

PUBLIC DISCLOSURE INSTRUCTIONS

1. THE PUBLIC DISCLOSURE COPY MUST BE SIGNED AND DATED BY AN OFFICER OF THE ORGANIZATION.
2. THE “PUBLIC DISCLOSURE COPY” IS FOR YOUR CONVENIENCE.
 - PLEASE NOTE THAT WE HAVE REMOVED ALL INFORMATION THAT IS NOT OPEN TO PUBLIC INSPECTION.
3. PUBLIC DISCLOSURE REQUIREMENTS (FAILURE TO COMPLY MAY RESULT IN PENALTIES):
 - MAKE THE RETURN AVAILABLE FOR 3 YEARS AFTER THE DATE THE RETURN IS REQUIRED TO BE FILED OR IT IS ACTUALLY FILED, WHICHEVER IS LATER.
 - MAKE THE RETURN AVAILABLE FOR PUBLIC INSPECTION AT ITS PRINCIPAL, REGIONAL, OR DISTRICT OFFICES DURING REGULAR BUSINESS HOURS AND YOU MAY HAVE AN EMPLOYEE PRESENT IN THE ROOM.
 - ALLOW THE INDIVIDUAL MAKING THE INSPECTION TO TAKE NOTES FREELY AND TO MAKE A PHOTOCOPY OF THE DOCUMENTS FOR A REASONABLE FEE.
 - GENERALLY, YOU MUST RESPOND TO AN IN-PERSON REQUEST FOR COPIES OF RETURNS ON THE SAME DAY OF THE REQUEST. IF, DUE TO UNUSUAL CIRCUMSTANCES, YOU CANNOT PROVIDE THEM ON THE SAME DAY, YOU MUST PROVIDE THEM NO LATER THAN THE NEXT BUSINESS DAY FOLLOWING THE DAY THE UNUSUAL CIRCUMSTANCES CEASE TO EXIST OR THE FIFTH BUSINESS DAY AFTER THE DAY OF THE REQUEST, WHICHEVER OCCURS FIRST.
 - YOU MUST RESPOND TO A WRITTEN REQUEST FOR COPIES OF YOUR RETURN WITHIN 30 DAYS FROM THE DATE YOU RECEIVE THE REQUEST. IF YOU REQUIRE PAYMENT IN ADVANCE, YOU MUST PROVIDE THE DOCUMENTS 30 DAYS FROM THE DATE YOU RECEIVE PAYMENT. FOR REQUESTS MADE IN PERSON, YOU MUST ACCEPT PAYMENT BY CASH OR MONEY ORDER. FOR REQUESTS MADE IN WRITING, YOU MUST ACCEPT PAYMENT BY CERTIFIED CHECK, MONEY ORDER, PERSONAL CHECK OR CREDIT CARD. IN BOTH INSTANCES, YOU MAY ACCEPT OTHER TYPES OF PAYMENT AS WELL.
 - YOU ARE NOT REQUIRED TO RESPOND TO REQUESTS FOR COPIES OF YOUR RETURN IF YOU HAVE MADE IT “WIDELY AVAILABLE” BY POSTING IT ON A WORLD WIDE WEB PAGE THAT YOU ESTABLISH AND MAINTAIN OR, AS PART OF A DATABASE OF SIMILAR DOCUMENTS OF OTHER TAX-EXEMPT ORGANIZATIONS THAT ANOTHER ENTITY ESTABLISHES AND MAINTAINS.

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2021

Department of the Treasury
Internal Revenue Service

▶ 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.

Open to Public Inspection

A For the **2021** calendar year, or tax year beginning **JUL 1, 2021** and ending **JUN 30, 2022**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> 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 F Name and address of principal officer: GORDON A. MCHENRY, JR. SAME AS C ABOVE	D Employer identification number 91-0565555 E Telephone number 206-461-3700 G Gross receipts \$ 94,470,871. H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions H(c) Group exemption number ▶
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
J Website: ▶ WWW.UWKC.ORG		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1921
		M State of legal domicile: WA

Part I Summary

	1	Briefly describe the organization's mission or most significant activities: WE BRING THE COMMUNITY TOGETHER TO WORK TOWARD RACIAL JUSTICE BY SUPPORTING OUR NEIGHBORS AND		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
Activities & Governance	3	Number of voting members of the governing body (Part VI, line 1a)	3	39
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	39
	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	298
	6	Total number of volunteers (estimate if necessary)	6	2821
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	7b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
	Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year
9		Program service revenue (Part VIII, line 2g)	99,346,172.	92,033,361.
10		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	241,242.	217,968.
11		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	389,507.	1,415,331.
12		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-102,868.	-48,934.
12			99,874,053.	93,617,726.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	88,105,905.	72,239,865.
	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)	12,337,801.	15,439,204.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	16b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 5,780,338.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	3,873,314.	4,933,779.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	104,317,020.	92,612,848.
	19	Revenue less expenses. Subtract line 18 from line 12	-4,442,967.	1,004,878.
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21	Total liabilities (Part X, line 26)	76,147,474.	72,579,912.
	22	Net assets or fund balances. Subtract line 21 from line 20	11,350,793.	10,195,114.
	22		64,796,681.	62,384,798.

Part II Signature Block

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

Sign Here	Signature of officer GORDON A. MCHENRY, JR., PRESIDENT & CEO Type or print name and title	Date
Paid Preparer Use Only	Print/Type preparer's name SARA ELIZABETH H. JONES Preparer's signature SARA ELIZABETH H. JONES Firm's name ▶ CLARK NUBER, PS Firm's address ▶ 10900 NE 4TH STREET, SUITE 1400 BELLEVUE, WA 98004	Date 05/15/23 Firm's EIN ▶ 91-1194016 Phone no. 425-454-4919
	Check if self-employed <input type="checkbox"/> PTIN P00235495	

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 [X]

1 Briefly describe the organization's mission: WE BRING THE COMMUNITY TOGETHER TO WORK TOWARD RACIAL JUSTICE BY SUPPORTING OUR NEIGHBORS AND TRANSFORMING INEQUITABLE SYSTEMS.

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 [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code:) (Expenses \$ 38,104,646. including grants of \$ 34,364,527.) (Revenue \$) COVID RESPONSE & RENTAL ASSISTANCE: AS A RESULT OF THE COVID-19 PANDEMIC, THE ORGANIZATION HAS RECEIVED SIGNIFICANT GOVERNMENT FUNDING TO PROVIDE RENTAL ASSISTANCE. MORE THAN 7,000 HOUSEHOLDS RECEIVED RENTAL ASSISTANCE PROVIDING UP TO 9 MONTHS OF BACK RENT AND 3 MONTHS FORWARD RENT TO KEEP FAMILIES IN THEIR HOMES. 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, FUNDED BY PRIVATE DONATIONS. THE ORGANIZATION ALSO CONTINUED TO SUPPORT THE BLACK COMMUNITY BUILDING FUND AND THE INDIGENOUS COMMUNITIES FUND WHICH PUTS THE DECISION-MAKING POWER FOR INVESTING THE FUNDS INTO THE HANDS OF THE COMMUNITIES IMPACTED BY THOSE FUNDING DECISIONS.

4b (Code:) (Expenses \$ 11,798,160. including grants of \$ 7,021,338.) (Revenue \$) FINANCIAL STABILITY: UNITED WAY'S FREE TAX PREP CAMPAIGN CAME BACK TO IN-PERSON SERVICE THIS YEAR. 340 VOLUNTEERS FILED 6,350 TAX RETURNS MAXIMIZING TAX CREDITS TO BRING LOW-INCOME HOUSEHOLDS MORE THAN \$11 MILLION IN RETURNS. OUR HOME GROCERY DELIVERY PROGRAM BROUGHT CULTURALLY SPECIFIC BOXES OF FOOD TO 6,000 HOUSEHOLDS EVERY WEEK TO FIGHT HUNGER, DISTRIBUTING MORE THAN 5.5 MILLION POUNDS OF FOOD. UNITED WAY ALSO HELPED MORE THAN SEVENTY-FIVE SCHOOL DISTRICTS IMPLEMENT BREAKFAST AFTER THE BELL PROVIDING MORE THAN 49,000 ADDITIONAL STUDENTS SCHOOL BREAKFASTS.

4c (Code:) (Expenses \$ 8,984,021. including grants of \$ 8,229,932.) (Revenue \$) STUDENTS GRADUATE EARLY LEARNING: MORE THAN 1,000 FAMILIES WERE ENGAGED IN THE PARENTCHILD+, A TWO-YEAR HOME VISITING PROGRAM THAT PREPARES LOW-INCOME CHILDREN AGES 2-4 TO BE READY TO LEARN WHEN THEY ENTER KINDERGARTEN AND THEIR PARENTS TO BE THEIR FIRST AND BEST TEACHERS. PARTICIPANTS ARE THIRTY PERCENTAGE POINTS MORE LIKELY TO GRADUATE HIGH SCHOOL.

4d Other program services (Describe on Schedule O.) (Expenses \$ 24,100,494. including grants of \$ 22,624,068.) (Revenue \$ 217,968.)

4e Total program service expenses 82,987,321.

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)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
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? <i>If "Yes," complete Schedule C, Part II</i>	X	
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 Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
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? <i>If "Yes," complete Schedule D, Part IV</i>	X	
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
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? <i>If "Yes," complete Schedule D, Part VI</i>	X	
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? <i>If "Yes," complete Schedule D, Part VII</i>	X	
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? <i>If "Yes," complete Schedule D, Part VIII</i>		X
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? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
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)? <i>If "Yes," complete Schedule D, Part X</i>		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
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? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
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? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
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? <i>If "Yes," complete Schedule G, Part I.</i> See instructions		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	

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

Note: All Form 990 filers are required to complete Schedule O

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		
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	

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

Table with columns for question number, question text, and Yes/No columns. Includes questions 2a through 17 regarding employee counts, tax returns, unrelated business income, foreign accounts, prohibited transactions, and charitable contributions.

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

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year (39); 1b Enter the number of voting members included on line 1a, above, who are independent (39); 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? (X); 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? (X); 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? (X); 5 Did the organization become aware during the year of a significant diversion of the organization's assets? (X); 6 Did the organization have members or stockholders? (X); 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? (X); 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? (X); 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? (X); b Each committee with authority to act on behalf of the governing body? (X); 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 on Schedule O (X).

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? (X); 10b 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?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? (X); 11b Describe on 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 (X); 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? (X); 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done (X); 13 Did the organization have a written whistleblower policy? (X); 14 Did the organization have a written document retention and destruction policy? (X); 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 (X); b Other officers or key employees of the organization (X); If "Yes" to line 15a or 15b, describe the process on 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? (X); 16b 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?

