			
c	Enter the amount of reserves on hand	**13c**			
14a	Did the organization receive any payments for indoor tanning services during the tax year?			**14a**	No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O* . .			**14b**	
15	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 4720, Schedule N.			**15**	No
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? . . If "Yes," complete Form 4720, Schedule O.			**16**	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
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	37		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.				
b	Enter the number of voting members included in line 1a, above, who are independent	1b	37		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		No
6	Did the organization have members or stockholders?		6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?		8a	Yes	
b	Each committee with authority to act on behalf of the governing body?		8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*		9		No

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

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

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:
▶JENNIFER JOHNSTON 720 SECOND AVENUE SEATTLE, WA 98104 (206) 461-3700

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			
See Additional Data Table										

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			
See Additional Data Table										
1b Sub-Total ▶										
c Total from continuation sheets to Part VII, Section A ▶										
d Total (add lines 1b and 1c) ▶								1,271,181	0	136,065

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 ▶ 10

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
PYRAMID COMMUNICATIONS INC 1932 FIRST AVE SUITE 507 SEATTLE, WA 98101	CONSULTING	1,777,762
NETWORK TECHNOLOGY SERVICES INC 12819 SE 38TH ST 368 BELLEVUE, WA 98006	TECHNOLOGY	284,220

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 ▶ 2

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts					
1a Federated campaigns	1a				
b Membership dues	1b				
c Fundraising events	1c	355,242			
d Related organizations	1d				
e Government grants (contributions)	1e	10,693,491			
f All other contributions, gifts, grants, and similar amounts not included above	1f	68,949,025			
g Noncash contributions included in lines 1a - 1f: $	1g	6,618,010			
h **Total.** Add lines 1a-1f		79,997,758			
Program Service Revenue	Business Code				
2a DESIGNATION PROCESSING	900099	197,458	197,458		
b EDUCATION & OUTREACH	900099	45,341	45,341		
c TRAINING	900099	40,280	40,280		
d					
e					
f All other program service revenue.					
g **Total.** Add lines 2a–2f		283,079			
3 Investment income (including dividends, interest, and other similar amounts)		245,806			245,806
4 Income from investment of tax-exempt bond proceeds					
5 Royalties					
	(i) Real	(ii) Personal			
6a Gross rents	6a				
b Less: rental expenses	6b				
c Rental income or (loss)	6c				
d Net rental income or (loss)					
	(i) Securities	(ii) Other			
7a Gross amount from sales of assets other than inventory	7a	25,925,938			
b Less: cost or other basis and sales expenses	7b	25,606,729	908		
c Gain or (loss)	7c	319,209	-908		
d Net gain or (loss)		318,301			318,301
Other Revenue 8a Gross income from fundraising events (not including $ 355,242 of contributions reported on line 1c). See Part IV, line 18	8a	26,491			
b Less: direct expenses	8b	178,001			
c Net income or (loss) from fundraising events		-151,510			-151,510
9a Gross income from gaming activities. See Part IV, line 19	9a				
b Less: direct expenses	9b				
c Net income or (loss) from gaming activities					
10a Gross sales of inventory, less returns and allowances	10a				
b Less: cost of goods sold	10b				
c Net income or (loss) from sales of inventory					
Miscellaneous Revenue	Business Code				
11a					
b					
c					
d All other revenue		4,744			4,744
e **Total.** Add lines 11a–11d		4,744			
12 **Total revenue.** See instructions		80,698,178	283,079	0	417,341

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 . . . . . ☑

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	46,855,851	46,855,851		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	653,987	245,361	138,900	269,726
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	9,043,403	3,392,889	1,920,720	3,729,794
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	165,239	61,994	35,095	68,150
9 Other employee benefits	1,192,383	447,357	253,249	491,777
10 Payroll taxes	689,681	258,753	146,481	284,447
11 Fees for services (non-employees):				
a Management				
b Legal	3,491		3,338	153
c Accounting	66,744	9,692	46,089	10,963
d Lobbying	21,870	19,814	1,312	744
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	29,775		29,775	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	2,164,068	1,883,584	169,530	110,954
12 Advertising and promotion	282,633	118,619	56,359	107,655
13 Office expenses	164,349	92,247	20,864	51,238
14 Information technology	309,388	154,371	36,762	118,255
15 Royalties				
16 Occupancy	224,300	53,563	121,279	49,458
17 Travel	224,774	161,713	24,870	38,191
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	24,602	23,332		1,270
20 Interest	1,606	348	691	567
21 Payments to affiliates	555,000	99,900	371,850	83,250
22 Depreciation, depletion, and amortization	1,561,540	559,643	485,756	516,141
23 Insurance	53,105	12,681	28,714	11,710
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a SUPPLIES	690,436	594,851	41,453	54,132
b EQUIPMENT RENTAL & MAIN	312,159	146,914	47,207	118,038
c SPECIAL EVENTS	233,163	170,199	62,964	
d UBI TAXES	35,100	5,932	22,710	6,458
e All other expenses	641,809	214,501	113,128	314,180
25 **Total functional expenses.** Add lines 1 through 24e	66,200,456	55,584,109	4,179,096	6,437,251
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720).				

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
Assets	1	Cash–non-interest-bearing		2,167,344	1	7,150,011
	2	Savings and temporary cash investments		2,141,604	2	10,989,087
	3	Pledges and grants receivable, net		33,278,743	3	34,489,827
	4	Accounts receivable, net		109,009	4	200,510
	5	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			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use		24,535	8	2,000
	9	Prepaid expenses and deferred charges		200,276	9	170,457
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 19,325,740			
	b	Less: accumulated depreciation	10b 11,723,971	8,748,587	10c	7,601,769
	11	Investments—publicly traded securities		4,548,973	11	6,378,646
	12	Investments—other securities. See Part IV, line 11		12,320,718	12	12,456,046
	13	Investments—program-related. See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11		23,034	15	13,798
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		63,562,823	16	79,452,151
Liabilities	17	Accounts payable and accrued expenses		4,354,385	17	5,741,556
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		8,241,008	21	6,132,184
	22	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			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties		0	24	1,826,037
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D		39,051	25	29,994
	26	**Total liabilities.** Add lines 17 through 25		12,634,444	26	13,729,771
Net Assets or Fund Balances		**Organizations that follow FASB ASC 958, check here ▶ ☑ and complete lines 27, 28, 32, and 33.**				
	27	Net assets without donor restrictions		21,689,971	27	24,240,550
	28	Net assets with donor restrictions		29,238,408	28	41,481,830
		Organizations that do not follow FASB ASC 958, check here ▶ ☐ and complete lines 29 through 33.				
	29	Capital stock or trust principal, or current funds			29	
	30	Paid-in or capital surplus, or land, building or equipment fund			30	
	31	Retained earnings, endowment, accumulated income, or other funds			31	
	32	Total net assets or fund balances		50,928,379	32	65,722,380
	33	Total liabilities and net assets/fund balances		63,562,823	33	79,452,151

Part XI Reconcilliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	80,698,178
2	Total expenses (must equal Part IX, column (A), line 25)	2	66,200,456
3	Revenue less expenses. Subtract line 2 from line 1	3	14,497,722
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	50,928,379
5	Net unrealized gains (losses) on investments	5	296,279
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	65,722,380

Part XII Financial Statements and Reporting

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

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

Additional Data

Software ID:

Software Version:

EIN: 91-0565555

Name: UNITED WAY OF KING COUNTY

Form 990 (2019)

Form 990, Part III, Line 4a:

FINANCIAL STABILITY - MORE THAN 11,125 FREE TAX RETURNS FILED FOR LOW-INCOME EARNERS, BRINGING $20 MILLION IN FEDERAL REFUNDS BACK INTO OUR COMMUNITY. 30,000 DAILY FREE SUMMER MEALS SERVED TO LOW-INCOME YOUTH AND STUDENTS AND 14,000 CHILDREN ACCESSED SCHOOL BREAKFAST THROUGH IMPLEMENTING BREAKFAST AFTER THE BELL.

Form 990, Part III, Line 4b:

ENDING HOMELESSNESS - HOMELESSNESS IS A CRISIS IN OUR COMMUNITY, WITH MORE THAN 12,000 PEOPLE ON ANY GIVEN NIGHT LIVING ON THE STREETS, IN THEIR CARS OR IN EMERGENCY SHELTERS. WITH OUR DONORS, UNITED WAY OF KING COUNTY FOCUSES ON INCOME AND HOUSING TO MAKE THE MOST IMPACT ON OUR COUNTY-WIDE CRISIS. WE BELIEVE THAT EVERY PERSON DESERVES A SAFE PLACE TO CALL HOME. OUR ACHIEVEMENTS HOME BASE PROGRAM HELPED 5,000 PEOPLE FACING EVICTION MAINTAIN STABLE HOUSING AND 3,100 KING COUNTY HOUSEHOLDS (9,000 PEOPLE) RECEIVED RENTAL ASSISTANCE IN RESPONSE TO THE COVID-19 PANDEMIC.

Form 990, Part III, Line 4c:

EARLY LEARNING ACHIEVEMENTS - HELPING STUDENTS GRADUATE ACHIEVEMENTS - 1,200 FAMILIES PARTICIPATED IN THE PARENT-CHILD HOME PROGRAM, A TWO-YEAR HOME VISITING PROGRAM THAT HELPS LOW INCOME CHILDREN AGES 2-4 BE READY TO LEARN WHEN THEY ENTER KINDERGARTEN AND BECOME 30 PERCENTAGE POINTS MORE LIKELY TO GRADUATE HIGH SCHOOL.

Form 990, Part III **- 4 Program Service Accomplishments (See the Instructions)**

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

(Code:) (Expenses $ 4,250,892 including grants of $ 3,412,326) (Revenue $ 85,621)

SUPPORTING YOUTH ACHIEVEMENTS - OTHER PROGRAMS INCLUDE BRIDGE TO FINISH HELPING COMMUNITY COLLEGE STUDENTS PERSIST TO GRADUATION 16,000 INTERVENTIONS WERE PROVIDED TO STUDENTS. INTERVENTIONS INCLUDE EMERGENCY NEEDS GRANTS, FINANCIAL COUNSELING, ACCESS TO FOOD AND MORE.

(Code:) (Expenses $ 7,226,584 including grants of $ 6,735,959) (Revenue $)

COVID-19 RESPONSE - AS A RESULT OF THE COVID-19 PANDEMIC, THE ORGANIZATION RECEIVED SIGNIFICANT GOVERNMENT FUNDING TO ACCELERATE AID IN THE RELIEF EFFORTS THUS FAR FUNDED BY PRIVATE DONATIONS. WHILE THE ORGANIZATION CONTINUED TO FUND AND OPERATE ITS CORE PROGRAMS DESIGNED TO BUILD A COMMUNITY WHERE PEOPLE HAVE HOMES, STUDENTS GRADUATE AND FAMILIES ARE FINANCIALLY STABLE, IT ALSO RAPIDLY BROUGHT NEW STRATEGIES TO MEET GROWING COMMUNITY NEEDS. AS A RESULT, THE ORGANIZATION HAS BEEN ABLE TO PROVIDE SIGNIFICANT ADDITIONAL RESOURCES FOR RENTAL AND FOOD ASSISTANCE PARTICULARLY FOR COMMUNITIES OF COLOR WHO, BECAUSE OF HISTORICAL INEQUITIES, ARE OVER-REPRESENTED IN POVERTY AND HOMELESSNESS.

Form 990, Part III **- 4 Program Service Accomplishments (See the Instructions)**

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

(Code:) (Expenses $ 16,008,796 including grants of $ 16,008,796) (Revenue $ 197,458)

DONOR DESIGNATIONS - CONTRIBUTIONS THAT ARE DESIGNATED TO NONPROFIT ORGANIZATIONS OTHER THAN UNITED WAY OF KING COUNTY.