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 Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
[X] Own website [X] Another's website [X] Upon request [] Other (explain on Schedule O)
19 Describe on 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 - 206-461-3700
720 SECOND AVENUE, SEATTLE, WA 98104

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 the 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and 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 the 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 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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) GORDON MCHENRY, JR. PRESIDENT & CEO	40.00			X			398,000.	0.	31,234.	
(2) CHRIS HYNES CHIEF MARKETING OFFICER	40.00					X	176,600.	0.	33,127.	
(3) SARA LEVIN CHIEF IMPACT OFFICER	40.00					X	186,325.	0.	17,959.	
(4) ERICA WILEY CHIEF PHILANTHROPY OFFICER	40.00					X	183,263.	0.	15,964.	
(5) JENNIFER JOHNSTON CHIEF FINANCIAL OFFICER	40.00			X			181,376.	0.	9,353.	
(6) ELIZABETH STODOMINGO CHIEF HUMAN RESOURCES OFFICER	40.00					X	180,809.	0.	6,622.	
(7) JIMMY YEARBY VP HUMAN RESOURCES	40.00					X	158,074.	0.	20,281.	
(8) DAVE BURMAN BOARD CHAIR	1.00	X		X			0.	0.	0.	
(9) MAUD DAUDON VICE CHAIR	1.00	X		X			0.	0.	0.	
(10) BRENT BEARDALL TREASURER	1.00	X		X			0.	0.	0.	
(11) JONATHAN BURKS SECRETARY	1.00	X		X			0.	0.	0.	
(12) CAROL NELSON IMMEDIATE PAST CHAIR	1.00	X		X			0.	0.	0.	
(13) AMBIKA SINGH DIRECTOR	1.00	X					0.	0.	0.	
(14) BO LEE DIRECTOR	1.00	X					0.	0.	0.	
(15) BRADY WALKINSHAW DIRECTOR	1.00	X					0.	0.	0.	
(16) BREE KAMEENUI-RAMIREZ DIRECTOR	1.00	X					0.	0.	0.	
(17) BRIAN HALL DIRECTOR	1.00	X					0.	0.	0.	

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 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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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			
(18) CARMEN BEST DIRECTOR	1.00	X						0.	0.	0.
(19) CRAIG GRYNIEWICZ DIRECTOR	1.00	X						0.	0.	0.
(20) DENISE STIFFARM DIRECTOR	1.00	X						0.	0.	0.
(21) DOUG BALDWIN DIRECTOR	1.00	X						0.	0.	0.
(22) EDUARDO M. PENALVER DIRECTOR	1.00	X						0.	0.	0.
(23) ERIC PETTIGREW DIRECTOR	1.00	X						0.	0.	0.
(24) FRED RIVERA DIRECTOR	1.00	X						0.	0.	0.
(25) JEFF BRADLEY DIRECTOR	1.00	X						0.	0.	0.
(26) JONATHAN SPOSATO DIRECTOR	1.00	X						0.	0.	0.
1b Subtotal								1,464,447.	0.	134,540.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								1,464,447.	0.	134,540.

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 27

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

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
NONE		

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

SEE PART VII, SECTION A CONTINUATION SHEETS

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 line)	(C) Position (check all that apply)						(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			
(27) KATE BEHNCKEN DIRECTOR	1.00	X					0.	0.	0.	
(28) KATHY SURACE-SMITH DIRECTOR	1.00	X					0.	0.	0.	
(29) LEIGH TONER DIRECTOR	1.00	X					0.	0.	0.	
(30) LUIS MASIERI DIRECTOR	1.00	X					0.	0.	0.	
(31) MALA RAMAN DIRECTOR	1.00	X					0.	0.	0.	
(32) MICHAEL GREER DIRECTOR	1.00	X					0.	0.	0.	
(33) MICHELLE MERRIWEATHER DIRECTOR	1.00	X					0.	0.	0.	
(34) MIKA YAMAMOTO DIRECTOR	1.00	X					0.	0.	0.	
(35) NATHAN JAMES DIRECTOR	1.00	X					0.	0.	0.	
(36) NICOLE GRANT DIRECTOR	1.00	X					0.	0.	0.	
(37) PETER ORSER DIRECTOR	1.00	X					0.	0.	0.	
(38) RACHEL SMITH DIRECTOR	1.00	X					0.	0.	0.	
(39) RODRIGO LOPEZ DIRECTOR	1.00	X					0.	0.	0.	
(40) SANDRA MADRID DIRECTOR	1.00	X					0.	0.	0.	
(41) SCOTT MEDEN DIRECTOR	1.00	X					0.	0.	0.	
(42) SEAN GOODE DIRECTOR	1.00	X					0.	0.	0.	
(43) SHAWN JONES DIRECTOR	1.00	X					0.	0.	0.	
(44) SHKELQIM KELMENDI DIRECTOR	1.00	X					0.	0.	0.	
(45) SHOUAN PAN DIRECTOR	1.00	X					0.	0.	0.	
(46) STEVE HOOPER, JR. DIRECTOR	1.00	X					0.	0.	0.	
Total to Part VII, Section A, line 1c										

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 line)	(C) Position (check all that apply)						(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			
(47) TIFFANY JOHNSON DIRECTOR	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	80,000.				
	d Related organizations	1d					
	e Government grants (contributions)	1e	47,695,504.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	44,257,857.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 2,204,736.				
	h Total. Add lines 1a-1f			92,033,361.			
Program Service Revenue	2 a DESIGNATION PROCESSING	Business Code					
		561000	132,185.	132,185.			
	b EDUCATION & OUTREACH	900099	83,133.	83,133.			
	c TRAINING	900099	2,650.	2,650.			
	d						
	e						
	f All other program service revenue						
g Total. Add lines 2a-2f			217,968.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		142,722.			142,722.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	6a	(i) Real				
			(ii) Personal				
	b Less: rental expenses	6b					
	c Rental income or (loss)	6c					
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities				
			(ii) Other	2,049,785.			
	b Less: cost or other basis and sales expenses	7b	777,176.				
	c Gain or (loss)	7c	1,272,609.				
d Net gain or (loss)			1,272,609.		1,272,609.		
8 a Gross income from fundraising events (not including \$ 80,000. of contributions reported on line 1c). See Part IV, line 18	8a		22,735.				
b Less: direct expenses	8b	75,969.					
c Net income or (loss) from fundraising events			-53,234.		-53,234.		
9 a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a 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	11 a OTHER REVENUE	Business Code					
		900099	4,300.			4,300.	
	b						
	c						
	d All other revenue						
e Total. Add lines 11a-11d			4,300.				
12 Total revenue. See instructions			93,617,726.	217,968.	0.	1,366,397.	

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 X

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 ...	56,365,785.	56,365,785.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	15,874,080.	15,874,080.		
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	620,390.	320,738.	101,299.	198,353.
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	12,114,162.	6,262,951.	1,978,043.	3,873,168.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	315,906.	126,224.	82,511.	107,171.
9 Other employee benefits	1,306,456.	541,120.	350,525.	414,811.
10 Payroll taxes	1,082,290.	664,657.	17,667.	399,966.
11 Fees for services (nonemployees):				
a Management				
b Legal	4,520.	1,806.	1,180.	1,534.
c Accounting	91,521.	16,474.	61,319.	13,728.
d Lobbying	87,500.	74,119.	6,577.	6,804.
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	37,703.		37,703.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	669,344.	423,812.	127,410.	118,122.
12 Advertising and promotion	705,476.	402,434.	148,886.	154,156.
13 Office expenses	188,234.	85,194.	44,359.	58,681.
14 Information technology	477,392.	245,072.	114,409.	117,911.
15 Royalties				
16 Occupancy	148,344.	46,640.	79,910.	21,794.
17 Travel	185,097.	129,788.	25,746.	29,563.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	17,521.	11,832.	2,357.	3,332.
20 Interest				
21 Payments to affiliates	625,216.	529,605.	46,998.	48,613.
22 Depreciation, depletion, and amortization	521,388.	93,850.	349,330.	78,208.
23 Insurance	83,604.	16,714.	48,309.	18,581.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a EQUIPMENT RENTAL & MAIN	471,971.	240,187.	119,508.	112,276.
b SPECIAL EVENTS	226,195.	162,542.	63,653.	
c SUPPLIES	193,500.	262,565.	13,411.	-82,476.
d NEWSLETTERS & PUBLICATI	101,015.	63,922.	17,677.	19,416.
e All other expenses	98,238.	25,210.	6,402.	66,626.
25 Total functional expenses. Add lines 1 through 24e	92,612,848.	82,987,321.	3,845,189.	5,780,338.
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 X

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	1,332,739.	1	0.
	2 Savings and temporary cash investments	10,512,931.	2	7,305,815.
	3 Pledges and grants receivable, net	34,085,477.	3	34,463,596.
	4 Accounts receivable, net	815,550.	4	3,826,410.
	5 Loans and other receivables from 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	2,000.	8	2,000.
	9 Prepaid expenses and deferred charges	104,255.	9	92,258.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 19,711,464.		
	b Less: accumulated depreciation	10b 12,737,795.		
	11 Investments - publicly traded securities	7,131,319.	10c	6,973,669.
	12 Investments - other securities. See Part IV, line 11	6,378,646.	11	6,378,646.
	13 Investments - program-related. See Part IV, line 11	15,781,285.	12	13,192,277.
	14 Intangible assets		13	
	15 Other assets. See Part IV, line 11	3,272.	14	
16 Total assets. Add lines 1 through 15 (must equal line 33)	76,147,474.	15	345,241.	
		16	72,579,912.	
Liabilities	17 Accounts payable and accrued expenses	3,160,541.	17	3,272,040.
	18 Grants payable	4,574,366.	18	815,035.
	19 Deferred revenue	0.	19	3,341,460.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	3,595,131.	21	2,754,623.
	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		24	
	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	20,755.	25	11,956.
	26 Total liabilities. Add lines 17 through 25	11,350,793.	26	10,195,114.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	33,455,945.	27	30,340,757.
	28 Net assets with donor restrictions	31,340,736.	28	32,044,041.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> 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	64,796,681.	32	62,384,798.
33 Total liabilities and net assets/fund balances	76,147,474.	33	72,579,912.	

Part XI Reconciliation 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	93,617,726.
2	Total expenses (must equal Part IX, column (A), line 25)	2	92,612,848.
3	Revenue less expenses. Subtract line 2 from line 1	3	1,004,878.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	64,796,681.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-3,416,761.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	62,384,798.

Part XII Financial Statements and Reporting

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

- 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 on Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant? _____
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant? _____
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 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? _____
If the organization changed either its oversight process or selection process during the tax year, explain on 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? _____
- 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 on Schedule O and describe any steps taken to undergo such audits _____

	Yes	No
2a		X
2b	X	
2c	X	
3a	X	
3b	X	

SCHEDULE A
(Form 990)

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

2021

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).)
- 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 **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations _____

g Provide the following information about the supported organization(s).

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

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	70,136,178.	61,463,331.	79,997,758.	99,346,172.	91,856,794.	402,800,233.
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	70,136,178.	61,463,331.	79,997,758.	99,346,172.	91,856,794.	402,800,233.
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)						14,406,213.
6 Public support. Subtract line 5 from line 4.						388,394,020.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7 Amounts from line 4	70,136,178.	61,463,331.	79,997,758.	99,346,172.	91,856,794.	402,800,233.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	719,424.	310,169.	245,806.	125,820.	142,722.	1,543,941.
9 Net income from unrelated business activities, whether or not the business is regularly carried on		47,303.				47,303.
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.	63,093.	4,300.	132,388.
11 Total support. Add lines 7 through 10						404,523,865.
12 Gross receipts from related activities, etc. (see instructions)					12	1,124,949.
13 First 5 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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f))	14	96.01	%
15 Public support percentage from 2020 Schedule A, Part II, line 14	15	75.60	%
16a 33 1/3% support test - 2021. 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			<input checked="" type="checkbox"/>
b 33 1/3% support test - 2020. 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			<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2021. 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			<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2020. 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			<input type="checkbox"/>
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			<input type="checkbox"/>

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

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

Section A. Public Support

Table with 7 columns: (a) 2017, (b) 2018, (c) 2019, (d) 2020, (e) 2021, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total. Add lines 1 through 5; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 8 Public support. (Subtract line 7c from line 6.)

Section B. Total Support

Table with 7 columns: (a) 2017, (b) 2018, (c) 2019, (d) 2020, (e) 2021, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included on 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 5 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

Table with 2 columns: Description, Percentage. Row 15: Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f)) 15%. Row 16: Public support percentage from 2020 Schedule A, Part III, line 15 16%.

Section D. Computation of Investment Income Percentage

Table with 2 columns: Description, Percentage. Row 17: Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f)) 17%. Row 18: Investment income percentage from 2020 Schedule A, Part III, line 17 18%.

19a 33 1/3% support tests - 2021. 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 - 2020. 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 in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, 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? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c 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).</i>		
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?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
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? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

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 on lines 11b and 11c below, the governing body of a supported organization?		
b A family member of a person described on line 11a above?		
c A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		
11a		
11b		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>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 officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
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? <i>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.</i>		
1		
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)? <i>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).</i>		
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?		
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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
1		
2		
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 <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).		
2 Activities Test. Answer lines 2a and 2b below.		
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? <i>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.</i>	Yes	No
b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in 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.</i>		
3 Parent of Supported Organizations. Answer lines 3a and 3b below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No" provide details in Part VI.</i>		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
2a		
2b		
3a		
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):		
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 (<i>explain in detail in Part VI</i>):		
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 0.015 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 0.035.	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 0.85 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	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2021 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1 Distributable amount for 2021 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2021 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2021			
a From 2016			
b From 2017			
c From 2018			
d From 2019			
e From 2020			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2021 distributable amount			
i Carryover from 2016 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2021 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2021 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2022. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2017			
b Excess from 2018			
c Excess from 2019			
d Excess from 2020			
e Excess from 2021			

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.)

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

OTHER INCOME

2017 AMOUNT: \$ 52,954.

2018 AMOUNT: \$ 7,297.

2019 AMOUNT: \$ 4,744.

2020 AMOUNT: \$ 63,093.

2021 AMOUNT: \$ 4,300.

Schedule B
(Form 990)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990 or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2021

Name of the organization

UNITED WAY OF KING COUNTY

Employer identification number

91-0565555

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization UNITED WAY OF KING COUNTY	Employer identification number 91-0565555
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<hr/> <hr/> <hr/>	\$ 28,630,152.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	<hr/> <hr/> <hr/>	\$ 10,875,650.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	<hr/> <hr/> <hr/>	\$ 4,131,490.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	<hr/> <hr/> <hr/>	\$ 3,553,276.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	<hr/> <hr/> <hr/>	\$ 3,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	<hr/> <hr/> <hr/>	\$ 1,888,396.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization UNITED WAY OF KING COUNTY	Employer identification number 91-0565555
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____

Name of organization UNITED WAY OF KING COUNTY	Employer identification number 91-0565555
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE C
(Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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.**

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 organization <p style="text-align: center;">UNITED WAY OF KING COUNTY</p>	Employer identification number <p style="text-align: center;">91-0565555</p>
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political campaign activity expenditures ► \$ _____
- 3 Volunteer hours for political campaign activities _____

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-.

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 (grassroots lobbying)															
b Total lobbying expenditures to influence a legislative body (direct lobbying)		123,895.													
c Total lobbying expenditures (add lines 1a and 1b)		123,895.													
d Other exempt purpose expenditures		92,564,922.													
e Total exempt purpose expenditures (add lines 1c and 1d)		92,688,817.													
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.		1,000,000.													
<table border="1" style="width: 100%;"> <thead> <tr> <th style="width: 50%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width: 50%;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g Grassroots nontaxable amount (enter 25% of line 1f)		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?			<input type="checkbox"/> Yes <input type="checkbox"/> No												

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(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	54,356.	60,442.	66,845.	123,895.	305,538.
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)).

	(a)		(b)
	Yes	No	Amount
<i>For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.</i>			
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 campaign activity 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.

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

2021

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.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two questions about donor property and grant fund usage.

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

Form for Part II Conservation Easements. Includes checkboxes for various purposes (land for public use, natural habitat, open space, historic area, historic structure) and a table for lines 2a-2d (Total number, acreage, certified historic structures, and National Register listings).

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.

Form for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Includes questions about reporting requirements and tables for revenue and assets included.

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 make 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 program
 - 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 on 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	15,781,285.	12,456,046.	12,320,718.	12,270,674.	11,564,226.
b Contributions					
c Net investment earnings, gains, and losses	2,022,900.	3,855,237.	638,302.	543,742.	1,307,784.
d Grants or scholarships					
e Other expenditures for facilities and programs	528,405.	497,932.	473,199.	464,824.	531,998.
f Administrative expenses	37,703.	32,066.	29,775.	28,874.	69,338.
g End of year balance	17,238,077.	15,781,285.	12,456,046.	12,320,718.	12,270,674.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment 53.0200 %
 - b Permanent endowment 46.9800 %
 - c Term endowment .0000 %
- 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 | X | |
| (ii) Related organizations | | X |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> | | |
- 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		8,211,377.	3,669,291.	4,542,086.
c Leasehold improvements				
d Equipment		9,148,087.	9,068,504.	79,583.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				6,973,669.

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	13,192,277.	END-OF-YEAR MARKET VALUE
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶	13,192,277.	

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. (Col. (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	11,956.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	11,956.

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 FASB 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	76,707,255.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	-3,416,761.
b	Donated services and use of facilities	2b	5,845.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	-13,537,821.
e	Add lines 2a through 2d	2e	-16,948,737.
3	Subtract line 2e from line 1	3	93,655,992.
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	37,703.
b	Other (Describe in Part XIII.)	4b	-75,969.
c	Add lines 4a and 4b	4c	-38,266.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	93,617,726.

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	79,119,138.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	5,845.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	75,969.
e	Add lines 2a through 2d	2e	81,814.
3	Subtract line 2e from line 1	3	79,037,324.
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	37,703.
b	Other (Describe in Part XIII.)	4b	13,537,821.
c	Add lines 4a and 4b	4c	13,575,524.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	92,612,848.

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.

PART IV, LINE 2B:

DONOR DESIGNATIONS AND CONTRIBUTIONS THAT ARE DESIGNATED TO NONPROFIT

ORGANIZATIONS OTHER THAN TO UNITED WAY OF KING COUNTY.

PART V, LINE 4:

ENDOWMENT DISTRIBUTIONS ARE USED FOR ADMINISTRATIVE EXPENSES AND PROGRAM

SERVICES AS DICTATED BY THE ENDOWMENT AGREEMENTS.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

PASS THROUGH DONOR DESIGNATIONS -13,537,821.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

Part XIII Supplemental Information (continued)

FUNDRAISING EXPENSES -75,969.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

FUNDRAISING EXPENSES 75,969.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

PASS THROUGH DONOR DESIGNATIONS 13,537,821.

**SCHEDULE G
(Form 990)**

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

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

2021

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.

**Open to Public
Inspection**

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

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 <input type="checkbox"/> Mail solicitations | e <input type="checkbox"/> Solicitation of non-government grants |
| b <input type="checkbox"/> Internet and email solicitations | f <input type="checkbox"/> Solicitation of government grants |
| c <input type="checkbox"/> Phone solicitations | g <input type="checkbox"/> Special fundraising events |
| d <input type="checkbox"/> In-person solicitations | |

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

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?		(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
		Yes	No			
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	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		EAT, DRINK & BE GENEROUS (event type)	(event type)	NONE (total number)	
Revenue	1	Gross receipts	102,735.		102,735.
	2	Less: Contributions	80,000.		80,000.
	3	Gross income (line 1 minus line 2)	22,735.		22,735.
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs			
	7	Food and beverages	44,267.		44,267.
	8	Entertainment	1,000.		1,000.
	9	Other direct expenses	30,702.		30,702.
	10	Direct expense summary. Add lines 4 through 9 in column (d)			
11	Net income summary. Subtract line 10 from line 3, column (d)				-53,234.

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	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> 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 to be 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.

**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

2021

**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.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
ABUSED DEAF WOMEN'S ADVOCACY SERVICES - 8623 ROOSEVELT WAY NE - SEATTLE, WA 98115	91-1339173	501(C)(3)	9,206.	0.			PROGRAMMATIC INVESTMENT
AFGHAN HEALTH INITIATIVE 30607 134TH AVE SE AUBURN, WA 98092	85-0906399	501(C)(3)	35,750.	0.			PROGRAMMATIC INVESTMENT
AGE UP 3801 BEACON AVE S SEATTLE, WA 98108	45-5092355	501(C)(3)	191,821.	0.			PROGRAMMATIC INVESTMENT
AMERICAN NATIONAL RED CROSS PO BOX 73857 CHICAGO, IL 60673-7857	53-0196605	501(C)(3)	6,255.	0.			DESIGNATED GIFT
AMPOWERING 11878 175TH PL NE REDMOND, WA 98052	82-1392485	501(C)(3)	24,500.	0.			PROGRAMMATIC INVESTMENT
ASIAN COUNSELING AND REFERRAL SERVICE - 3639 MARTIN LUTHER KING JR WAY S - SEATTLE, WA 98144-5847	91-0916176	501(C)(3)	287,539.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED GIFT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 216.