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JONATHAN FINE PRESIDENT & CEO THRU 01/20	40.00			X				330,974	0	15,082
DARRELL POWELL COO	40.00			X				171,123	0	20,025
ERICA WILEY VP DEVELOPMENT	40.00					X		148,576	0	18,593
JIM YEARBY VP HUMAN RESOURCES	40.00					X		139,940	0	26,582
CHRIS HYNES VP BRAND MANAGEMENT	40.00					X		153,354	0	11,104
SARA LEVIN VP COMMUNITY SERVICES	40.00					X		144,288	0	18,589
JENNIFER JOHNSTON SR DIR. FINANCIAL OPS	40.00					X		122,609	0	13,399
GORDON MCHENRY JR PRESIDENT & CEO FROM 09/19	40.00			X				60,317	0	12,691
AMBIKA SINGH DIRECTOR	1.00	X						0	0	0
ANGELA STOWELL DIRECTOR	1.00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
BLAIR TAYLOR DIRECTOR	1.00	X						0	0	0
BRADY WALKINSHAW DIRECTOR	1.00	X						0	0	0
BREE KAME'ENUI DIRECTOR	1.00	X						0	0	0
BRIAN MCANDREWS DIRECTOR	1.00	X						0	0	0
CARMEN BEST DIRECTOR	1.00	X						0	0	0
CHRIS CAPOSSELA DIRECTOR	1.00	X						0	0	0
CRAIG GRYNIEWICZ DIRECTOR	1.00	X						0	0	0
DOUG ORWILER DIRECTOR	1.00	X						0	0	0
JASON COREN DIRECTOR	1.00	X						0	0	0
JEFF BRADLEY DIRECTOR	1.00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JONATHAN BURKS DIRECTOR	1.00	X						0	0	0
JONATHAN SPOSATO DIRECTOR	1.00	X						0	0	0
KAREN MARCOTTE SOLIMANO DIRECTOR	1.00	X						0	0	0
KATE BEHNCKEN DIRECTOR	1.00	X						0	0	0
KATHY SURACE SMITH DIRECTOR	1.00	X						0	0	0
LEIGH TONER DIRECTOR	1.00	X						0	0	0
LUIS MASIERI DIRECTOR	1.00	X						0	0	0
MALA RAMAN DIRECTOR	1.00	X						0	0	0
MARGARET MEISTER DIRECTOR	1.00	X						0	0	0
MIKA YAMAMOTO DIRECTOR	1.00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
NATHAN JAMES DIRECTOR	1.00	X						0	0	0
NICOLE GRANT DIRECTOR	1.00	X						0	0	0
NOREEN SHAHANI DIRECTOR	1.00	X						0	0	0
PETER ORSER DIRECTOR	1.00	X						0	0	0
RICHARD ROMERO DIRECTOR	1.00	X						0	0	0
SANDRA MADRID DIRECTOR	1.00	X						0	0	0
SANGITA WOERNER DIRECTOR	1.00	X						0	0	0
SCOTT MEDEN DIRECTOR	1.00	X						0	0	0
SHOUAN PAN DIRECTOR	1.00	X						0	0	0
STEPHAN BLANFORD DIRECTOR	1.00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
SUE SHERBROOKE DIRECTOR	1.00	X						0	0	0
CAROL NELSON BOARD CHAIR	1.00	X		X				0	0	0
DAVE BURMAN CHAIR ELECT/SECRETARY	1.00	X		X				0	0	0
FRED RIVERA PAST CHAIR	1.00	X		X				0	0	0
BRENT BEARDALL TREASURER	1.00	X		X				0	0	0

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SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

▶ **Attach to Form 990 or Form 990-EZ.**

▶ **Go to *www.irs.gov/Form990* for instructions and the latest information.**

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
UNITED WAY OF KING COUNTY

Employer identification number
91-0565555

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 331/3% 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 331/3% 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? Yes	(iv) No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
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.") . .	77,119,973	59,989,263	70,136,178	61,463,331	79,997,758	348,706,503
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge..						
4 **Total.** Add lines 1 through 3	77,119,973	59,989,263	70,136,178	61,463,331	79,997,758	348,706,503
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). .						84,137,726
6 **Public support.** Subtract line 5 from line 4.						264,568,777

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. .	77,119,973	59,989,263	70,136,178	61,463,331	79,997,758	348,706,503
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . .	513,100	538,412	719,424	310,169	245,806	2,326,911
9 Net income from unrelated business activities, whether or not the business is regularly carried on . .	191,293	400,314		47,303		638,910
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). .			52,954	7,297	4,744	64,995
11 **Total support.** Add lines 7 through 10						351,737,319

12 Gross receipts from related activities, etc. (see instructions)	12	1,143,164

13 **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

14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))	14	75.220 %
15 Public support percentage for 2018 Schedule A, Part II, line 14	15	80.790 %

16a **33 1/3% support test—2019.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶ ☑

b **33 1/3% support test—2018.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶ ☐

17a **10%-facts-and-circumstances test—2019.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ▶ ☐

b **10%-facts-and-circumstances test—2018.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ▶ ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . . ▶ ☐

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

Section B. Total Support

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

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

Section C. Computation of Public Support Percentage

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

Section D. Computation of Investment Income Percentage

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

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
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? *If "No," describe in* ***Part VI*** *how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.*	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? *If "Yes," explain in* ***Part VI*** *how the organization determined that the supported organization was described in section 509(a)(1) or (2).*	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer (b) and (c) below.*	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in* ***Part VI*** *when and how the organization made the determination.*	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in* ***Part VI*** *what controls the organization put in place to ensure such use.*	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.*	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If "Yes," describe in* ***Part VI*** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*	4b		
c	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)? *If "Yes," explain in* ***Part VI*** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in* ***Part VI,*** *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).*	5a		
b	**Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* ***Part VI.***	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) .*	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in* ***Part VI.***	9a		
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? *If "Yes," provide detail in* ***Part VI.***	9b		
c	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? *If "Yes," provide detail in* ***Part VI.***	9c		
10a	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)? *If "Yes," answer line 10b below.*	10a		
b	Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).*	10b		

Part IV Supporting Organizations (continued)

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? *If "Yes" to a, b, or c, provide detail in* ***Part VI****.*	11c		

Section B. Type I Supporting Organizations

			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? *If "No," describe in* ***Part VI*** *how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.*	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in* ***Part VI*** *how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.*	2		

Section C. Type II Supporting Organizations

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in* ***Part VI*** *how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).*	1		

Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? *If "No," explain in* ***Part VI*** *how the organization maintained a close and continuous working relationship with the supported organization(s).*	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in* ***Part VI*** *the role the organization's supported organizations played in this regard.*	3		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year **(see instructions)**:

- **a** ☐ The organization satisfied the Activities Test. Complete **line 2** below.
- **b** ☐ The organization is the parent of each of its supported organizations. Complete **line 3** below.
- **c** ☐ The organization supported a governmental entity. Describe in **Part VI** how you supported a government entity (see instructions)

2 Activities Test. **Answer (a) and (b) below.**

			Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in* ***Part VI 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.*	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in* ***Part VI*** *the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*	2b		

3 Parent of Supported Organizations. **Answer (a) and (b) below.**

a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in* ***Part VI.***	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? *If "Yes," describe in* ***Part VI.*** *the role played by the organization in this regard.*	3b		

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

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	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)	6		
7	Other expenses (see instructions)	7		
8	**Adjusted Net Income** (subtract lines 5, 6 and 7 from line 4)	8		

	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1		
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	**Total** (add lines 1a, 1b, and 1c)	1d		
e	**Discount** claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	**Minimum Asset Amount** (add line 7 to line 6)	8		

	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	**Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		

7 ☐ 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.			

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

990 Schedule A, Supplemental Information

Return Reference	Explanation
SCHEDULE A, PART II, LINE 10, EXPLANATION OF OTHER INCOME:	OTHER INCOME - 2017 AMOUNT: $ 52,954. 2018 AMOUNT: $ 7,297. 2019 AMOUNT: $ 4,744.

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SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

▶**Complete if the organization is described below.** ▶**Attach to Form 990 or Form 990-EZ.**
▶**Go to *www.irs.gov/Form990* for instructions and the latest information.**

OMB No. 1545-0047

2019

Open to Public Inspection

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

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

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

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

If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

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

Name of the organization	Employer identification number
UNITED WAY OF KING COUNTY	91-0565555

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

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities")

2 Political campaign activity expenditures (see instructions) ▶ $

3 Volunteer hours for political campaign activities (see instructions)

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

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ $

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ $

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV.

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

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ $

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ $

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ $

4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
1					
2					
3					
4					
5					
6					

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

A Check ▶ ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check ▶ ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	**(a)** Filing organization's totals	**(b)** Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		
b Total lobbying expenditures to influence a legislative body (direct lobbying)	60,442	
c Total lobbying expenditures (add lines 1a and 1b)	60,442	
d Other exempt purpose expenditures	66,318,015	
e Total exempt purpose expenditures (add lines 1c and 1d)	66,378,457	
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,000,000	

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over $500,000	20% of the amount on line 1e.
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000.
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000.
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000.
Over $17,000,000	$1,000,000.

g Grassroots nontaxable amount (enter 25% of line 1f)	250,000	
h Subtract line 1g from line 1a. If zero or less, enter -0-.	0	
i Subtract line 1f from line 1c. If zero or less, enter -0-.	0	

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ **Yes** ☐ **No**

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	**(a)** 2016	**(b)** 2017	**(c)** 2018	**(d)** 2019	**(e)** Total
2a Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
c Total lobbying expenditures	45,850	41,621	54,356	60,442	202,269
d Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f Grassroots lobbying expenditures					

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

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

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

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

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

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

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference	Explanation	

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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 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
UNITED WAY OF KING COUNTY

Employer identification number
91-0565555

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		

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

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
c	Beginning balance	1c
d	Additions during the year	1d
e	Distributions during the year	1e
f	Ending balance	1f

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	12,320,718	12,270,674	11,564,226	10,746,443	11,724,946
b Contributions					
c Net investment earnings, gains, and losses	638,302	543,742	1,307,784	1,377,291	-135,266
d Grants or scholarships					
e Other expenditures for facilities and programs	473,199	464,824	531,998	492,847	783,857
f Administrative expenses	29,775	28,874	69,338	66,661	59,380
g End of year balance	12,456,046	12,320,718	12,270,674	11,564,226	10,746,443

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

- a Board designated or quasi-endowment ▶ 53.310 %
- b Permanent endowment ▶ 46.690 %
- c Temporarily restricted endowment ▶ 0 %

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:

	Yes	No
(i) unrelated organizations	Yes	
(ii) related organizations		No

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

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		2,352,000		2,352,000
b Buildings		7,577,419	3,204,592	4,372,827
c Leasehold improvements				
d Equipment		9,396,321	8,519,379	876,942
e Other				
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				7,601,769

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) BENEFICIAL INTEREST IN TRUSTS	12,456,046	F
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 12.)* ▶	12,456,046	

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) CAPITAL LEASE PAYABLE	29,994
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 25.)* ▶	29,994

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.

1	Total revenue, gains, and other support per audited financial statements			1	65,145,015
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a	296,279		
b	Donated services and use of facilities	2b	10,220		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	-16,038,571		
e	Add lines **2a** through **2d**			2e	-15,732,072
3	Subtract line **2e** from line **1**			3	80,877,087
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	-178,909		
c	Add lines **4a** and **4b**			4c	-178,909
5	Total revenue. Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12.)			5	80,698,178

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

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

1	Total expenses and losses per audited financial statements			1	50,351,014
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a	10,220		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	178,909		
e	Add lines **2a** through **2d**			2e	189,129
3	Subtract line **2e** from line **1**			3	50,161,885
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	16,038,571		
c	Add lines **4a** and **4b**			4c	16,038,571
5	Total expenses. Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18.)			5	66,200,456

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: 91-0565555
Name: UNITED WAY OF KING COUNTY

Supplemental Information

Return Reference	Explanation
PART IV, LINE 2B:	DONOR DESIGNATIONS AND CONTRIBUTIONS THAT ARE DESIGNATED TO NONPROFIT ORGANIZATIONS OTHER THAN TO UNITED WAY OF KING COUNTY.

Supplemental Information

Return Reference	Explanation
PART V, LINE 4:	ENDOWMENT DISTRIBUTIONS ARE USED FOR ADMINISTRATIVE EXPENSES AND PROGRAM SERVICES AS DICTATED BY THE ENDOWMENT AGREEMENTS.

Supplemental Information

Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS:	PASS THROUGH DONOR DESIGNATIONS -16,008,796. INVESTMENT EXPENSE -29,775.

Supplemental Information

Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS:	FUNDRAISING EXPENSES -178,001. LOSS ON DISPOSAL OF FIXED ASSETS -908.

Supplemental Information

Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS:	FUNDRAISING EXPENSES 178,001. LOSS ON DISPOSAL OF ASSETS 908.

Supplemental Information

Return Reference	Explanation
PART XII, LINE 4B - OTHER ADJUSTMENTS:	PASS THROUGH DONOR DESIGNATIONS 16,008,796. INVESTMENT EXPENSES 29,775.

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SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

▶ **Attach to Form 990 or Form 990-EZ.**

▶ **Go to *www.irs.gov/Form990* for instructions and the latest information.**

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
UNITED WAY OF KING COUNTY

Employer identification number
91-0565555

Part I **Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a ☐ Mail solicitations
b ☐ Internet and email solicitations
c ☐ Phone solicitations
d ☐ In-person solicitations
e ☐ Solicitation of non-government grants
f ☐ Solicitation of government grants
g ☐ Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ **Yes** ☐ **No**

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	**(ii)** Activity	**(iii)** Did fundraiser have custody or control of contributions? **Yes**	**No**	**(iv)** Gross receipts from activity	**(v)** Amount paid to (or retained by) fundraiser listed in col. **(i)**	**(vi)** Amount paid to (or retained by) organization
Total . . . . . ▶						

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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

		(a) Event #1 EAT, DRINK & BE GENEROUS (event type)	(b) Event #2 (event type)	(c) Other events (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts	381,733			381,733
	2 Less: Contributions	355,242			355,242
	3 Gross income (line 1 minus line 2)	26,491			26,491
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	16,000			16,000
	7 Food and beverages	71,376			71,376
	8 Entertainment				
	9 Other direct expenses	90,625			90,625
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				178,001
	11 Net income summary. Subtract line 10 from line 3, column (d) ▶				-151,510

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

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col.(a) through col.(c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes ____% ☐ No	☐ Yes ____% ☐ No	☐ Yes ____% ☐ No	
	7 Direct expense summary. Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d) ▶				

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

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

b If "No," explain: _____

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

b If "Yes," explain: _____

11 Does the organization conduct gaming activities with nonmembers? . . . . . ☐ Yes ☐ No

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

13 Indicate the percentage of gaming activity conducted in:

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

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

Name ▶ ----------

Address ▶ ----------

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

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

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

Name ▶ ----------

Address ▶ ----------

16 Gaming manager information:

Name ▶ ----------

Gaming manager compensation ▶ $----------

Description of services provided ▶ ----------

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

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

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

Part IV **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

Return Reference	Explanation

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Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ **Attach to Form 990.**

▶ **Go to *www.irs.gov/Form990* for the latest information.**

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
UNITED WAY OF KING COUNTY

Employer identification number
91-0565555

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 . . . . . ▶ 319

3 Enter total number of other organizations listed in the line 1 table . . . . . ▶ 0

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)						
(2)						
(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:	UNITED WAY OF KING COUNTY (UWKC) RESPECTS THE DESIRE OF DONORS TO CHOOSE TO DESIGNATE THEIR CONTRIBUTIONS. SEVERAL OPTIONS ARE AVAILABLE TO ACCOMMODATE DONORS' CHOICES. A DONOR MAY DESIGNATE HIS/HER CONTRIBUTION TO A UNITED WAY PARTNER AGENCY. THIS CONTRIBUTION WILL BE TO THE AGENCY IN ADDITION TO ALLOCATIONS FROM UWKC. THOSE UWKC DOLLARS GRANTED DIRECTLY TO UWKC AGENCIES ARE MONITORED THROUGH ROUTINE REPORTING OF GRANTEES, AUDIT INFORMATION AND REVIEW AND PERIODIC SITE VISITS. A DONOR MAY DESIGNATE HIS/HER CONTRIBUTION TO ANY UNITED WAY IN THE UNITED STATES. A DONOR MAY ALSO DESIGNATE HIS/HER CONTRIBUTION TO ANY CERTIFIED 501(C)(3) ORGANIZATION IN THE USA. FOR MOST AGENCIES, WE VERIFY THEIR 501(C)(3) STATUS USING DATA FILES THAT WE RECEIVE FROM THE IRS. THE IRS UPDATES THESE FILES ABOUT ONCE A MONTH AND MAKES THEM AVAILABLE FOR RETRIEVAL FROM THEIR WEBSITE. WE INCORPORATE THIS DATA INTO A SEARCHABLE DATABASE. FOR ORGANIZATIONS NOT FOUND IN THE IRS DATA FILES, WE REQUIRE A COPY OF THE 501(C)(3) DETERMINATION LETTER ISSUED TO THE ORGANIZATION BY THE IRS; OR IN A FEW INSTANCES, WE VERIFY THE 501(C)(3) ELIGIBILITY WITH AN IRS AGENT OVER THE PHONE. SEVERAL TIMES A YEAR, WE REVIEW THE 501(C)(3) ORGANIZATIONS WE HAVE SET UP IN OUR DATABASE AGAINST NEW DATA WE RECEIVE FROM THE IRS TO ENSURE THAT WE ONLY PAY OUT TO THOSE AGENCIES THAT ARE CURRENTLY ELIGIBLE. UWKC RESERVES THE RIGHT TO COLLECT A FEE FOR PROCESSING DONOR-DESIGNATED DOLLARS. UWKC ALSO MAY DECLINE TO ACCEPT CERTAIN DONOR-DESIGNATED DOLLARS. UWKC MAY ENCOUNTER CIRCUMSTANCES WHERE IT MUST HOLD OR FREEZE DONOR-DESIGNATED DOLLARS DUE TO LEGAL COMPULSION, THREAT OF COMPULSION, OR OTHER REASONS.
SCHEDULE I, PART II:	THE INFORMATION INCLUDED IN PART II IS BASED ON THE ACCRUAL METHOD OF ACCOUNTING.

Additional Data

Software ID:
Software Version:
EIN: 91-0565555
Name: UNITED WAY OF KING 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
501 COMMONS 1200 12TH AVE S SEATTLE, WA 98144	94-3089631	501(C)3	40,952				PROG INVST & DESG GIFTS
A CONTEMPORARY THEATRE INC 700 UNION ST SEATTLE, WA 98101	91-0787792	501(C)3	20,000				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
ABIDE WORLDWIDE PO BOX 464 OTIS ORCHARDS, WA 99027	82-2961410	501(C)3	30,030				DESIGNATED GIFT
ABU-BAKR ISLAMIC CENTER OF WASHINGTON 14101 TUKWILA INTERNATIONAL BLVD TUKWILA, WA 98168	91-2110135	501(C)3	5,068				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
ABUNDANT LIFE CHRISTIAN CHURCH 17241 SE HEMRICH RD DAMASCUS, OR 97089	93-1023892	501(C)3	12,000				DESIGNATED GIFT
AGE UP 3810 BEACON AVE S SEATTLE, WA 98108	45-5092355	501(C)3	74,667				PROGRAM INVESTMENT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
ALL SEATTLE KIDS HOME 232 BURNETT AVE S APT A-205 RENTON, WA 98057	83-1966781	501(C)3	8,333				PROGRAM INVESTMENT
AMARA 5907 MARTIN LUTHER KING JR WAY S SEATTLE, WA 98118	91-0577487	501(C)3	47,850				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount 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 INC 250 WILLIAMS ST NW STE 400 ATLANTA, GA 30303	13-1788491	GOVERNMENT	14,423				DESIGNATED GIFT
AMERICAN CIVIL LIBERTIES UNION FOUNDATION INC 125 BROAD STREET NEW YORK, NY 10004	13-6213516	501(C)3	10,126				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount 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 PO BOX 2728 SEATTLE, WA 98111	23-7076867	501(C)3	5,241				DESIGNATED GIFT
AMERICAN NATIONAL RED CROSS PO BOX 73857 CHICAGO, IL 60673	53-0196605	GOVERNMENT	24,625				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount 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 RED CROSS SERVING 1900-25TH AVE S SEATTLE, WA 98144	91-0565554	501(C)3	50,000				PROGRAM INVESTMENT
APPLETON EDUCATION FOUNDATION INC 122 E COLLEGE AVE 1-B APPLETON, WI 54911	39-1866090	501(C)3	100,000				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
ARTSFUND PO BOX 19780 SEATTLE, WA 98109	91-0839644	501(C)3	7,500				DESIGNATED GIFT
ASIAN COUNSELING AND REFERRAL 3639 MARTIN LUTHER KING JR WAY S SEATTLE, WA 98144	91-0916176	501(C)3	221,433				PROG INVST & DESG GIFTS

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

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ASSOCIATED RECREATION COUNCIL 8061 DENSMORE AVE N SEATTLE, WA 98103	51-0170717	501(C)3	5,250				DESIGNATED GIFT
ATLANTIC STREET CENTER 2103 S ATLANTIC ST SEATTLE, WA 98144	91-0568710	501(C)3	824,968				PROG INVST & DESG GIFTS

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

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AUBURN FOOD BANK THE PO BOX 464 AUBURN, WA 98071	91-1215485	501(C)3	32,314				PROG INVST & DESG GIFTS
B NAI BRITH MENS CAMP ASSOCIATION 9400 SW BEAVERTON HILLSDALE HWY 13 BEAVERTON, OR 97005	91-1842787	501(C)3	11,000				DESIGNATED GIFT

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

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BACKPACK BRIGADE 4111 MADISON ST 21 SEATTLE, WA 98112	47-4086877	501(C)3	42,000				PROG INVST & DESG GIFTS
BALLARD FOOD BANK 5130 LEARY AVE NW SEATTLE, WA 98107	91-1428805	501(C)3	12,040				PROG INVST & DESG GIFTS

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

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BELLEVUE COLLEGE FOUNDATION 3000 LANDERHOLM CIRCLE SE NO A101 BELLEVUE, WA 98007	91-1051671	501(C)3	31,850				PROG INVST & DESG GIFTS
BELLEVUE SCHOOLS FOUNDATION PO BOX 40644 BELLEVUE, WA 98015	91-1080997	501(C)3	48,689				DESIGNATED GIFT

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

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BELLWETHER HOUSING 433 MINOR AVE N SEATTLE, WA 98109	91-1116960	501(C)3	34,859				PROGRAM INVESTMENT
BERK CONSULTING INC 2200 SIXTH AVE STE 1000 SEATTLE, WA 98121	91-1467862	501(C)3	48,920				PROGRAM INVESTMENT

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

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BETHANY BAPTIST CHURCH 713 S HILL PARK DR PUYALLUP, WA 98373	91-0963264	501(C)3	12,000				DESIGNATED GIFT
BIG BROTHERS BIG SISTERS OF PUGET SOUND 1600 S GRAHAM ST SEATTLE, WA 98108	91-0673185	501(C)3	9,309				DESIGNATED GIFT

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

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BIRCHTREE WPG LLC 1111 WEST JAMES STREET KENT, WA 98032	91-1946889	501(C)3	7,380				PROGRAM INVESTMENT
BLACK DIAMOND COMMUNITY CENTER PO BOX 480 BLACK DIAMOND, WA 98010	91-1111686	501(C)3	10,100				DESIGNATED GIFT