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

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

Schedule I (Form 990) 2021

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ATLANTIC STREET CENTER 2103 S ATLANTIC ST SEATTLE, WA 98144	91-0568710	501(C)(3)	877,148.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED GIFT
AUBURN FOOD BANK, THE P.O. BOX 464 AUBURN, WA 98071-0464	91-1215485	501(C)(3)	40,500.	0.			PROGRAMMATIC INVESTMENT
AUBURN SCHOOL DISTRICT NO.408 915 4TH ST NE AUBURN, WA 98002-4492	91-6001640	GOVERNMENT	27,500.	0.			PROGRAMMATIC INVESTMENT
BACKPACK BRIGADE 4111 MADISON ST. #21 SEATTLE, WA 98112	47-4086877	501(C)(3)	50,000.	0.			PROGRAMMATIC INVESTMENT
BALLARD FOOD BANK 5130 LEARY AVE NW SEATTLE, WA 98107-4819	91-1428805	501(C)(3)	19,226.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED GIFT
BASEBALL BEYOND BORDERS PO BOX 5555 KENT, WA 98064	46-5283802	501(C)(3)	65,000.	0.			PROGRAMMATIC INVESTMENT
BELLEVUE BOYS & GIRLS CLUB 209 100TH AVE NE BELLEVUE, WA 98004-5625	91-0776451	501(C)(3)	8,500.	0.			DESIGNATED GIFT
BELLEVUE COLLEGE 3000 LANDERHOLM CIRCLE SE BELLEVUE, WA 98007-6484	91-0819265	501(C)(3)	83,700.	0.			PROGRAMMATIC INVESTMENT
BELLEVUE COLLEGE FOUNDATION 3000 LANDERHOLM CIRCLE SE NO A1 BELLEVUE, WA 98007-6484	91-1051671	501(C)(3)	10,000.	0.			DESIGNATED GIFT

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BELLWETHER HOUSING 1615 19TH AVE #100 SEATTLE, WA 98122	91-1116960	501(C)(3)	15,367.	0.			PROGRAMMATIC INVESTMENT
BLACK DIAMOND COMMUNITY CENTER PO BOX 480 BLACK DIAMOND, WA 98010	91-0569878	501(C)(3)	15,050.	0.			PROGRAMMATIC INVESTMENT
BOYER CHILDRENS CLINIC 1850 BOYER AVE E SEATTLE, WA 98112-2922	91-1316838	501(C)(3)	5,078.	0.			DESIGNATED GIFT
BREAST CANCER RESEARCH FOUNDATION INC - 28 WEST 44TH STREET SUITE 609 - NEW YORK, NY 10036-7422	13-3727250	501(C)(3)	20,000.	0.			DESIGNATED GIFT
BUILDING CHANGES 1200 12TH AVE S, SUITE 1200 SEATTLE, WA 98144	91-1410450	501(C)(3)	130,000.	0.			PROGRAMMATIC INVESTMENT
BYRD BARR PLACE 722 18TH AVE. SEATTLE, WA 98122-4704	91-0786727	501(C)(3)	199,800.	0.			PROGRAMMATIC INVESTMENT
CAREMESSAGE 2443 FILLMORE ST. #380-4139 SAN FRANCISCO, CA 94115	27-3252911	501(C)(3)	19,440.	0.			PROGRAMMATIC INVESTMENT
CARES OF WASHINGTON 1833 N 105TH STREET, SUITE 202 SEATTLE, WA 98133	13-4237286	501(C)(3)	80,050.	0.			PROGRAMMATIC INVESTMENT
CASA LATINA 220 BLANCHARD SEATTLE, WA 98121	91-1689251	501(C)(3)	24,500.	0.			PROGRAMMATIC INVESTMENT

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CASCADE PUBLIC MEDIA 401 MERCER ST SEATTLE, WA 98109-4640	91-1221895	501(C)(3)	13,250.	0.			DESIGNATED GIFT
CASCADIA COLLEGE FOUNDATION 18345 CAMPUS WAY NE BOTHELL, WA 98011	91-1986593	501(C)(3)	70,000.	0.			PROGRAMMATIC INVESTMENT
CATHOLIC COMMUNITY SERVICES OF WESTERN WASHINGTON - 100 23RD AVE S - SEATTLE, WA 98144	91-1585652	501(C)(3)	64,163.	0.			DESIGNATED GIFT
CENTER FOR MULTICULTURAL HLTH 105 14TH AVENUE, SUITE 2C SEATTLE, WA 98122	91-0983698	501(C)(3)	42,247.	0.			PROGRAMMATIC INVESTMENT
CHIEF SEATTLE CLUB 410 2ND AVENUE EXT S SEATTLE, WA 98104-2876	91-0852503	501(C)(3)	40,082.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED GIFT
CHILDHAVEN 316 BROADWAY SEATTLE, WA 98122-5325	91-0402430	501(C)(3)	21,857.	0.			DESIGNATED GIFT
CHILDREN AND YOUTH JUSTICE CENTER 300 ELLIOTT AVE WEST, SUITE 360 SEATTLE, WA 98119	20-4457248	501(C)(3)	20,000.	0.			DESIGNATED GIFT
CHILDREN'S ALLIANCE 100 S KING ST, STE 100-1026 SEATTLE, WA 98104	91-0982879	501(C)(3)	45,300.	0.			PROGRAMMATIC INVESTMENT
CHILDRENS HOME SOCIETY OF WA PO BOX 15190, WEDGEWOOD STATION SEATTLE, WA 98115-0190	91-0575955	501(C)(3)	996,618.	0.			PROGRAMMATIC INVESTMENT

Schedule I (Form 990)

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CHINESE INFORMATION & SERVICES 611 S. LANE STREET SEATTLE, WA 98104	23-7438529	501(C)(3)	403,444.	0.			PROGRAMMATIC INVESTMENT
CHRISTIAN MISSIONS IN MANY LANDS MANY LANDS 2751 18TH AVENUE WALL, NJ 07719-0000	13-2688413	501(C)(3)	5,042.	0.			DESIGNATED GIFT
CITY OF RENTON 1055 S GRADY WAY, 6TH FLOOR RENTON, WA 98057	91-6001271	GOVERNMENT	8,000.	0.			PROGRAMMATIC INVESTMENT
CITY OF SEATTLE - DEPT OF PARKS & RECREATION - 4209 W MARGINAL WAY SW - SEATTLE, WA 98106	91-6001275	GOVERNMENT	55,000.	0.			PROGRAMMATIC INVESTMENT
CITY OF SEATTLE- TREASURY DEPT. A/R - PO BOX 94626 - SEATTLE, WA 98124-6926		GOVERNMENT	64,000.	0.			PROGRAMMATIC INVESTMENT
CLERGY COMMUNITY FOR CHILDREN & YOUTH COALITION - 1404 EAST YESLER WAY, SUITE 202 A - SEATTLE, WA 98122	91-2064753	501(C)(3)	191,821.	0.			PROGRAMMATIC INVESTMENT
COLLEGE SUCCESS FOUNDATION 15500 SE 30TH PL STE 200 BELLEVUE, WA 98007-6347	91-2036088	501(C)(3)	15,750.	0.			DESIGNATED GIFT
COMMUNITIES OF ROOTED BRILLIANCE 5224 WILSON AVE S., STE 201 SEATTLE, WA 98118	27-1458930	501(C)(3)	65,000.	0.			PROGRAMMATIC INVESTMENT
COMMUNITY PASSAGEWAYS PO BOX 28685 SEATTLE, WA 98118	81-3806946	501(C)(3)	271,821.	0.			PROGRAMMATIC INVESTMENT

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COMMUNITY PROFITS 4730 UNIVERSITY WAY NE, STE 140 #10 SEATTLE, WA 98105	87-4807067	501(C)(3)	115,000.	0.			PROGRAMMATIC INVESTMENT
COMMUNITY ROOTS HOUSING FOUNDATION 1620 12TH AVE, SUITE 205 SEATTLE, WA 98122	91-0979968	501(C)(3)	73,459.	0.			PROGRAMMATIC INVESTMENT
COMPASS HOUSING ALLIANCE 756 JOHN ST SEATTLE, WA 98109	91-0578229	501(C)(3)	8,303.	0.			PROGRAMMATIC INVESTMENT
CONGOLESE INTEGRATION NETWORK 19550 INTERNATIONAL BLVD STE 103 SEATAC, WA 98188	81-3511834	501(C)(3)	306,778.	0.			PROGRAMMATIC INVESTMENT
CONGREGATION OR VE SHALOM 1681 N DRUID HILLS RD NE BROOKHAVEN, GA 30319-4155	58-0899565	501(C)(3)	33,100.	0.			DESIGNATED GIFT
COOPERATIVE FOR ASSISTANCE AND RELIEF EVERYWHERE INC - 151 ELLIS STREET NE - ATLANTA, GA 30303-2440	13-1685039	501(C)(3)	110,000.	0.			DESIGNATED GIFT
CORPORATION FOR NATIONAL & COMMUNITY SVC - 1201 NEW YORK AVENUE, N.W., 8TH FLOOR - WASHINGTON, DC 20525	52-0971471	501(C)(3)	140,684.	0.			PROGRAMMATIC INVESTMENT
COVENANT HOUSE 5 PENN PLAZA NEW YORK, NY 10001-1810	13-2725416	501(C)(3)	15,000.	0.			DESIGNATED GIFT
CRISIS CONNECTIONS 2901 3RD AVE, SUITE 100 SEATTLE, WA 98121	91-0773187	501(C)(3)	50,846.	0.			PROGRAMMATIC INVESTMENT

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CRISTA MINISTRIES 19303 FREMONT AVE N SHORELINE, WA 98133-3800	91-6012289	501(C)(3)	9,000.	0.			DESIGNATED GIFT
CULTIVATE SOUTH PARK 1251 S CLOVERDALE ST UNIT B SEATTLE, WA 98108	84-4251891	501(C)(3)	38,776.	0.			PROGRAMMATIC INVESTMENT
DELRIIDGE NEIGHBORHOOD DEVELOPMENT ASSOCIATION - 8427 DELRIIDGE WAY SW - SEATTLE, WA 98126-3070	91-1741016	501(C)(3)	8,732.	0.			PROGRAMMATIC INVESTMENT
DOCTORS WITHOUT BORDERS USA INC 333 7TH AVENUE 2ND FLOOR NEW YORK, NY 10001-5029	13-3433452	501(C)(3)	37,000.	0.			DESIGNATED GIFT
EAST AFRICAN COMMUNITYSERVICES 7050 32ND AVENUE SOUTH SEATTLE, WA 98118	91-2138852	501(C)(3)	211,403.	0.			PROGRAMMATIC INVESTMENT
EASTRIDGE CHURCH 24205 SE ISSAQUAH FC RD SAMMAMISH, WA 98029-6403	91-1322980	501(C)(3)	5,400.	0.			DESIGNATED GIFT
EDMONDS METHODIST CHURCH 828 CASPERS ST EDMONDS, WA 98020-2618	91-0652053	501(C)(3)	20,160.	0.			DESIGNATED GIFT
EDQUITY, INC 125 COURT ST, APT 3NH BROOKLYN, NY 11201	81-4521518	501(C)(3)	392,000.	0.			PROGRAMMATIC INVESTMENT
EDUCATION WITH PURPOSE FOUNDATION FOR PACIFIC ISLANDERS - 1615 W SMITH ST. APT A-204 - KENT, WA 98032	27-5022461	501(C)(3)	191,871.	0.			PROGRAMMATIC INVESTMENT

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EL CENTRO DE LA RAZA 2524 16TH AVE S SEATTLE, WA 98144	91-0899927	501(C)(3)	1,205,980.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED GIFT
EMERGENCY FEEDING PROGRAM 851 HOUSER WAY N RENTON, WA 98057	91-1902023	501(C)(3)	286,691.	0.			PROGRAMMATIC INVESTMENT
ENCOMPASS NORTHWEST 1407 BOALCH AVE NW NORTH BEND, WA 98045-7994	91-0825232	501(C)(3)	243,904.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED GIFT
ERITREAN ASSOCIATION IN GREATER SEATTLE - 1528 VALENTINE PL SOUTH - SEATTLE, WA 98144	91-1703201	501(C)(3)	63,598.	0.			PROGRAMMATIC INVESTMENT
ERP OPERATING LIMITED PARTNERSHIP 2 NORTH RIVERSIDE PLAZA CHICAGO, IL 60606	36-3894853	501(C)(3)	239,499.	0.			PROGRAMMATIC INVESTMENT
EVERGREEN TREATMENT SERVICES 1700 AIRPORT WAY S SEATTLE, WA 98134-1618	91-0903529	501(C)(3)	21,884.	0.			PROGRAMMATIC INVESTMENT
FALIS COMMUNITY SERVICE 10615 SE 256TH ST SUITE 104 KENT, WA 98030	82-2923129	501(C)(3)	191,871.	0.			PROGRAMMATIC INVESTMENT
FAMILY WORKS 1501 N 45TH ST SEATTLE, WA 98103	91-1757277	501(C)(3)	15,000.	0.			PROGRAMMATIC INVESTMENT
FARESTART 700 VIRGINIA ST STE 300 SEATTLE, WA 98101	91-1546757	501(C)(3)	105,459.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED GIFT

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FEEST-FOOD EMPOWERMENT EDUCATION & SUSTAINABILITY TEAM - 605 SW 108TH STREET - SEATTLE, WA 98146	46-2680838	501(C)(3)	191,871.	0.			PROGRAMMATIC INVESTMENT
FILIPINO COMMUNITY OF SEATTLE 5740 M. L. KING JR WAY SOUTH SEATTLE, WA 98118	91-6055858	501(C)(3)	236,855.	0.			PROGRAMMATIC INVESTMENT
FIRST IMAGE (PREGNANCY RESOURCE CENTERS) - 1315 SE 20TH AVE STE 2 - PORTLAND, OR 97214-3811	93-0854417	501(C)(3)	15,660.	0.			DESIGNATED GIFT
FOOD LIFELINE 815 S 96TH ST SEATTLE, WA 98108	91-1090450	501(C)(3)	101,673.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED GIFT
FRED HUTCHINSON CANCER RESEARCH CENTER - 1100 FAIRVIEW AVE N - SEATTLE, WA 98109-4433	23-7156071	501(C)(3)	6,180.	0.			DESIGNATED GIFT
GLOBAL TO LOCAL 2800 SOUTH 192ND STREET, SUITE 104 SEATAC, WA 98188	27-3133200	501(C)(3)	61,793.	0.			PROGRAMMATIC INVESTMENT
GLOBAL-HELP ORGANIZATION 2318 FAIRVIEW AVE E UNIT 2 SEATTLE, WA 98102-3346	41-2033943	501(C)(3)	10,000.	0.			DESIGNATED GIFT
GLOVER EMPOWER MENTORING P.O. BOX 6471 KENT, WA 98031	47-1242835	501(C)(3)	367,821.	0.			PROGRAMMATIC INVESTMENT
GOOD SHEPHERD YOUTH OUTREACH P.O. BOX 25492 FEDERAL WAY, WA 98093	26-3713948	501(C)(3)	521,656.	0.			PROGRAMMATIC INVESTMENT

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GREEN RIVER COLLEGE FOUNDATION 12401 SE 320TH STREET AUBURN, WA 98092	51-0168649	501(C)(3)	150,000.	0.			PROGRAMMATIC INVESTMENT
HABITAT FOR HUMANITY INTERNATIONAL (SEATTLE-KING CO HPFH) - 560 NACHES AVE SW STE 110 - RENTON, WA 98057-2219	91-1342397	501(C)(3)	46,799.	0.			DESIGNATED GIFT
HADASSAH THE WOMENS ZIONIST ORGANIZATION OF AMERICA - 140 LAKESIDE AVE STE A36 - SEATTLE, WA 98122-6551	91-0750738	501(C)(3)	12,500.	0.			DESIGNATED GIFT
HIGHLINE AREA FOOD BANK P.O. BOX 66427 BURIEN, WA 98166	91-1665389	501(C)(3)	6,050.	0.			PROGRAMMATIC INVESTMENT
HIGHLINE COLLEGE FOUNDATION MS 99-248 PO BOX 98000 DES MOINES, WA 98198-9800	23-7428279	501(C)(3)	280,000.	0.			PROGRAMMATIC INVESTMENT
HILLSIDE CHRISTIAN FELLOWSHIP ASSEMBLIES OF GOD - 12042 SE SUNNYSIDE 535 - CLACKAMAS, OR 97015-8382	20-1125844	501(C)(3)	10,800.	0.			DESIGNATED GIFT
HOPE FOR HEROISM 270 SOUTH HANFORD STREET STE 207 SEATTLE, WA 98134-1926	91-2105756	501(C)(3)	30,000.	0.			DESIGNATED GIFT
HOPELINK 10675 WILLOWS ROAD NE, BUILDING B, REDMOND, WA 98052	91-0982116	501(C)(3)	41,000.	0.			DESIGNATED GIFT
HOPELINK 8990 154TH AVE NE REDMOND, WA 98052-3567	91-0982116	501(C)(3)	3,724.	0.			DESIGNATED GIFT

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HORN OF AFRICA SERVICES 4714 RAINIER AVE S, STE 105 SEATTLE, WA 98118	91-1897087	501(C)(3)	443,024.	0.			PROGRAMMATIC INVESTMENT
HOUSING AUTHORITY OF THE CITY OF SEATTLE - 190 QUEEN ANNE AVE N - SEATTLE, WA 98109	91-6000977	GOVERNMENT	28,318.	0.			PROGRAMMATIC INVESTMENT
HOUSING CONNECTOR 1301 5TH AVE, SUITE 1500 SEATTLE, WA 98101	84-2100263	501(C)(3)	120,000.	0.			PROGRAMMATIC INVESTMENT
HUNGER INTERVENTION PROGRAM 3841 NE 123RD STREET SEATTLE, WA 98125	26-3716527	501(C)(3)	66,095.	0.			PROGRAMMATIC INVESTMENT
INTERACTION TRANSITION 1265 S MAIN STREET #305-B SEATTLE, WA 98144	51-0175651	501(C)(3)	190,000.	0.			PROGRAMMATIC INVESTMENT
INTERCULTURAL CHILDREN & FAMILY SERVICES - 6320 EVERGREEN WAY STE. 205 - EVERETT, WA 98203	46-3280147	501(C)(3)	349,737.	0.			PROGRAMMATIC INVESTMENT
IRAQI COMMUNITY CENTER OF WASHINGTON - 10610 SE KENT KANGLEY RD SUITE 207 - KENT, WA 98030	61-1729234	501(C)(3)	271,504.	0.			PROGRAMMATIC INVESTMENT
ISSAQUAH FOOD & CLOTHING BANK 179 1ST AVE SE ISSAQUAH, WA 98027-3824	91-1245499	501(C)(3)	6,750.	0.			DESIGNATED GIFT
JEWISH FAMILY SERVICE 1601 16TH AVE SEATTLE, WA 98122	91-0565537	501(C)(3)	249,886.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED GIFT

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JEWISH FEDERATION OF GREATER SEATTLE - 2033 6TH AVE STE 810 - SEATTLE, WA 98121-2567	91-0575950	501(C)(3)	86,386.	0.			DESIGNATED GIFT
KENT FOOD BANK AND EMERGENCY SERVICES - 515 W HARRISON ST STE 107 - KENT, WA 98032	91-0881434	501(C)(3)	19,185.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED GIFT
KHEMER COMMUNITY OF SEATTLE KING COUNTY - P.O. BOX 46284 - SEATTLE, WA 98146	91-1577475	501(C)(3)	37,808.	0.			PROGRAMMATIC INVESTMENT
KIDVANTAGE P.O. BOX 712 ISSAQUAH, WA 98027-0026	91-1617032	501(C)(3)	8,132.	0.			DESIGNATED GIFT
KIN ON HEALTH CARE CENTER (KIN ON) 4416 S BRANDON ST SEATTLE, WA 98118-2341	91-1620786	501(C)(3)	5,339.	0.			DESIGNATED GIFT
KINDERING CENTER 16120 NE 8TH ST BELLEVUE, WA 98008-3937	91-0816827	501(C)(3)	128,574.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED GIFT
KING COUNTY BAR ASSOCIATION 1200 5TH AVE STE 700 SEATTLE, WA 98101-1116	91-0721603	501(C)(3)	231,464.	0.			PROGRAMMATIC INVESTMENT
KING COUNTY REGIONAL HOMELESSNESS AUTHORITY - 400 YESLER WAY, STE #600 - SEATTLE, WA 98104	37-1977237	GOVERNMENT	50,000.	0.			PROGRAMMATIC INVESTMENT
LAKE BURIEN PRESBYTERIAN CHURCH 15003 14TH AVE SW BURIEN, WA 98166	91-0616446	501(C)(3)	31,585.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED GIFT