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

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BOY SCOUTS OF AMERICA 3120 RAINIER AVE S SEATTLE, WA 98144	91-0569878	501(C)3	18,103				DESIGNATED GIFT
BOYS & GIRLS CLUBS OF AMERICA 1275 PEACHTREE STREET NW ATLANTA, GA 30309	13-5562976	501(C)3	469,103				DESIGNATED GIFT

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

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BOYS AND GIRLS CLUBS OF KING COUNTY 603 STEWART ST STE 300 SEATTLE, WA 98101	91-0532600	501(C)3	12,445				DESIGNATED GIFT
BREAST CANCER RESEARCH FOUNDATION INC 28 WEST 44TH STREET SUITE 609 NEW YORK, NY 10036	13-3727250	501(C)3	15,120				DESIGNATED GIFT

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

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BUILDING CHANGES 1200 12TH AVE S SUITE 1200 SEATTLE, WA 98144	91-1410450	501(C)3	225,000				PROGRAM INVESTMENT
BUSH SCHOOL 3400 E HARRISON ST SEATTLE, WA 98112	91-0161095	501(C)3	110,000				DESIGNATED GIFT

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

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BYRD BARR PLACE 722 18TH AVE SEATTLE, WA 98122	91-0786727	501(C)3	49,500				PROGRAM INVESTMENT
CAMP SOLOMON SCHECHTER INC 117 E LOUISA ST BOX 110 SEATTLE, WA 98102	93-0572590	501(C)3	10,000				DESIGNATED GIFT

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

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CAPITAL HILL HOUSING 1620 12TH AVENUE SUITE 205 SEATTLE, WA 98122	91-0979968	501(C)3	25,427				PROGRAM INVESTMENT
CARES OF WASHINGTON 1833 N105TH STREET SUITE 201 SEATTLE, WA 98133	13-4237286	501(C)3	105,000				PROGRAM INVESTMENT

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

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CASA LATINA 220 BLANCHARD SEATTLE, WA 98121	91-1689251	501(C)3	130,342				PROG INVST & DESG GIFTS
CASCADE PUBLIC MEDIA 401 MERCER ST SEATTLE, WA 98109	91-1221895	501(C)3	148,489				DESIGNATED GIFT

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

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CASCADIA COLLEGE FOUNDATION 18345 CAMPUS WAY NE BOTHELL, WA 98011	91-1986593	501(C)3	20,000				PROGRAM INVESTMENT
CATHOLIC COMMUNITY SERVICES 100 23RD AVE S SEATTLE, WA 98144	91-1585652	501(C)3	445,378				PROG INVST & DESG GIFTS

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

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CEDAR PARK ASSEMBLY OF GOD 16300 112TH AVE NE BOTHELL, WA 98011	51-0137442	501(C)3	6,120				DESIGNATED GIFT
CENTER FOR COMMUNITY SERVICE FUND 1301 5TH AVE STE 1500 SEATTLE, WA 98101	91-1648680	501(C)3	12,600				DESIGNATED GIFT

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

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CENTER FOR HUMANITARIAN OUTREACH AND INTERCULTURAL EXCHANGE 7879 SOUTH 1530 WEST WEST JORDAN, UT 84088	74-2494806	501(C)3	15,000				DESIGNATED GIFT
CHARTER OAK EVANGELICAL FREE CHURCH 12212 NE 299TH ST BATTLE GROUND, WA 98604	91-1049205	501(C)3	32,160				DESIGNATED GIFT

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

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CHIEF SEATTLE CLUB 410 2ND AVE EXTENSION SO SEATTLE, WA 98104	91-0852503	501(C)3	130,592				PROG INVST & DESG GIFTS
CHILD CARE RESOURCES 1225 S WELLER ST STE 300 SEATTLE, WA 98144	91-1465046	501(C)3	163,600				PROG INVST & DESG GIFTS

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

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CHILDHAVEN 316 BROADWAY SEATTLE, WA 98122	91-0402430	501(C)3	20,536				DESIGNATED GIFT
CHILDRENS HOME SOCIETY OF WA 12360 LAKE CITY WAY NE SEATTLE, WA 98125	91-0575955	501(C)3	868,179				PROG INVST & DESG GIFTS

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CHINESE INFORMATION & SERVICES 611 S LANE ST SEATTLE, WA 98104	23-7438529	501(C)3	359,469				PROG INVST & DESG GIFTS
CHRISTIAN MISSIONS IN MANY LANDS MANY LANDS 2751 18TH AVENUE WALL, NJ 07719	13-2688413	501(C)3	6,315				DESIGNATED GIFT

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

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CHURCH OF JESUS CHRIST OF LATTER DAY SAINTS 50 EAST NORTH TEMPLE ST SALT LAKE CITY, UT 84150	23-7300405	501(C)3	10,200				DESIGNATED GIFT
CITY OF RENTON 1055 S GRADY WAY RENTON, WA 98055	91-6001271	GOVERNMENT	5,690				PROG INVST & DESG GIFTS

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CITY OF SEATTLE - DEPT OF PARKS & RECREATION 100 DEXTER AVE N SEATTLE, WA 98109	91-6001275	GOVERNMENT	90,688				PROGRAM INVESTMENT
CLERGY COMMUNITY FOR CHILDREN & YOUTH COALITION 1404 EAST YESLER WAY SUITE 202 A SEATTLE, WA 98122	91-2064753	501(C)3	73,967				PROGRAM INVESTMENT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
COALITION FOR REFUGEES FROM BURMA 1265 S MAIN ST SUITE 309 SEATTLE, WA 98144	27-1458930	501(C)3	116,667				PROGRAM INVESTMENT
COLLEGE SUCCESS FOUNDATION 15500 SE 30TH PL STE 200 BELLEVUE, WA 98007	91-2036088	501(C)3	6,250				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
COLORADO SEMINARY 2199 S UNIVERSITY BLVD DENVER, CO 80210	84-0404231	501(C)3	25,000				DESIGNATED GIFT
COMMUNITY ACTION OF VENTURA COUNTY 621 RICHMOND AVE OXNARD, CA 93030	95-2408644	501(C)3	7,500				DESIGNATED GIFT

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

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COMMUNITY LEADERS ROUNDTABLE OF SEATTLE 7728 RAINIER AVE S SEATTLE, WA 98118	46-4242313	501(C)3	46,000				DESIGNATED GIFT
COMPASS HOUSING ALLIANCE 77 S WASHINGTON ST 5TH FL SEATTLE, WA 98104	91-0578229	501(C)3	61,020				DESIGNATED GIFT

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

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CONGREGATIONAL CHURCH OF MERCER ISLAND 4545 ISLAND CREST WAY MERCER ISLAND, WA 98040	91-6175428	501(C)3	30,000				DESIGNATED GIFT
CONGREGATIONS FOR THE HOMELESS 515 116TH AVE NE 150 BELLEVUE, WA 98004	45-3932748	501(C)3	124,826				PROGRAM INVESTMENT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
COOPERATIVE FOR ASSISTANCE AND RELIEF EVERYWHERE INC 151 ELLIS ST NE ATLANTA, GA 30303	13-1685039	501(C)3	110,000				DESIGNATED GIFT
CORNERSTONE COMMUNITY CHURCH PORTLAND INC PO BOX 23396 TIGARD, OR 97281	42-1755583	501(C)3	13,500				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
CORONADO HOUSING ASSOCIATES LLC 1400 SW 107TH ST SEATTLE, WA 98148	32-0490756	501(C)3	6,417				PROGRAM INVESTMENT
CORPORATION FOR NATIONAL & COMMUNITY SVC 1201 NEW YORK AVENUE NW WASHINGTON, DC 20525	52-0971471	501(C)3	284,132				PROGRAM INVESTMENT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
CORPORATION OF GONZAGA UNIVERSITY 502 E BOONE AVE SPOKANE, WA 99258	91-0236600	501(C)3	20,732				DESIGNATED GIFT
COV19 CITY OF SEATTLE PO BOX 34214 SEATTLE, WA 98124		GOVERNMENT	50,000				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
COVENANT HOUSE 5 PENN PLAZA NEW YORK, NY 10001	13-2725416	501(C)3	15,000				DESIGNATED GIFT
CRISIS CONNECTION 9725 3RD AVENUE NE SUITE 300 SEATTLE, WA 98115	91-0773187	501(C)3	162,062				PROG INVST & DESG GIFTS

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
CROSS SOUND PRESBYTERIAN CHURCH PO BOX 11748 BAINBRIDGE IS, WA 98110	91-1715921	501(C)3	6,300				DESIGNATED GIFT
CROSSROADS BIBLE CHURCH 15815 SE 37TH ST BELLEVUE, WA 98006	91-0897868	501(C)3	5,401				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
DENISE LOUIE EDUCATION CENTER 1930 6TH AVE S401 SEATTLE, WA 98101	91-1016974	501(C)3	185,450				PROG INVST & DESG GIFTS
DES MOINES AREA FOODBANK PO BOX 98788 DES MOINES, WA 98198	91-1183154	501(C)3	57,000				PROGRAM INVESTMENT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
DESIGNATION FEES 720 SECOND AVE SEATTLE, WA 98104		501(C)3	30,085				DESIGNATED GIFT
DISTRIBUTIVE EDUCATION CLUBS OF AMERICA 16040 CHRISTENSEN RD STE 215 TUKWILA, WA 98188	91-1308496	501(C)3	9,000				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
DOCTORS WITHOUT BORDERS USA INC 333 7TH AVENUE 2ND FLOOR NEW YORK, NY 10001	13-3433452	501(C)3	37,900				DESIGNATED GIFT
DOWNTOWN EMERGENCY SERVICE CTR 515 3RD AVE SEATTLE, WA 98104	91-1275815	501(C)3	52,790				PROG INVST & DESG GIFTS

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
EASTRIDGE CHURCH 24205 SE ISSAQUAH FALL CITY RD SAMMAMISH, WA 98029	91-1322980	501(C)3	10,799				DESIGNATED GIFT
EASTSIDE BABY CORNER PO BOX 712 ISSAQUAH, WA 98027	91-1617032	501(C)3	7,070				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
EASTSIDE HUMAN SVCS FORUM 450 110TH AVE NE BELLEVUE, WA 98004	05-0543830	501(C)3	6,000				PROGRAM INVESTMENT
EASTSIDE LEGAL ASSISTANCE PROGRAM 1239 120TH AVE NE STE J BELLEVUE, WA 98005	91-1471384	501(C)3	10,000				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
EDMONDS METHODIST CHURCH 828 CASPERS ST EDMONDS, WA 98020	91-0652053	501(C)3	34,000				DESIGNATED GIFT
EDQUITY 125 COURT ST APT 3NH BROOKLYN, NY 11201	81-4521518	501(C)3	50,680				PROGRAM INVESTMENT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
EDUCATION WITH PURPOSE FOUNDATION FOR PACIFIC ISLANDERS 1615 W SMITH ST APT A-204 KENT, WA 98032	27-5022461	501(C)3	60,007				PROGRAM INVESTMENT
EL CENTRO DE LA RAZA 2524 16TH AVE S SEATTLE, WA 98144	91-0899927	501(C)3	453,774				PROG INVST & DESG GIFTS

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount 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 FEEDING PROGRAM 851 HARBOR WAY N STE A RENTON, WA 98057	91-1902023	501(C)3	15,250				PROGRAM INVESTMENT
EMPLOYMENT SECURITY DEPT ATTN JENNIFER ZEHNDER OLYMPIA, WA 98507	91-6001099	501(C)3	160,500				PROGRAM INVESTMENT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
ENCOMPASS 1407 BOALCH AVE NW NORTH BEND, WA 98045		501(C)3	208,722				PROG INVST & DESG GIFTS
END OF LIFE WASHINGTON PO BOX 61369 SEATTLE, WA 98141	91-1412987	501(C)3	15,250				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
EQUITY IN EDUCATION COALITION 605 SW 108TH STREET SEATTLE, WA 98146	81-4447635	501(C)3	9,500				PROGRAM INVESTMENT
EVERGREEN TREATMENT SERVICES 1700 AIRPORT WAY S SEATTLE, WA 98134	91-0903529	501(C)3	90,325				PROG INVST & DESG GIFTS

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
FAITH BAPTIST CHURCH 25636 140TH AVE SE KENT, WA 98042	91-1150901	501(C)3	15,867				DESIGNATED GIFT
FAITH COVENANT CHURCH 1915 WASHINGTON ST SUMNER, WA 98390	91-6035117	501(C)3	12,610				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
FALIS COMMUNITY SERVICE 10615 SE 256TH ST SUITE 104 KENT, WA 98030	82-2923129	501(C)3	38,017				PROGRAM INVESTMENT
FAMILY WORKS 1501 N 45TH ST SEATTLE, WA 98103	91-1757277	501(C)3	10,900				PROG INVST & DESG GIFTS

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
FARESTART 700 VIRGINIA ST STE 300 SEATTLE, WA 98101	91-1546757	501(C)3	143,210				PROG INVST & DESG GIFTS
FEDERAL WAY SCHOOL DISTRICT NO 210 33330 8TH AVE S FEDERAL WAY, WA 98003	91-6001624	GOVERNMENT	100,000				PROGRAM INVESTMENT

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

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FEDERAL WAY YOUTH ACTION TEAM 29500 PACIFIC HIGHWAY SOUTH SUITE N N FEDERAL WAY, WA 98003	82-4707184	501(C)3	49,512				PROGRAM INVESTMENT
FEEST-FOOD EMPOWERMENT EDUCATION & SUSTAINABILITY TEAM 605 SW 108TH STREET SEATTLE, WA 98146	46-2680838	501(C)3	74,667				PROGRAM INVESTMENT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
FILIPINO COMMUNITY OF SEATTLE 5740 M L KING JR WAY SOUTH SEATTLE, WA 98118	91-6055858	501(C)3	61,262				PROGRAM INVESTMENT
FOLDS OF HONOR FOUNDATION 719 N COUNTY LINE RD TUTTLE, OK 73089	82-4623358	501(C)3	7,500				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
FOOD LIFELINE 815 S 96TH ST SEATTLE, WA 98108	91-1090450	501(C)3	98,492				PROG INVST & DESG GIFTS
FRED HUTCHINSON CANCER RESEARCH CENTER 1100 FAIRVIEW AVE N SEATTLE, WA 98109	23-7156071	501(C)3	604,993				DESIGNATED GIFT

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

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FRIENDS OF YOUTH 13116 NE 132ND ST KIRKLAND, WA 98034	91-0672501	501(C)3	70,000				PROG INVST & DESG GIFTS
FRIENDS OF YOUTH 13116 NE 132ND ST KIRKLAND, WA 98034	91-0672501	501(C)3	5,500				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
GALILEO FOUNDATION US INC PO BOX 50508 LOS ANGELES, CA 90050	83-4087116	501(C)3	10,000				DESIGNATED GIFT
GLOBAL-HELP ORGANIZATION 2318 FAIRVIEW AVE E UNIT 2 SEATTLE, WA 98102	41-2033943	501(C)3	10,000				DESIGNATED GIFT

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

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GLOVER EMPOWER MENTORING P O BOX 6471 KENT, WA 98031	47-1242835	501(C)3	60,257				PROGRAM INVESTMENT
GOOD SHEPHERD YOUTH OUTREACH PO BOX 25492 FEDERAL WAY, WA 98093	26-3713948	501(C)3	116,667				PROGRAM INVESTMENT

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

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GRACE PRESBYTERIAN CHURCH OF PLANO FOUNDATION 4300 W PARK BLVD PLANO, TX 75093	75-1791587	501(C)3	13,500				DESIGNATED GIFT
GREEN RIVER COLLEGE FOUNDATION 12401 SE 320TH STREET AUBURN, WA 98092	51-0168649	501(C)3	202,500				PROGRAM INVESTMENT

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

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GRIST MAGAZINE INC 1201 WESTERN AVE STE 410 SEATTLE, WA 98101	06-1664153	501(C)3	10,000				DESIGNATED GIFT
HABITAT FOR HUMANITY INTERNATIONAL 560 NACHES AVE SW STE 110 RENTON, WA 98057	91-1342397	501(C)3	61,200				DESIGNATED GIFT

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

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HABITAT FOR HUMANITY INTERNATIONAL INC 121 HABITAT STREET AMERICUS, GA 31709	91-1914868	501(C)3	5,900				DESIGNATED GIFT
HAMLIN ROBINSON SCHOOL 1701 20TH AVE S SEATTLE, WA 98144	91-1344121	501(C)3	5,300				DESIGNATED GIFT

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

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HERITAGE UNIVERSITY 3240 FORT RD TOPPENISH, WA 98948	91-1160585	501(C)3	20,000				DESIGNATED GIFT
HERZL-NER TAMID CONSERVATIVE CONGREGATION PO BOX 574 MERCER ISLAND, WA 98040	91-0254210	501(C)3	19,150				DESIGNATED GIFT

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

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HIGHLINE AREA FOOD BANK PO BOX 66427 BURIEN, WA 98166		501(C)3	6,000				PROGRAM INVESTMENT
HIGHLINE COLLEGE FOUNDATION MS 99-248 PO BOX 98000 DES MOINES, WA 98198	23-7428279	501(C)3	140,000				PROGRAM INVESTMENT

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HIGHLINE SCHOOLS FOUNDATION FOR EXCELLENCE 15675 AMBAUM BLVD SW SEATTLE, WA 98166	91-2020506	501(C)3	19,240				PROG INVST & DESG GIFTS
HISTORICAL SOCIETY OF SEATTLE & KING COUNTY PO BOX 80816 SEATTLE, WA 98108	91-0513034	501(C)3	11,000				DESIGNATED GIFT

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

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HNN MANAGEMENT INC PO BOX 4108 BELLEVUE, WA 98009	20-3981398	501(C)3	208,104				PROGRAM INVESTMENT
HOPE FOR HEROISM 270 SOUTH HANFORD STREET STE 207 SEATTLE, WA 98134	91-2105756	501(C)3	25,000				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
HOPELINK 8990 154TH AVE NE REDMOND, WA 98052	91-0982116	501(C)3	73,069				DESIGNATED GIFT
HORN OF AFRICA SERVICES 4714 RAINIER AVE S STE 105 SEATTLE, WA 98118	91-1897087	501(C)3	281,773				PROG INVST & DESG GIFTS

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
HOUSING AUTHORITY OF THE CITY OF SEATTLE 190 QUEEN ANNE AVE NORTH SEATTLE, WA 98109	91-6000977	501(C)3	39,602				PROGRAM INVESTMENT
HUMANE SOCIETY FOR SEATTLE-KING CO 13212 SE EASTGATE WAY BELLEVUE, WA 98005	91-0282060	501(C)3	18,574				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
INTERACTION TRANSITION 1265 S MAIN STREET 305-B SEATTLE, WA 98144	51-0175651	501(C)3	117,500				PROGRAM INVESTMENT
INTERCULTURAL CHILDREN & FAMILY SERVICES 6320 EVERGREEN WAY STE 205 EVERETT, WA 98203	46-3280147	501(C)3	227,132				PROGRAM INVESTMENT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
IRAQI COMMUNITY CENTER OF WASHINGTON 10610 SE KENT KANGLEY RD SUITE 207 KENT, WA 98030	61-1729234	501(C)3	212,715				PROGRAM INVESTMENT
JEWISH FAMILY SERVICE 1601 16TH AVE SEATTLE, WA 98122	91-0565537	501(C)3	71,108				PROG INVST & DESG GIFTS

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
JEWISH FEDERATION OF GREATER SEATTLE 2033 6TH AVE STE 810 SEATTLE, WA 98121	91-0575950	501(C)3	128,500				DESIGNATED GIFT
JEWISH WOMENS RENAISSANCE PROJECT INC 6101 EXECUTIVE BLVD STE 240 ROCKVILLE, MD 20852	38-3852989	501(C)3	10,000				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
JUNIOR ACHIEVEMENT OF WASHINGTON 1700 WESTLAKE AVE N 100 SEATTLE, WA 98109	91-0604913	501(C)3	6,370				DESIGNATED GIFT
KALOS CHURCH 122 164TH AVE NE BELLEVUE, WA 98008	81-4210254	501(C)3	11,340				DESIGNATED GIFT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KCHAOVERLAKE TOD HOUSING LP 2580 152ND AVE NE REDMOND, WA 98052	91-2035068	501(C)3	8,708				PROGRAM INVESTMENT
KENT FOOD BANK AND 515 W HARRISON ST STE 107 KENT, WA 98032	91-0881434	501(C)3	11,088				PROG INVST & DESG GIFTS

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
KIN ON HEALTH CARE CENTER 4416 S BRANDON ST SEATTLE, WA 98118	91-1620786	501(C)3	14,040				DESIGNATED GIFT
KIND INC 1201 L ST NW FL 2 WASHINGTON, DC 20005	26-2763038	501(C)3	75,000				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
KINDERING 16120 NE 8TH ST BELLEVUE, WA 98008	91-0816827	501(C)3	265,464				PROG INVST & DESG GIFTS
KING COUNTY BAR ASSOCIATION 1200 5TH AVE STE 700 SEATTLE, WA 98101	91-0721603	501(C)3	385,325				PROGRAM INVESTMENT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
KING COUNTY BAR FOUNDATION 1200 5TH AVE STE 700 SEATTLE, WA 98101	91-0721601	501(C)3	50,000				PROGRAM INVESTMENT
KING COUNTY DEPT OF COMMUNITY 401 FIFTH AVE STE 500 SEATTLE, WA 98104		GOVERNMENT	372,250				PROGRAM INVESTMENT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
KS & NH INC 34827 PACIFIC HWY S FEDERAL WAY, WA 98003	26-1966937	501(C)3	7,685				PROGRAM INVESTMENT
LAKE BURIEN PRESBYTERIAN CHURCH 15003 14TH AVE SW BURIEN, WA 98166	91-0616446	501(C)3	6,000				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
LAKE SAWYER CHRISTIAN CHURCH 31605 LAKE SAWYER RD SE BLACK DIAMOND, WA 98010	91-1076499	501(C)3	12,367				DESIGNATED GIFT
LAKE WASHINGTON SCHOOLS FOUNDATION PO BOX 83 REDMOND, WA 98073	55-0891792	501(C)3	5,220				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
LAMBERT HOUSE 1818 15TH AVE SEATTLE, WA 98122	94-3036815	501(C)3	5,134				DESIGNATED GIFT
LEADERSHIP TOMORROW 1301 5TH AVENUE SUITE 2500 SEATTLE, WA 98101	91-1196293	501(C)3	18,895				PROG INVST & DESG GIFTS

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
LEGAL FOUNDATION OF WASHINGTON 1325 4TH AVE STE 1335 SEATTLE, WA 98101	91-1263533	501(C)3	10,000				DESIGNATED GIFT
LIFELONG AIDS ALLIANCE 210 S LUCILE STREET SEATTLE, WA 98108	91-1215715	501(C)3	14,316				PROG INVST & DESG GIFTS