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LAKE CITY PARTNERS ENDING HOMELESSNESS - 16357 AURORA AVE N - SEATTLE, WA 98133	47-4612289	501(C)(3)	80,250.	0.			PROGRAMMATIC INVESTMENT
LEADERSHIP TOMORROW 1301 5TH AVENUE, SUITE 1500 SEATTLE, WA 98101-2611	91-1196293	501(C)(3)	10,000.	0.			PROGRAMMATIC INVESTMENT
LEGAL COUNSEL FOR YOUTH & CHILDREN P.O. BOX 28629 SEATTLE, WA 98118	27-3006526	501(C)(3)	35,050.	0.			PROGRAMMATIC INVESTMENT
LIFELONG AIDS ALLIANCE 1002 - E. SENECA STREET SEATTLE, WA 98122-4203	91-1215715	501(C)(3)	24,620.	0.			PROGRAMMATIC INVESTMENT
LOW INCOME HOUSING INSTITUTE 1253 S. JACKSON ST, SUITE A SEATTLE, WA 98144	94-3155150	501(C)(3)	20,572.	0.			PROGRAMMATIC INVESTMENT
LOW INCOME HOUSING INSTITUTE 4719 12TH AVE NE SEATTLE, WA 98105	94-3155150	501(C)(3)	6,642.	0.			PROGRAMMATIC INVESTMENT
LOW INCOME HOUSING INSTITUTE 1253 S JACKSON ST SEATTLE, WA 98103	94-3155150	501(C)(3)	5,900.	0.			PROGRAMMATIC INVESTMENT
LOW INCOME HOUSING INSTITUTE 2407 1ST AVENUE, #200 SEATTLE, WA 98121	94-3155150	501(C)(3)	2,500.	0.			PROGRAMMATIC INVESTMENT
MANAWAY EVANGELISTIC MINISTRIES PO BOX 28248 SEATTLE, WA 98118	94-3039076	501(C)(3)	16,554.	0.			PROGRAMMATIC INVESTMENT

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MAPLE VALLEY FOOD BANK PO BOX 322 MAPLE VALLEY, WA 98038	91-6057006	501(C)(3)	12,000.	0.			PROGRAMMATIC INVESTMENT
MARYS PLACE SEATTLE 1830 9TH AVE SEATTLE, WA 98101-1321	27-2087950	501(C)(3)	130,491.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED GIFT
MERCY HOUSING 6940 MARTIN LUTHER KING JR. WAY S SEATTLE, WA 98118	47-1620007	501(C)(3)	14,623.	0.			PROGRAMMATIC INVESTMENT
METROPOLITAN SEATTLE JEWISH DAY SCHOOL - 15749 NE 4TH ST - BELLEVUE, WA 98008-4317	91-1085790	501(C)(3)	11,800.	0.			DESIGNATED GIFT
MILLIONAIR CLUB INC (MILLIONAIR CLUB CHARITY) - 2515 WESTERN AVE - SEATTLE, WA 98121-1307	91-0607513	501(C)(3)	9,281.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED GIFT
MOMENTUM UNLIMITED INC 6101 EXECUTIVE BLVD STE 240 ROCKVILLE, MD 20852-3953	38-3852989	501(C)(3)	10,000.	0.			DESIGNATED GIFT
MOUNT BAKER HOUSING ASSOCIATION 8708 RAINIER AVE S #B3 SEATTLE, WA 98118	91-1402983	501(C)(3)	69,219.	0.			PROGRAMMATIC INVESTMENT
MULTI-SERVICE CENTER 1200 SOUTH 336TH STREET FEDERAL WAY, WA 98093-0699	23-7120815	501(C)(3)	159,707.	0.			PROGRAMMATIC INVESTMENT
MULTI-SERVICE CENTER PO BOX 23699 FEDERAL WAY, WA 98093	23-7120815	501(C)(3)	9,275.	0.			PROGRAMMATIC INVESTMENT

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash 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)	120,000.	0.			PROGRAMMATIC INVESTMENT
NEIGHBORHOOD HOUSE 1225 S WELLER STREET, SUITE 510 SEATTLE, WA 98144	91-0568305	501(C)(3)	3,029,289.	0.			PROGRAMMATIC INVESTMENT
NORTH BEACON HILL HOUSING INITIATIVE ASSOCIATION - 2522 14TH AVE S - SEATTLE, WA 98144	91-1681667	501(C)(3)	10,111.	0.			PROGRAMMATIC INVESTMENT
NORTH SEATTLE COMMUNITY COLLEGE FOUNDATION - 600 UNIVERSITY STREET, SUITE 2409 - SEATTLE, WA 98101	91-1163554	501(C)(3)	100,050.	0.			PROGRAMMATIC INVESTMENT
NORTHWEST ANIMAL RIGHTS NETWORK 1037 NE 65TH ST #174 SEATTLE, WA 98115	91-1341059	501(C)(3)	30,900.	0.			PROGRAMMATIC INVESTMENT
NORTHWEST HARVEST E M M PO BOX 12272 SEATTLE, WA 98102-0272	91-0826037	501(C)(3)	43,086.	0.			DESIGNATED GIFT
NORTHWEST SCHOOL FOR HEARING IMPAIRED CHILDREN (NORTHWEST SCHOOL OF DEAF AND HAR - 15303 WESTMINSTER WAY N - SHORELINE, WA	91-1073353	501(C)(3)	10,000.	0.			DESIGNATED GIFT
OPEN DOORS FOR MULTICULTURAL FAMILIES - 24437 RUSSELL ROAD, SUITE 110 - KENT, WA 98032	27-1206272	501(C)(3)	191,821.	0.			PROGRAMMATIC INVESTMENT
OPERATION MOBILIZATION P.O. BOX 444 TYRONE, GA 30290-0444	22-2513811	501(C)(3)	10,084.	0.			DESIGNATED GIFT

Schedule I (Form 990)

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

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OPERATION SACK LUNCH P.O. BOX 4128 SEATTLE, WA 98194	91-1658187	501(C)(3)	22,000.	0.			PROGRAMMATIC INVESTMENT
OVERLAKE HOSPITAL FOUNDATION 1035 116TH AVE NE BELLEVUE, WA 98004-4604	91-1050325	501(C)(3)	51,000.	0.			DESIGNATED GIFT
OVERLAKE SERVICE LEAGUE (DBA BELLEVUE LIFESPRING) - 302 BELLEVUE SQUARE - BELLEVUE, WA 98004	91-0658331	501(C)(3)	8,400.	0.			DESIGNATED GIFT
PACIFIC NORTHWEST BALLET ASSOCIATION - 301 MERCER ST - SEATTLE, WA 98109-4600	91-0897129	501(C)(3)	25,000.	0.			DESIGNATED GIFT
PAN AFRICAN CENTER FOR EMPOWERMENT 2327 23RD AVE S SEATTLE, WA 98144	47-4502267	501(C)(3)	87,125.	0.			PROGRAMMATIC INVESTMENT
PARA LOS NINOS DE HIGHLINE 425 SW 144ST BURIEN, WA 98166	20-0502368	501(C)(3)	192,071.	0.			PROGRAMMATIC INVESTMENT
PIKE MARKET SENIOR CENTER 85 PIKE ST., SUITE 200 SEATTLE, WA 98101	91-1034838	501(C)(3)	29,000.	0.			PROGRAMMATIC INVESTMENT
PIKE PLACE MARKET PDA 85 PIKE ST., #500 SEATTLE, WA 98101	91-0923347	501(C)(3)	10,352.	0.			PROGRAMMATIC INVESTMENT
PLANNED PARENTHOOD OF THE GREAT NORTHWEST AND THE HAWAIIAN ISLANDS - 2001 E MADISON ST - SEATTLE, WA 98122-2959	91-0686012	501(C)(3)	62,160.	0.			DESIGNATED GIFT

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
POTLATCH FUND 815 1ST AVENUE, PMB 308 SEATTLE, WA 98104	73-1712905	501(C)(3)	1,001,200.	0.			PROGRAMMATIC INVESTMENT
POWERFUL VOICES 1620 18TH AVE #100 SEATTLE, WA 98122	91-1679907	501(C)(3)	192,071.	0.			PROGRAMMATIC INVESTMENT
PRESIDENT AND FELLOWS OF HARVARD COLLEGE - 1033 MASSACHUSETTS AVE STE 3 - CAMBRIDGE, MA 02138-5366	04-2103580	501(C)(3)	100,000.	0.			DESIGNATED GIFT
PRIDEFEST 2623 E PIKE ST SEATTLE, WA 98122	47-1817063	501(C)(3)	24,500.	0.			PROGRAMMATIC INVESTMENT
PRISONERS FOR CHRIST OUTREACH MINISTRIES - 18500 156TH AVE NE STE 302 - WOODINVILLE, WA 98072-4459	94-3104375	501(C)(3)	6,480.	0.			DESIGNATED GIFT
PROGRESSIVE ANIMAL WELFARE SOCIETY INC (PAWS WILDLIFE REHABILITATION CENTER) - PO BOX 1037 - LYNNWOOD, WA 98046	91-6073154	501(C)(3)	5,855.	0.			DESIGNATED GIFT
PROJECTS FOR OUR PEOPLE 319 26TH AVE SEATTLE, WA 98122	20-4013305	501(C)(3)	65,000.	0.			PROGRAMMATIC INVESTMENT
PUGET SOUND LABOR AGENCY 2800 FIRST AVE, ROOM 126 SEATTLE, WA 98121-1182	91-0927902	501(C)(3)	27,000.	0.			PROGRAMMATIC INVESTMENT
RAINIER BEACH ACTION COALITION 3703 S EDMUNDS STREET #19 SEATTLE, WA 98118	20-3758788	501(C)(3)	75,000.	0.			PROGRAMMATIC INVESTMENT

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RAINIER VALLEY CORPS 1225 S. WELLER ST, SUITE 400 SEATTLE, WA 98144	47-4257834	501(C)(3)	120,500.	0.			PROGRAMMATIC INVESTMENT
RAINIER VALLEY FOOD BANK 4205 RAINIER AVE S SEATTLE, WA 98118-1356	91-1500768	501(C)(3)	52,039.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED GIFT
REACH 3604 NE 10TH CRT RENTON, WA 98056	46-1187669	501(C)(3)	141,000.	0.			PROGRAMMATIC INVESTMENT
RECLAIMING OUR GREATNESS 2601 MILL AVE S RENTON, WA 98055	84-5039413	501(C)(3)	202,000.	0.			PROGRAMMATIC INVESTMENT
RED EAGLE SOARING P.O. BOX 20175 SEATTLE, WA 98102	91-1862731	501(C)(3)	191,821.	0.			PROGRAMMATIC INVESTMENT
REFUGEE WOMENS ALLIANCE 4008 MARTIN LUTHER KING, JR., WAY S SEATTLE, WA 98108	91-1296964	501(C)(3)	568,676.	0.			PROGRAMMATIC INVESTMENT
RENTON PARK CHAPEL 16760 128TH AVE SE RENTON, WA 98058-5531	91-1286970	501(C)(3)	31,230.	0.			DESIGNATED GIFT
RESTORE & REPAIR MISSIONARY OUTREACH - 12629 RENTON AVE S. SUITE F - SEATTLE, WA 98178	11-3840738	501(C)(3)	64,202.	0.			PROGRAMMATIC INVESTMENT
SALVATION ARMY - SEATTLE 111 QUEEN ANNE AVE N, SUITE 300 SEATTLE, WA 98109		501(C)(3)	19,550.	0.			PROGRAMMATIC INVESTMENT