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
LIFEWIRE PO BOX 6398 BELLEVUE, WA 98008	91-1190193	501(C)3	176,790				PROG INVST & DESG GIFTS
LIQUID VELO 1002 S ANDERSON ST UNIT A TACOMA, WA 98405	27-4072470	501(C)3	22,500				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
MAPLE VALLEY FOOD BANK PO BOX 322 MAPLE VALLEY, WA 98038	91-6057006	501(C)3	13,698				PROG INVST & DESG GIFTS
MAPLE VALLEY PRESBYTERIAN CHURCH PO BOX 590 MAPLE VALLEY, WA 98038	91-1209341	501(C)3	12,000				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount 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'S PLACE SEATTLE 1830 9TH AVE SEATTLE, WA 98101	27-2087950	501(C)3	178,236				PROGRAM INVESTMENT
MARY'S PLACE SEATTLE 1830 9TH AVE SEATTLE, WA 98101	27-2087950	501(C)3	130,935				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
MERCER ISLAND YOUTH AND FAMILY SERVICES FOUNDATION 2040 84TH AVE SE MERCER ISLAND, WA 98040	94-3110148	501(C)3	10,240				DESIGNATED GIFT
MERCY HOUSING NORTHWEST 6930 MARTIN LUTHER KING JR WAY S SEATTLE, WA 98118	91-1546525	501(C)3	36,673				PROGRAM INVESTMENT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
METROPOLITAN SEATTLE JEWISH DAY SCHOOL 15749 NE 4TH ST BELLEVUE, WA 98008	91-1085790	501(C)3	12,000				DESIGNATED GIFT
MILLIONAIR CLUB 2515 WESTERN AVENUE SEATTLE, WA 98121	91-0607513	501(C)3	160,850				PROG INVST & DESG GIFTS

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
MOVEMBER FOUNDATION 8559 HIGUERA ST CULVER CITY, CA 90232	77-0714052	501(C)3	9,300				DESIGNATED GIFT
MULTI-SERVICE CENTER 1200 SOUTH 336TH STREET FEDERAL WAY, WA 98093		501(C)3	260,250				PROGRAM INVESTMENT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
MUSLIM HOUSING SERVICES 6727 RAINIER AVE S 26 SEATTLE, WA 98118	91-1987910	501(C)3	15,559				PROG INVST & DESG GIFTS
NATIONAL FFA FOUNDATION INC PO BOX 68960 INDIANAPOLIS, IN 46268	54-6044662	501(C)3	469,103				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount 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 MULTIPLE SCLEROSIS SOCIETY 192 NICKERSON ST STE 100 SEATTLE, WA 98109	91-0742424	501(C)3	8,133				DESIGNATED GIFT
NATURE CONSERVANCY 4245 NORTH FAIRFAX DRIVE STE 100 ARLINGTON, VA 22203	53-0242652	501(C)3	10,950				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
NEIGHBORHOOD HOUSE 1225 S WELLER STREET STE 510 SEATTLE, WA 98144	91-0568305	501(C)3	1,978,140				PROG INVST & DESG GIFTS
NEW BIRTH FULL GOSPEL PENTECOSTAL MINISTRIES 6516 42ND AVE S SEATTLE, WA 98118	45-2414529	501(C)3	25,000				PROGRAM INVESTMENT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount 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 HELPLINE 12736 33RD AVE NE SEATTLE, WA 98125	91-1475182	501(C)3	6,000				PROGRAM INVESTMENT
NORTH TEXAS FOOD BANK 3677 MAPLESHADE LN PLANO, TX 75075	75-1785357	501(C)3	5,300				DESIGNATED GIFT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount 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 HARVEST EMM PO BOX 12272 SEATTLE, WA 98102	91-0826037	501(C)3	74,797				PROG INVST & DESG GIFTS
NORTHWEST IMMIGRANTS RIGHTS PROJECT 615 2ND AVE STE 400 SEATTLE, WA 98104	91-1393082	501(C)3	106,167				DESIGNATED GIFT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OLIVE CREST ABUSED CHILDRENS FOUNDATION 2130 EAST FOURTH STREET STE 200 SANTA ANA, CA 92705	33-0367975	501(C)3	7,500				DESIGNATED GIFT
ONE LIFE COMMUNITY CH 3524 NE 95TH ST SEATTLE, WA 98115	91-1231039	501(C)3	5,310				DESIGNATED GIFT

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

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OPEN DOORS FOR MULTICULTURAL FAMILIES 24437 RUSSELL ROAD SUITE 110 KENT, WA 98032	27-1206272	501(C)3	879,183				PROGRAM INVESTMENT
OPERATION MOBILIZATION PO BOX 444 TYRONE, GA 30290	22-2513811	501(C)3	12,594				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
OPERATION SACK LUNCH PO BOX 4128 SEATTLE, WA 98194	91-1658187	501(C)3	14,250				PROGRAM INVESTMENT
ORGANIZATIONAL RESEARCH SVCS 1100 OLIVE WAY SEATTLE, WA 98101	91-1588023	501(C)3	204,450				PROGRAM INVESTMENT

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

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ORION INDUSTRIES 1590 A STREET NE AUBURN, WA 98002	91-0727076	501(C)3	10,300				PROGRAM INVESTMENT
OUTDOORS FOR ALL FOUNDATION 6344 NE 74TH ST STE 102 SEATTLE, WA 98115	91-1085999	501(C)3	103,180				DESIGNATED GIFT

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

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OVERLAKE HOSPITAL FOUNDATION 1035 116TH AVE NE BELLEVUE, WA 98004	91-1050325	501(C)3	26,000				DESIGNATED GIFT
OVERLAKE SERVICE LEAGUE 302 BELLEVUE SQUARE BELLEVUE, WA 98004	91-0658331	501(C)3	28,000				DESIGNATED GIFT

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

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PACIFIC SCIENCE CENTER FOUNDATION 200 2ND AVE N SEATTLE, WA 98109	91-0750867	501(C)3	70,000				DESIGNATED GIFT
PAID BY FISCAL AGENT 720 SECOND AVE SEATTLE, WA 98104		501(C)3	6,178,399				DESIGNATED GIFT

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

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PARA LOS NINOS DE HIGHLINE 15220 6TH AVE SW BURIEN, WA 98166	20-0502368	501(C)3	93,842				PROGRAM INVESTMENT
PARTNER IN EMPLOYMENT 21400 INTERNATIONAL BLVD SOUTH SEATAC, WA 98198	47-4274269	501(C)3	75,000				PROGRAM INVESTMENT

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

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PATH 2201 WESTLAKE AVE STE 200 SEATTLE, WA 98121	91-1157127	501(C)3	10,500				DESIGNATED GIFT
PHILANTHROPIC FUND DONOR DID NOT PROVIDE BAD ADDRESS, WA 00000		501(C)3	1,148,427				DESIGNATED GIFT

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

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PHILANTHROPY NORTHWEST 2101 4TH AVE STE 650 SEATTLE, WA 98121	91-1110995	501(C)3	24,000				PROG INVST & DESG GIFTS
PIKE MARKET SENIOR CENTER 85 PIKE ST SUITE 200 SEATTLE, WA 98101	91-1034838	501(C)3	11,744				PROG INVST & DESG GIFTS

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

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PLANNED PARENTHOOD FEDERATION OF 123 WILLIAM ST10TH FLOOR NEW YORK, NY 10038	13-1644147	501(C)3	31,776				DESIGNATED GIFT
PLANNED PARENTHOOD OF THE GREAT NORTHWEST AND THE HAWAIIAN ISLANDS 2001 E MADISON ST SEATTLE, WA 98122	91-0686012	501(C)3	144,438				DESIGNATED GIFT

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

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PLUM COURT HOUSING ASSOCLLC 451 4TH AVE SOUTH KIRKLAND, WA 98033	91-2177127	501(C)3	10,930				PROGRAM INVESTMENT
PLUMMER YOUTH PROMISE INC 37 WINTER ISLAND RD SALEM, MA 01970	04-2104844	501(C)3	75,000				DESIGNATED GIFT

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

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PLYMOUTH HOUSING GROUP 2113 3RD AVE SEATTLE, WA 98121	91-1122621	501(C)3	5,368				DESIGNATED GIFT
POWERFUL VOICES 1620 18TH AVE 100 SEATTLE, WA 98122	91-1679907	501(C)3	38,267				PROGRAM INVESTMENT

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

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PRISONERS FOR CHRIST OUTREACH MINISTRIES PO BOX 1530 WOODINVILLE, WA 98072	94-3104375	501(C)3	8,849				DESIGNATED GIFT
PROVIDENCE CLASSICAL CHRISTIAN SCHOOL 18943 120TH AVE NE BOTHELL, WA 98011	91-1677725	501(C)3	13,500				DESIGNATED GIFT

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

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PUGET SOUND LABOR AGENCY 2800 FIRST AVE STE 118 SEATTLE, WA 98121		501(C)3	18,000				PROGRAM INVESTMENT
RAINIER ATHLETES 1201 THIRD AVENUE 49TH FLOOR SEATTLE, WA 98101	81-3280079	501(C)3	37,222				PROG INVST & DESG GIFTS

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

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RAINIER SCHOLARS 2100 24TH AVE S STE 360 SEATTLE, WA 98144	91-2045918	501(C)3	10,540				DESIGNATED GIFT
RAINIER VALLEY CORPS 1225 S WELLER ST SEATTLE, WA 98144	47-4257834	501(C)3	265,309				PROG INVST & DESG GIFTS

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RAINIER VALLEY FOOD BANK 4205 RAINIER AVE S SEATTLE, WA 98118	91-1500768	501(C)3	35,651				PROG INVST & DESG GIFTS
RED EAGLE SOARING PO BOX 20175 SEATTLE, WA 98102	91-1862731	501(C)3	74,667				PROGRAM INVESTMENT

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

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REFUGEE WOMENS ALLIANCE 4008 MARTIN LUTHER KING JR WAY S SEATTLE, WA 98108	91-1296964	501(C)3	124,425				PROG INVST & DESG GIFTS
RELATION INSURANCE SERVICES ATTN DIANN WILLIAMS OVERLAND PARK, KS 66225	27-2874018	501(C)3	33,835				PROGRAM INVESTMENT

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

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RENTON PARK CHAPEL 16760 128TH AVE SE RENTON, WA 98058	91-1286970	501(C)3	41,016				DESIGNATED GIFT
RENTON TECHNICAL COLLEGE FOUNDATION 3000 NE 4TH ST RENTON, WA 98056	91-1590751	501(C)3	22,000				PROGRAM INVESTMENT

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

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RONALD MCDONALD HOUSE CHARITIES OF WESTERN WASHINGTON & ALASKA 5130 40TH AVE NE SEATTLE, WA 98105	91-1061043	501(C)3	5,398				DESIGNATED GIFT
ROOTS YOUNG ADULT SHELTER 1415 NE 43RD ST SEATTLE, WA 98105	91-2110379	501(C)3	39,900				PROG INVST & DESG GIFTS

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
ROSLYN PRESBYTERIAN CHURCH PO BOX 247 ROSLYN, WA 98941	91-1225028	501(C)3	20,000				DESIGNATED GIFT
RRR PROPERTIES LLC 130 SW 112TH ST SEATTLE, WA 98146	91-1779719	501(C)3	17,444				PROGRAM INVESTMENT

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

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RWANDA GIRLS INITIATIVE PO BOX 325 MEDINA, WA 98039	26-3503023	501(C)3	83,700				DESIGNATED GIFT
SACRED HEART CHURCH 9460 NE 14TH ST CLYDE HILL, WA 98004	91-0595583	501(C)3	10,000				DESIGNATED GIFT

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

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SAFEWAY INC PO BOX 742918 LOS ANGELES, CA 90074	94-3019135	501(C)3	2,030,000				PROGRAM INVESTMENT
SAINT JOHN CHRYSOSTOM BYZANTINE CATHOLIC CHURCH SEATTLE 1305 S LANDER ST SEATTLE, WA 98144	47-1423615	501(C)3	8,280				DESIGNATED GIFT