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash 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 98040-3805	91-0635236	501(C)(3)	17,500.	0.			DESIGNATED GIFT
SCHWAB CHARITABLE FUND 211 MAIN STREET SAN FRANCISCO, CA 94105-1905	31-1640316	501(C)(3)	50,000.	0.			DESIGNATED GIFT
SEATTLE ART MUSEUM 1300 1ST AVE SEATTLE, WA 98101-2003	91-0640788	501(C)(3)	27,000.	0.			DESIGNATED GIFT
SEATTLE CHILDRENS HOSPITAL FOUNDATION - PO BOX 5371 MSC RC-507 - SEATTLE, WA 98145-5005	91-1156519	501(C)(3)	310,383.	0.			DESIGNATED GIFT
SEATTLE COLLEGES 1500 HARVARD AVENUE SEATTLE, WA 98122	91-0826872	501(C)(3)	275,000.	0.			PROGRAMMATIC INVESTMENT
SEATTLE COLLEGES FOUNDATION 1500 HARVARD AVE SEATTLE, WA 98122-3803	83-0551671	501(C)(3)	67,500.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED GIFT
SEATTLE FOUNDATION 1601 FIFTH AVENUE, STE 1900 SEATTLE, WA 98101	91-6013536	501(C)(3)	30,000.	0.			PROGRAMMATIC INVESTMENT
SEATTLE GOOD BUSINESS NETWORK 1143 MARTIN LUTHER KING JR WAY #77 SEATTLE, WA 98122	27-2172486	501(C)(3)	100,851.	0.			PROGRAMMATIC INVESTMENT
SHORELINE COMMUNITY COLLEGE C/O BLANTON TURNER, 159 SOUTH JACKSON STREET, SUITE 320 - SEATTLE, WA 98104	91-0822848	501(C)(3)	98,089.	0.			PROGRAMMATIC INVESTMENT

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SHORELINE COMMUNITY COLLEGE 16101 GREENWOOD AVE N SHORELINE, WA 98133	91-0822848	501(C)(3)	47,850.	0.			PROGRAMMATIC INVESTMENT
SHORELINE COMMUNITY COLLEGE FOUNDATION - 16101 GREENWOOD AVE N, ROOM 1005 - SHORELINE, WA 98133	91-1265475	501(C)(3)	100,050.	0.			PROGRAMMATIC INVESTMENT
SOLID GROUND 1501 N 45TH ST SEATTLE, WA 98103-6708	23-7421892	501(C)(3)	1,298,625.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED GIFT
SOMALI FAMILY SAFETY TASK FORCE PO BOX 8611 SEATTLE, WA 98118	46-4692924	501(C)(3)	24,500.	0.			PROGRAMMATIC INVESTMENT
SOUND GENERATION 2208 SECOND AVENUE, SUITE #100 SEATTLE, WA 98121	91-0823767	501(C)(3)	85,023.	0.			PROGRAMMATIC INVESTMENT
SOUTHEAST YOUTH & FAMILY SVCS. 3722 S HUDSON ST SEATTLE, WA 98118-1920	91-1036750	501(C)(3)	338,013.	0.			PROGRAMMATIC INVESTMENT
SOUTHWEST YOUTH & FAMILY SVCS. 4555 DELRIDGE WAY SW SEATTLE, WA 98106	91-1036750	501(C)(3)	795,257.	0.			PROGRAMMATIC INVESTMENT
ST. VINCENT DE PAUL OF SEATTLE / KING COUNTY - 5950 4TH AVE S - SEATTLE, WA 98108	91-0583891	501(C)(3)	51,916.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED GIFT
SUSTAINABLE SEATTLE 7511 GREENWOOD AVE N #121 SEATTLE, WA 98103	31-1580932	501(C)(3)	24,500.	0.			PROGRAMMATIC INVESTMENT

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SWEDISH MEDICAL CENTER FOUNDATION 1801 LIND AVE SW ATTN TAX DEPT RENTON, WA 98057-3368	91-0983214	501(C)(3)	7,500.	0.			DESIGNATED GIFT
TEACHING WITH LOVE AND CARE 31142 3RD COURT SOUTH FEDERAL WAY, WA 98003	83-2721765	501(C)(3)	53,667.	0.			PROGRAMMATIC INVESTMENT
TECHNOLOGY ACCESS FOUNDATION 605 SW 108TH ST SEATTLE, WA 98146-2229	91-1731833	501(C)(3)	147,948.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED GIFT
THE AGAINST MALARIA FOUNDATION 301 W 20TH ST STE 300 KANSAS CITY, MO 64108-0000	20-3069841	501(C)(3)	10,000.	0.			DESIGNATED GIFT
THE BOARD OF REGENTS OF THE UNIVERSITY OF WASHINGTON - 159 S. JACKSON ST., STE 320 - SEATTLE, WA 98115	91-6001537	501(C)(3)	20,610.	0.			PROGRAMMATIC INVESTMENT
THE CARTER CENTER INC 453 JOHN LEWIS FREEDOM PKWY NE ATLANTA, GA 30307-1496	58-1454716	501(C)(3)	15,000.	0.			DESIGNATED GIFT
THE COMMUNITY LEADERS ROUNDTABLE OF SEATTLE - 1416 SW 151ST ST - BURIEN, WA 98166	46-4242313	501(C)(3)	81,350.	0.			PROGRAMMATIC INVESTMENT
THE DES MOINES AREA FOODBANK P.O. BOX 98788 DES MOINES, WA 98198-0788	91-1183154	501(C)(3)	99,750.	0.			PROGRAMMATIC INVESTMENT
THE HOUSING AUTHORITY OF THE COUNTY OF KING - 600 ANDOVER PARK WEST - TUKWILA, WA 98188	91-6000978	GOVERNMENT	30,207.	0.			PROGRAMMATIC INVESTMENT

Schedule I (Form 990)

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

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THE SILENT TASKFORCE 5316 24TH AVE SOUTH SEATTLE, WA 98108	82-3015372	501(C)(3)	129,113.	0.			PROGRAMMATIC INVESTMENT
THE UNIVERSITY OF WASHINGTON BOARD OF REGENTS - 6301 65TH AVE NE - SEATTLE, WA 98115	91-6001537	501(C)(3)	10,110.	0.			PROGRAMMATIC INVESTMENT
THE YOUNG MENS CHRISTIAN ASSOCIATION OF GREATER SEATTLE - 909 4TH AVE - SEATTLE, WA 98104-1108	91-0482710	501(C)(3)	292,486.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED GIFT
TUKWILA PANTRY 3118 S 140TH STREET TUKWILA, WA 98168	75-2974441	501(C)(3)	53,500.	0.			PROGRAMMATIC INVESTMENT
UNITED INDIANS OF ALL TRIBES FOUNDATION - PO BOX 99100 - SEATTLE, WA 98139-0100	91-0889016	501(C)(3)	115,207.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED GIFT
UNITED NEGRO COLLEGE FUND INC 1805 7TH STREET NW WASHINGTON, DC 20001-3186	13-1624241	501(C)(3)	289,236.	0.			DESIGNATED GIFT
UNITED WAY OF DENTON COUNTY INC 1314 TEASLEY LN DENTON, TX 76205-7946	75-1251128	501(C)(3)	5,012.	0.			DESIGNATED GIFT
UNITED WAY OF PIERCE COUNTY 1501 PACIFIC AVE STE 400 TACOMA, WA 98402-3302	91-0650669	501(C)(3)	6,014.	0.			DESIGNATED GIFT
UNITED WAY OF SNOHOMISH COUNTY 3120 MCDUGALL AVE STE 200 EVERETT, WA 98201-4433	91-0606507	501(C)(3)	27,329.	0.			DESIGNATED GIFT

Schedule I (Form 990)

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

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UNITED WAY OF SPOKANE COUNTY 920 N WASHINGTON ST STE 100 SPOKANE, WA 99201-2229	91-0606058	501(C)(3)	10,977.	0.			DESIGNATED GIFT
UNITED WAYS OF THE PACIFIC NORTHWEST - 400 UNION AVE SE, SUITE 200 - OLYMPIA, WA 98501	91-1055031	501(C)(3)	12,656.	0.			PROGRAMMATIC INVESTMENT
UNIVERSITY DISTRIC FOOD BANK 5017 ROOSEVELT WAY NE SEATTLE, WA 98105	91-1224834	501(C)(3)	12,300.	0.			PROGRAMMATIC INVESTMENT
UNIVERSITY OF WASHINGTON 4300 ROOSEVELT WAY NE 3RD FLOOR SEATTLE, WA 98105	91-6001537	501(C)(3)	110,000.	0.			PROGRAMMATIC INVESTMENT
UNIVERSITY OF WASHINGTON FOUNDATION - 4333 BROOKLYN AVE NE - SEATTLE, WA 98195-9504	94-3079432	501(C)(3)	1,078,331.	0.			DESIGNATED GIFT
UNIVERSITY OF WASHINGTON HOUSING AND FOOD SERVICES - 1045 NE CAMPUS PARKWAY - SEATTLE, WA 98105	91-6001537	501(C)(3)	9,657.	0.			PROGRAMMATIC INVESTMENT
URBAN LEAGUE OF METROPOLITAN SEATTLE - 105 14TH AVENUE - SEATTLE, WA 98122-5569	91-0575954	501(C)(3)	10,560,046.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED GIFT
VALLEY REAL LIFE 1831 S BARKER RD GREENACRES, WA 99016-9762	65-1237735	501(C)(3)	21,575.	0.			DESIGNATED GIFT
VASHON MAURY COMMUNITY FOOD PO BOX 1205 VASHON, WA 98070	94-3165664	501(C)(3)	40,550.	0.			PROGRAMMATIC INVESTMENT

Schedule I (Form 990)

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

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VETERINARY CARE FOUNDATION INCORPORATED - 16550 NW 46TH ST - MORRISTON, FL 32668-7777	26-1074767	501(C)(3)	12,000.	0.			DESIGNATED GIFT
VINE MAPLE PLACE PO BOX 1092 MAPLE VALLEY, WA 98038	91-2082308	501(C)(3)	90,050.	0.			PROGRAMMATIC INVESTMENT
VOICES OF TOMORROW 15811 AMBAUM BLVD SW, SUITE 170 BURIEN, WA 98166	46-5211499	501(C)(3)	537,684.	0.			PROGRAMMATIC INVESTMENT
WA SANG FOUNDATION 657 SOUTH KING ST., SUITE 209 SEATTLE, WA 98104-2900	94-3113810	501(C)(3)	19,531.	0.			PROGRAMMATIC INVESTMENT
WASHINGTON STUDENT ASSOCIATION 906 COLUMBIA ST. SW #201 OLYMPIA, WA 98501	91-1192925	501(C)(3)	50,000.	0.			PROGRAMMATIC INVESTMENT
WELLSPRING FAMILY SERVICES 1900 RAINIER AVENUE SOUTH SEATTLE, WA 98144	91-0567261	501(C)(3)	6,355,351.	0.			PROGRAMMATIC INVESTMENT
WEST AFRICAN COMMUNITY COUNCIL 6322 44TH AVENUE SOUTH SEATTLE, WA 98118	46-2838797	501(C)(3)	287,173.	0.			PROGRAMMATIC INVESTMENT
WEST SEATTLE FOOD BANK 3419 SW MORGAN ST. SEATTLE, WA 98126	91-1464412	501(C)(3)	59,556.	0.			PROGRAMMATIC INVESTMENT
WESTERN WASHINGTON UNIVERSITY FOUNDATION - OLD MAIN 430 516 HIGH STREET - BELLINGHAM, WA 98225	91-6073519	501(C)(3)	5,231.	0.			DESIGNATED GIFT

Schedule I (Form 990)

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

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WESTSIDE BIBLE FELLOWSHIP 526 SE 9TH AVE HILLSBORO, OR 97123-4606	93-0775006	501(C)(3)	5,382.	0.			DESIGNATED GIFT
WHITE CENTER EMERGENCY FOOD ASSOCIATION - 10829 8TH AVE SW - SEATTLE, WA 98146	91-1167830	501(C)(3)	24,188.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED GIFT
WITHINREACH 155 NE 100TH ST, SUITE 500 SEATTLE, WA 98125	91-1443685	501(C)(3)	107,000.	0.			PROGRAMMATIC INVESTMENT
WONDER OF WOMEN INTERNATIONAL 115 PREFONTAINE PL S #510 SEATTLE, WA 98104	81-4221805	501(C)(3)	20,000.	0.			PROGRAMMATIC INVESTMENT
YEAR UP INC 45 MILK STREET 9TH FLOOR BOSTON, MA 02109-5165	04-3534407	501(C)(3)	302,732.	0.			DESIGNATED GIFT
YES FOUNDATION OF WHITE CENTER 15003 14TH AVE SW BURIEN, WA 98146	91-2037236	501(C)(3)	60,050.	0.			PROGRAMMATIC INVESTMENT
YOUNG LIFE 420 N CASCADE AVE COLORADO SPGS, CO 80903-3325	84-0385934	501(C)(3)	6,582.	0.			DESIGNATED GIFT
YOUTH CARE 2500 NE 54TH ST 100 SEATTLE, WA 98105	91-0917079	501(C)(3)	93,557.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED GIFT
YWCA OF SEATTLE KING COUNTY 1118 - 5TH AVENUE SEATTLE, WA 98101	91-0482890	501(C)(3)	503,343.	0.			PROGRAMMATIC INVESTMENT

Schedule I (Form 990)

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 non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
RENTAL AND FOOD ASSISTANCE PROGRAM	965	5,496,338.	10,377,742.	BOOK VALUE	RENT AND FOOD

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

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

Part IV Supplemental Information

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.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2021

Open to Public Inspection

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.

Department of the Treasury
Internal Revenue Service

Name of the organization
UNITED WAY OF KING COUNTY

Employer identification number
91-0565555

Part I Questions Regarding Compensation

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

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

Schedule J (Form 990) 2021

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 aren't 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 and/or 1099-NEC 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) GORDON MCHENRY, JR. PRESIDENT & CEO	(i)	375,000.	10,000.	13,000.	13,000.	18,234.	429,234.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) CHRIS HYNES CHIEF MARKETING OFFICER	(i)	176,600.	0.	0.	7,977.	25,150.	209,727.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) SARA LEVIN CHIEF IMPACT OFFICER	(i)	186,325.	0.	0.	8,056.	9,903.	204,284.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) ERICA WILEY CHIEF PHILANTHROPY OFFICER	(i)	183,263.	0.	0.	8,033.	7,931.	199,227.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) JENNIFER JOHNSTON CHIEF FINANCIAL OFFICER	(i)	181,376.	0.	0.	6,641.	2,712.	190,729.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) ELIZABETH STODOMINGO CHIEF HUMAN RESOURCES OFFICER	(i)	180,809.	0.	0.	800.	5,822.	187,431.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) JIMMY YEARBY VP HUMAN RESOURCES	(i)	158,074.	0.	0.	6,601.	13,680.	178,355.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

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.

Ruled area for supplemental information consisting of multiple horizontal lines.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

- ▶ 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 instructions and the latest information.

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	44	2,204,736.	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 ()				
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 V, Donee Acknowledgement **29** 0

- 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? **30a** X
- b If "Yes," describe the arrangement in Part II.
- 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? **31** X
- 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? **32a** X
- 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.

	Yes	No
30a	X	
31	X	
32a	X	

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

Schedule M (Form 990) 2021

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.

SCHEDULE M, PART I, COLUMN (B):

THE AMOUNTS REPORTED IN COLUMN (B) REPRESENTS THE NUMBER OF

CONTRIBUTIONS RECEIVED DURING THE YEAR.

**SCHEDULE O
(Form 990)**

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 Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public
Inspection

Name of the organization

UNITED WAY OF KING COUNTY

Employer identification number

91-0565555

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

TRANSFORMING INEQUITABLE SYSTEMS.

FORM 990, PART I, LINE 6:

THE ESTIMATE OF 31,724 HOURS INCLUDES SERVICE BY VOLUNTEERS IN

BOARD/COMMITTEE WORK, DIRECT SERVICE, COMMUNITY IMPACT AND OTHER AREAS.

HOURS REPRESENT ESTIMATES BY ORGANIZATION STAFF KNOWLEDGEABLE OF THE

FUNCTIONS THE VOLUNTEERS ARE PERFORMING IN.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

SUPPORTING YOUTH ACHIEVEMENTS - OTHER PROGRAMS INCLUDE BRIDGE TO FINISH

HELPING COMMUNITY COLLEGE STUDENTS PERSIST TO GRADUATION. 12,000

INTERVENTIONS WERE PROVIDED TO STUDENTS. INTERVENTIONS INCLUDE

EMERGENCY NEEDS GRANTS, FINANCIAL COUNSELING, ACCESS TO FOOD AND MORE.

EXPENSES \$ 8,699,786. INCLUDING GRANTS OF \$ 7,339,456. REVENUE \$ 85,783.

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. 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 PROVIDED \$40 MILLION IN RENTAL

ASSISTANCE TO HELP MORE THAN 20,000 PEOPLE REMAIN HOUSED.

EXPENSES \$ 1,862,887. INCLUDING GRANTS OF \$ 1,746,791. REVENUE \$ 0.

DONOR DESIGNATIONS - CONTRIBUTIONS THAT ARE DESIGNATED TO NONPROFIT

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990) 2021

Name of the organization UNITED WAY OF KING COUNTY	Employer identification number 91-0565555
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ORGANIZATIONS OTHER THAN UNITED WAY OF KING COUNTY.

EXPENSES \$ 13,537,821. INCL GRANTS OF \$ 13,537,821. REVENUE \$ 132,185.

FORM 990, PART VI, SECTION B, LINE 11B:

THE REVIEW OF THE FORM 990 IS INITIALLY COMPLETED BY THE INTERIM DEPUTY

CFO, CFO, AND ULTIMATELY THE CEO WHEN SIGNED ON BEHALF OF THE ORGANIZATION.

THE FILED FINAL RETURN WILL BE PROVIDED TO THE BOARD OF DIRECTORS AT THE

NEXT SCHEDULED MEETING AFTER FILING.

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 KEPT ON FILE. IF THERE IS FOUND TO BE A

CONFLICT OF INTEREST, IT IS REPORTED TO THE BOARD PRESIDENT AND THE CEO,

AND THE BOARD MEMBER IS ASKED TO RECUSE HIM OR HERSELF FROM ANY VOTE ON THE

MATTER.

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 CFO'S SALARY IS REVIEWED AND APPROVED

BY THE CHIEF EXECUTIVE OFFICER. THE LAST COMPENSATION REVIEW WAS PERFORMED

IN NOVEMBER 2022.

Name of the organization UNITED WAY OF KING COUNTY	Employer identification number 91-0565555
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FORM 990, PART VI, SECTION C, LINE 19:

CURRENT AUDITED FINANCIAL STATEMENTS AND THE CURRENT IRS FORM 990 ARE
 AVAILABLE ON OUR WEBSITE. OUR CONFLICT OF INTEREST POLICY AND OTHER
 GOVERNING DOCUMENTS ARE AVAILABLE UPON WRITTEN REQUEST.

FORM 990, PART VIII, LINE 1F:

FORM 990, PART VIII, LINE 1F INCLUDES DONOR DESIGNATIONS WHICH ARE
 CONTRIBUTIONS DESIGNATED TO NONPROFIT ORGANIZATIONS OTHER THAN UNITED
 WAY OF KING COUNTY.

CAMPAIGN RESULTS	\$31,434,184 AS REPORTED ON FORM 990
LESS DONOR DESIGNATIONS	\$13,537,821
NET CAMPAIGN REVENUE	\$17,896,363

FORM 990, PART IX, LINE 1:

FORM 990, PART IX, LINE 1 INCLUDES DONOR DESIGNATIONS WHICH ARE
 CONTRIBUTIONS DESIGNATED TO NONPROFIT ORGANIZATIONS OTHER THAN UNITED
 WAY OF KING COUNTY.

GRANT FUNDS AWARDED & DESIGNATED	\$72,239,865 AS REPORTED ON FORM 990
LESS DONOR DESIGNATIONS	\$13,537,821
NET FUNDS AWARDED	\$58,702,044

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

CHANGE IN BENEFICIAL INTEREST IN TRUST	-3,416,761.
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