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

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SALVATION ARMY - SEATTLE 111 QUEEN ANNE AVE N SEATTLE, WA 98109	91-0565002	501(C)3	158,335				PROG INVST & DESG GIFTS
SAMMAMISH PRESBYTERIAN CHURCH 22522 NE INGLEWOOD HILL RD REDMOND, WA 98053	91-1364639	501(C)3	12,960				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
SAMUEL & ALTHEA STROUM JEWISH COMMUNITY CENTER 3801 E MERCER WAY MERCER ISLAND, WA 98040	91-0635236	501(C)3	27,500				DESIGNATED GIFT
SAN JUAN ISLAND COMMUNITY FOUNDATION PO BOX 1352 FRIDAY HARBOR, WA 98250	91-1648730	501(C)3	10,000				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
SAVE THE CHILDREN FEDERATION INC 501 KINGS HWY E STE 400 FAIRFIELD, CT 06825	06-0726487	501(C)3	6,601				DESIGNATED GIFT
SCHOOL'S OUT WASHINGTON 801 23RD AVENUE SOUTH SUITE A SEATTLE, WA 98144	91-0482890	501(C)3	140,000				PROGRAM INVESTMENT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
SCHWAB CHARITABLE FUND 211 MAIN STREET SAN FRANCISCO, CA 94105	31-1640316	501(C)3	50,000				DESIGNATED GIFT
SEATTLE AQUARIUM SOCIETY-SEAS 1483 ALASKAN WAY PIER 59 SEATTLE, WA 98101	91-1189249	501(C)3	21,000				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
SEATTLE ART MUSEUM 1300 1ST AVE SEATTLE, WA 98101	91-0640788	501(C)3	22,000				DESIGNATED GIFT
SEATTLE CHILDRENS HOSPITAL FOUNDATION PO BOX 5371 MSC RC-507 SEATTLE, WA 98145	91-1156519	501(C)3	58,630				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
SEATTLE CHINATOWN INTERNATIONAL DIST PDA 409 MAYNARD AVE S SEATTLE, WA 98104	91-0968693	501(C)3	15,293				PROGRAM INVESTMENT
SEATTLE COLLEGES 1500 HARVARD AVENUE SEATTLE, WA 98122	91-0826872	501(C)3	160,000				PROGRAM INVESTMENT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
SEATTLE COMMUNITY LAW CENTER 1404 E YESLER WAY STE 203 SEATTLE, WA 98122	91-1866898	501(C)3	85,000				PROGRAM INVESTMENT
SEATTLE EDUCATION ACCESS 6920 ROOSEVELT WAY NE 355 SEATTLE, WA 98115	04-3602577	501(C)3	688,592				PROG INVST & DESG GIFTS

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
SEATTLE FOUNDATION 1601 FIFTH AVENUESTE 1900 SEATTLE, WA 98101	91-6013536	501(C)3	246,240				PROG INVST & DESG GIFTS
SEATTLE GOODWILL 1400 SOUTH LANE STREET SEATTLE, WA 98144	91-0568708	501(C)3	31,700				PROGRAM INVESTMENT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
SEATTLE MENNONITE CHURCH 3120 NE 125TH STREET SEATTLE, WA 98125	91-1447896	501(C)3	50,000				PROGRAM INVESTMENT
SEATTLE REPERTORY THEATRE PO BOX 900923 SEATTLE, WA 98109	91-0756535	501(C)3	12,250				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
SEATTLE SHAKESPEARE FESTIVAL 305 HARRISON ST SEATTLE, WA 98109	91-1512717	501(C)3	10,000				DESIGNATED GIFT
SEATTLE SYMPHONY ORCHESTRA INC PO BOX 21906 SEATTLE, WA 98111	91-0667412	501(C)3	5,500				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
SEATTLE UNIVERSITY FOUNDATION 901 12TH AVE ADMIN 120 SEATTLE, WA 98122	91-1130769	501(C)3	208,500				DESIGNATED GIFT
SEATTLES UNION GOSPEL MISSION 3800 S OTHELLO ST SEATTLE, WA 98118	91-0595029	501(C)3	47,199				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
SEREOLIPI NOMADIC EDUCATION FOUNDATION INC 104 WOOSTER STREET APT PHN NEW YORK, NY 10012	41-2189604	501(C)3	5,250				DESIGNATED GIFT
SHORELINE COMMUNITY COLLEGE FOUNDATION 16101 GREENWOOD AVE N ROOM 1005 SHORELINE, WA 98133	91-1265475	501(C)3	185,563				PROGRAM INVESTMENT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
SIGMA PHI EPSILON EDUCATIONAL FOUNDATION 310 SOUTH BOULEVARD RICHMOND, VA 23220	54-6053821	501(C)3	25,000				DESIGNATED GIFT
SKAGITONIANS TO PRESERVE FARMLAND PO BOX 2405 MOUNT VERNON, WA 98273	91-1484503	501(C)3	20,000				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
SNOQUALMIE VALLEY SHELTER SERVICES 7829 CENTER BLVD SE SUITE 239 SNOQUALMIE, WA 98065	81-5104730	501(C)3	60,000				PROGRAM INVESTMENT
SOCIAL SOLUTIONS GLOBAL INC DEPT 3935 DALLAS, TX 75312	52-2277149	501(C)3	25,292				PROGRAM INVESTMENT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
SOLID GROUND PO BOX 31066 SEATTLE, WA 98103	23-7421892	501(C)3	767,846				PROG INVST & DESG GIFTS
SOMALI YOUTH AND FAMILY CLUB 19550 INTERNATIONAL BLVD SUITE 106B 106B SEATAC, WA 98188	27-0377330	501(C)3	50,000				PROGRAM INVESTMENT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
SOUND CHILD CARE SOLUTIONS 1225 SOUTH WELLER STREET SEATTLE, WA 98144		501(C)3	60,000				PROGRAM INVESTMENT
SOUTH SOUND OUTREACH SERVICES 1106 MARTIN LUTHER KING JR WAY TACOMA, WA 98405	91-1741624	501(C)3	170,300				PROG INVST & DESG GIFTS

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
SOUTHEAST YOUTH & FAMILY SVCS 3722 S HUDSON ST SEATTLE, WA 98118		501(C)3	278,162				PROGRAM INVESTMENT
SOUTHSIDE BY VINTAGE 125 SW 112TH STREET SEATTLE, WA 98146	30-0946049	501(C)3	31,342				PROGRAM INVESTMENT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
SOUTHWEST VIPASSANA ASSOCIATION INC PO BOX 412 BEDFORD, TX 76095	75-2176826	501(C)3	5,500				DESIGNATED GIFT
SOUTHWEST YOUTH & FAMILY SVCS 4555 DELRIDGE WAY SW SEATTLE, WA 98106	91-1036750	501(C)3	1,235,665				PROG INVST & DESG GIFTS

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
SPOKANE HOOPFEST ASSOCIATION 421 W RIVERSIDE AVE STE 115 SPOKANE, WA 99201	91-1505510	501(C)3	7,500				DESIGNATED GIFT
SPORTS HUMANITARIAN GROUP INC 134 W 26TH ST RM 404 NEW YORK, NY 10001	13-4045245	501(C)3	150,000				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
ST JOSEPH PARISH 732 18TH AVE E SEATTLE, WA 98112	91-0588423	501(C)3	6,660				DESIGNATED GIFT
ST MATTHEWS EVANGELICAL LUTHERAN CHURCH 1700 EDMONDS AVE NE RENTON, WA 98056	91-1019006	501(C)3	13,000				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
ST MONICAS PARISH 4301 88TH AVE SE MERCER ISLAND, WA 98040	91-0724244	501(C)3	10,000				DESIGNATED GIFT
ST THOMAS MORE PARISH 6511 176TH ST SW LYNNWOOD, WA 98037	91-0754016	501(C)3	5,400				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
STERNO DELIVERY DEPT 3360 LOS ANGELES, CA 90084	27-2919377	501(C)3	15,219				PROGRAM INVESTMENT
SWEDISH MEDICAL CENTER FOUNDATION 747 BROADWAY SEATTLE, WA 98122	91-0983214	501(C)3	22,500				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
TEACH FOR AMERICA INC 25 BROADWAY 12TH FLOOR NEW YORK, NY 10004	13-3541913	501(C)3	12,000				DESIGNATED GIFT
THE AGAINST MALARIA FOUNDATION 301 W 20TH ST STE 300 KANSAS CITY, MO 64108	20-3069841	501(C)3	8,000				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount 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 CARTER CENTER INC 453 JOHN LEWIS FREEDOM PKWY NE ATLANTA, GA 30307	58-1454716	501(C)3	15,000				DESIGNATED GIFT
THE FRIENDSHIP CIRCLE OF WASHINGTON 2737 77TH AVE SE MERCER ISLAND, WA 98040	91-2173196	501(C)3	8,600				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount 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 HOUSING AUTHORITY COUNTY OF KING 600 ANDOVER PARK WEST SEATTLE, WA 98188	91-6000978	501(C)3	6,356				PROGRAM INVESTMENT
THE LEGACY INSTITUTE PO BOX 82746 KENMORE, WA 98028	91-2168381	501(C)3	5,401				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount 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 MOUNTAINS TO SOUND GREENWAY TR 2701 1ST AVE STE 240 SEATTLE, WA 98121	91-1531234	501(C)3	25,000				DESIGNATED GIFT
THE SEATTLE ACADEMY OF ARTS AND SCIENCES 1201 E UNION ST SEATTLE, WA 98122	91-1223580	501(C)3	200,001				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount 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 SHANNON SOUTH APARTMENTS LLC 6535 5TH PLACE S STE 200 SEATTLE, WA 98108	91-1167685	501(C)3	7,890				PROGRAM INVESTMENT
THE SOPHIA WAY 11061 NE 2ND ST SUITE 223 BELLEVUE, WA 98004	45-4084539	501(C)3	111,000				PROGRAM INVESTMENT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount 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 VALLEY CALVARY CHAPEL 954 CAPITAL ST OAK HARBOR, WA 98277	30-0440397	501(C)3	21,600				DESIGNATED GIFT
TRAC ASSOCIATES 215 SIXTH AVE N STE 100 SEATTLE, WA 98109	91-1247183	501(C)3	125,000				PROGRAM INVESTMENT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
TREEHOUSE 2100 24TH AVE S STE 200 SEATTLE, WA 98144	91-1425676	501(C)3	79,603				DESIGNATED GIFT
TRINITY EVANGELICAL LUTHERAN CHURCH 2324 LOMBARD AVE EVERETT, WA 98201	91-6036559	501(C)3	37,830				DESIGNATED GIFT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TRUSTEES FOR HARVARD UNIVERSITY 1033 MASSACHUSETTS AVE STE 3 CAMBRIDGE, MA 02138	53-0199180	501(C)3	100,000				DESIGNATED GIFT
TRUSTEES OF COLUMBIA UNIVERSITY IN THE CITY OF NEW YORK 615 E 131 ST NEW YORK, NY 10027	13-5598093	501(C)3	318,950				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
TRUSTEES OF PRINCETON UNIVERSITY PO BOX 291 PRINCETON, NJ 08544	22-3829468	501(C)3	10,000				DESIGNATED GIFT
TUKWILA PANTRY 3118 S 140TH STREET TUKWILA, WA 98168	75-2974441	501(C)3	8,000				PROGRAM INVESTMENT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount 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 INDIANS OF ALL TRIBES PO BOX 99100 SEATTLE, WA 98139	91-0889016	501(C)3	150,200				PROG INVST & DESG GIFTS
UNITED NATIONS FOUNDATION INC 1750 PENNSYLVANIA AVENUE NW SUITE WASHINGTON, DC 20006	58-2368165	501(C)3	9,000				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount 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 SERVICES ORGANIZATIONS 17801 INTERNATIONAL BLVD PMB 313 SEATAC, WA 98158	91-0573116	501(C)3	9,142				DESIGNATED GIFT
UNITED WAY OF CORINTH AND ALCORN COUNTY PO BOX 1104 CORINTH, MS 38835	64-0333592	501(C)3	24,000				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount 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 KITSAP COUNTY 645 4TH ST STE 101 BREMERTON, WA 98337	91-0623990	501(C)3	9,144				DESIGNATED GIFT
UNITED WAY OF PIERCE COUNTY 1501 PACIFIC AVE STE 400 TACOMA, WA 98402	91-0650669	501(C)3	21,850				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount 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 SNOHOMISH COUNTY 3120 MCDOUGALL AVE STE 200 EVERETT, WA 98201	91-0606507	501(C)3	18,480				DESIGNATED GIFT
UNIVERSITY DISTRICT FOOD BANK 5017 ROOSEVELT WAY NE SEATTLE, WA 98105	91-1224834	501(C)3	5,250				PROGRAM INVESTMENT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount 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 4300 ROOSEVELT WAY NE 3RD FLOOR SEATTLE, WA 98105	91-6001537	501(C)3	82,500				PROGRAM INVESTMENT
UNIVERSITY OF WASHINGTON FOUNDATION 4333 BROOKLYN AVE NE SEATTLE, WA 98195	94-3079432	501(C)3	873,243				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount 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 PRESBYTERIAN CHURCH 4540 15TH AVE NE SEATTLE, WA 98105	91-0564756	501(C)3	10,287				DESIGNATED GIFT
URBAN LEAGUE OF METROPOLITAN 105 14TH AVENUE SEATTLE, WA 98122	91-0575954	501(C)3	3,828,671				PROG INVST & DESG GIFTS

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount 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 COMMUNITY FOOD PO BOX 1205 VASHON, WA 98070	94-3165664	501(C)3	27,000				PROGRAM INVESTMENT
VESTA PROPERTY MANAGEMENT 1807 S 118TH ST BURIEN, WA 98168	91-1781090	501(C)3	42,049				PROGRAM INVESTMENT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
VILLAGE THEATRE 303 FRONT ST N ISSAQUAH, WA 98027	91-1077130	501(C)3	6,700				DESIGNATED GIFT
VINE MAPLE PLACE PO BOX 1092 MAPLE VALLEY, WA 98038	91-2082308	501(C)3	64,187				PROG INVST & DESG GIFTS

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
VOICES OF TOMORROW 13975 INTERURBAN AVENUE SOUTH TUKWILA, WA 98168	46-5211499	501(C)3	357,000				PROGRAM INVESTMENT
WAPIFASA 3722 S HUDSON STREET SEATTLE, WA 98118	91-1586900	501(C)3	100,000				PROGRAM INVESTMENT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount 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 STEM CENTER 210 S HUDSON ST SEATTLE, WA 98134	27-2133169	501(C)3	25,000				DESIGNATED GIFT
WASHINGTONS NATIONAL PARK FUND 1904 3RD AVE STE 400 SEATTLE, WA 98101	01-0869799	501(C)3	7,500				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
WELLSPRING FAMILY SERVICES 1900 RAINIER AVE S SEATTLE, WA 98144	91-0567261	501(C)3	3,186,470				PROG INVST & DESG GIFTS
WEST AFRICAN COMMUNITY COUNCIL 6322 44TH AVENUE SOUTH SEATTLE, WA 98118	46-2838797	501(C)3	216,360				PROGRAM INVESTMENT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
WEST SEATTLE FOOD BANK 3419 SW MORGAN ST SEATTLE, WA 98126	91-1464412	501(C)3	39,000				PROGRAM INVESTMENT
WESTSIDE BIBLE FELLOWSHIP 526 SE 9TH AVE HILLSBORO, OR 97123	93-0775006	501(C)3	8,970				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount 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 CENTER FOOD BANK 10829 8TH AVE SW SEATTLE, WA 98146	91-1167830	501(C)3	16,884				PROG INVST & DESG GIFTS
WHITEWATER CHURCH 1002 N MERIDIAN STE 100 PMB 297 PUYALLUP, WA 98371	81-2113314	501(C)3	7,200				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
WISCONSIN LUTHERAN CHILD AND FAMILY SERVICE INC W175N11120 STONEWOOD DR GERMANTOWN, WI 53022	39-1047224	501(C)3	6,000				DESIGNATED GIFT
WITHINREACH 155 NE 100TH ST SUITE 500 SEATTLE, WA 98125	91-1443685	501(C)3	150,000				PROGRAM INVESTMENT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
WOODLAND PARK ZOOLOGICAL SOCIETY 5500 PHINNEY AVE N SEATTLE, WA 98103	91-6070005	501(C)3	5,380				DESIGNATED GIFT
WORLD VISION PO BOX 9716 FEDERAL WAY, WA 98063	95-1922279	501(C)3	7,050				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
YEAR UP INC 45 MILK STREET 9TH FLOOR BOSTON, MA 02109	04-3534407	501(C)3	29,795				DESIGNATED GIFT
YMCA OF GREATER SEATTLE 909 4TH AVE SEATTLE, WA 98104	91-0482710	501(C)3	203,449				PROG INVST & DESG GIFTS

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
YOUNG LIFE 420 N CASCADE AVE COLORADO SPGS, CO 80903	84-0385934	501(C)3	12,606				DESIGNATED GIFT
YOUTH EASTSIDE SERVICES 999 164TH AVE NE BELLEVUE, WA 98008	91-0849093	501(C)3	213,637				DESIGNATED GIFT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
YOUTH THEATER NORTHWEST PO BOX 296 MERCER ISLAND, WA 98040	91-1261911	501(C)3	30,000				DESIGNATED GIFT
YOUTHCARE 2500 NE 54TH ST 100 SEATTLE, WA 98105	91-0917079	501(C)3	219,509				PROG INVST & DESG GIFTS

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount 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 OF SEATTLE KING COUNTY 1118 5TH AVE SEATTLE, WA 98101	91-0482890	501(C)3	732,555				PROG INVST & DESG GIFTS

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Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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 *www.irs.gov/Form990* for instructions and the latest information.**

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
UNITED WAY OF KING COUNTY

Employer identification number
91-0565555

Part I Questions Regarding Compensation

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

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

For each individual whose compensation must be reported 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.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 JONATHAN FINE PRESIDENT & CEO THRU 01/20	(i)	330,974	0	0	8,935	6,147	346,056	0
	(ii)	0	0	0	0	0	0	0
2 DARRELL POWELL COO	(i)	171,123	0	0	8,286	11,739	191,148	0
	(ii)	0	0	0	0	0	0	0
3 ERICA WILEY VP DEVELOPMENT	(i)	148,576	0	0	7,473	11,120	167,169	0
	(ii)	0	0	0	0	0	0	0
4 JIM YEARBY VP HUMAN RESOURCES	(i)	139,940	0	0	7,336	19,246	166,522	0
	(ii)	0	0	0	0	0	0	0
5 CHRIS HYNES VP BRAND MANAGEMENT	(i)	153,354	0	0	6,341	4,763	164,458	0
	(ii)	0	0	0	0	0	0	0
6 SARA LEVIN VP COMMUNITY SERVICES	(i)	144,288	0	0	7,470	11,119	162,877	0
	(ii)	0	0	0	0	0	0	0

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 1A	UNITED WAY OF KING COUNTY PAYS FOR AN ATHLETIC CLUB MEMBERSHIP FOR THE CHIEF EXECUTIVE OFFICER AND DOES NOT INCLUDE IT AS TAXABLE WAGES.

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SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
▶ Attach to Form 990.
▶Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
UNITED WAY OF KING COUNTY

Employer identification number
91-0565555

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	86	6,547,857	FAIR MARKET VALUE
10	Securities—Closely held stock				
11	Securities—Partnership, LLC, or trust interests				
12	Securities—Miscellaneous				
13	Qualified conservation contribution—Historic structures				
14	Qualified conservation contribution—Other				
15	Real estate—Residential				
16	Real estate—Commercial				
17	Real estate—Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ▶ (OTHER MISC.)	X	1	70,153	FAIR MARKET VALUE
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: 0

		Yes	No
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?		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?	Yes	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		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
PART I, COLUMN (B):	THE AMOUNTS REPORTED ON SCHEDULE M, PART I, COLUMN (B) REPRESENTS THE NUMBER OF CONTRIBUTIONS RECEIVED DURING THE YEAR.

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.
▶ Go to *www.irs.gov/Form990* for the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
UNITED WAY OF KING COUNTY

Employer identification number
91-0565555

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART I, LINE 6:	THE ESTIMATE OF 321,721 HOURS INCLUDES SERVICE BY VOLUNTEERS IN BOARD/COMMITTEE WORK, DAY OF SERVICE, DIRECT SERVICE, COMMUNITY IMPACT AND OTHER AREAS. HOURS REPRESENT ESTIMATES BY ORGANIZATION STAFF KNOWLEDGEABLE OF THE FUNCTIONS THE VOLUNTEERS ARE PERFORMING IN.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	CHRIS CAPOSSELA AND LEIGH TONER HAVE A FAMILY RELATIONSHIP.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE REVIEW OF THE FORM 990 IS INITIALLY COMPLETED BY THE CONTROLLER, SR. DIRECTOR OF FINAN CIAL OPERATIONS, AND THE COO. THE FORM 990 WILL BE PROVIDED TO BOARD MEMBERS TO REVIEW AND PROVIDE FEEDBACK, COMMENTS, OR SUGGESTIONS PRIOR TO FILING THE FORM 990 WITH THE IRS. THE FINAL RETURN WILL BE PROVIDED TO THE FINANCE COMMITTEE AT THE NEXT SCHEDULED MEETING.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	ANNUALLY, EACH BOARD MEMBER REVIEWS THE CONFLICT OF INTEREST AND ETHICS POLICY. AFTER THE REVIEW, EACH BOARD MEMBER SIGNS THE POLICY AND RETURNS IT TO THE EXECUTIVE OFFICE TO BE KE PT ON FILE. IF THERE IS FOUND TO BE A CONFLICT OF INTEREST, IT IS REPORTED TO THE BOARD PR ESIDENT AND THE CEO, AND THE BOARD MEMBER IS ASKED TO RECUSE HIM OR HERSELF FROM ANY VOTE ON THE MATTER.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	UNITED WAY OF KING COUNTY USES A UNITED WAY WORLD WIDE SURVEY (US). THE UWKC CEO'S PAY IS SET AT THE MEDIAN OF SALARIES FOR METRO UWS CEOS (ANNUAL BUDGET ABOVE 25 MILLION). ANNUAL BONUS IS SET BY THE BOARD AT THEIR DISCRETION USING ANNUAL UWKC PERFORMANCE. ANNUALLY, THE CEO'S SALARY IS REVIEWED BY THE EXECUTIVE COMMITTEE AND APPROVED BY THE BOARD. ANNUALLY, THE CHIEF OPERATING OFFICER'S AND THE VICE PRESIDENTS SALARIES ARE REVIEWED AND APPROVED B Y THE CHIEF EXECUTIVE OFFICER.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	CURRENT AUDITED FINANCIAL STATEMENTS AND THE CURRENT IRS FORM 990 ARE AVAILABLE ON OUR WEB SITE. OUR CONFLICT OF INTEREST POLICY AND OTHER GOVERNING DOCUMENTS ARE AVAILABLE UPON WRI TTEN REQUEST.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VIII, LINE 1F:	FORM 990, PART VIII, LINE 1F INCLUDES DONOR DESIGNATIONS WHICH ARE CONTRIBUTIONS DESIGNATE D TO NONPROFIT ORGANIZATIONS OTHER THAN UNITED WAY OF KING COUNTY. CAMPAIGN RESULTS $42,19 6,945 AS REPORTED ON FORM 990 LESS DONOR DESIGNATIONS $16,008,796 NET CAMPAIGN REVENUE $26 ,188,149

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART IX, LINE 1:	FORM 990, PART IX, LINE 1 INCLUDES DONOR DESIGNATIONS WHICH ARE CONTRIBUTIONS DESIGNATED T O NONPROFIT ORGANIZATIONS OTHER THAN UNITED WAY OF KING COUNTY. GRANT FUNDS AWARDED & DESI GNATED $46,855,851 AS REPORTED ON FORM 990 LESS DONOR DESIGNATIONS $16,008,796 NET FUNDS A WARDED $30,847,055