

## 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)

2020

Open to Public Inspection

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.

A For the 2020 calendar year, or tax year beginning JUL 1, 2020 and ending JUN 30, 2021

Form sections B through M: B Check if applicable; C Name of organization; D Employer identification number; E Telephone number; F Name and address of principal officer; G Gross receipts; H(a) Is this a group return; H(b) Are all subordinates included; H(c) Group exemption number; I Tax-exempt status; J Website; K Form of organization; L Year of formation; M State of legal domicile.

Part I Summary

Table with 3 columns: Description, Prior Year, Current Year. Rows include: 1-7a Activities & Governance; 8-12 Revenue; 13-19 Expenses; 20-22 Net Assets or Fund Balances.

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.

Signature and Preparer information: Sign Here (Signature of officer, Date, Name: GORDON A. MCHENRY, JR.); Paid (Preparer's name: KATHRYN J. OKIMOTO, Signature, Date: 05/16/22, PTIN: P00746598); Preparer Use Only (Firm's name: CLARK NUBER, PS, Address: 10900 NE 4TH STREET, SUITE 1400, BELLEVUE, WA 98004, Firm's EIN: 91-1194016, Phone no. 425-454-4919).

May the IRS discuss this return with the preparer shown above? See instructions [X] 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: UNITED WAY OF KING COUNTY BRINGS CARING PEOPLE TOGETHER TO GIVE, VOLUNTEER AND TAKE ACTION TO HELP PEOPLE IN NEED AND SOLVE OUR COMMUNITY'S TOUGHEST CHALLENGES. WE BRING TOGETHER PEOPLE AND ORGANIZATIONS WITH THE PASSION, EXPERTISE AND RESOURCES TO GET THINGS

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No If "Yes," describe these changes on Schedule O.

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

4a (Code: ) (Expenses \$ 53,469,963. including grants of \$ 51,183,715. ) (Revenue \$ ) COVID-19 RESPONSE - AS A RESULT OF THE COVID-19 PANDEMIC, THE ORGANIZATION RECEIVED SIGNIFICANT GOVERNMENT FUNDING TO ACCELERATE AID IN THE RELIEF EFFORTS THUS FAR FUNDED BY PRIVATE DONATIONS. WHILE THE ORGANIZATION CONTINUED TO FUND AND OPERATE ITS CORE PROGRAMS DESIGNED TO BUILD A COMMUNITY WHERE PEOPLE HAVE HOMES, STUDENTS GRADUATE AND FAMILIES ARE FINANCIALLY STABLE, IT ALSO RAPIDLY BROUGHT NEW STRATEGIES TO MEET GROWING COMMUNITY NEEDS. THE ORGANIZATION ALSO STOOD UP TWO NEW FUNDS THAT PUT THE DECISION MAKING POWER IN THE HANDS OF THE COMMUNITIES IMPACTED BY THOSE FUNDING DECISIONS, THE BLACK COMMUNITY BUILDING COLLECTIVE AND THE INDIGENOUS FUND.

4b (Code: ) (Expenses \$ 8,444,741. including grants of \$ 7,924,385. ) (Revenue \$ ) EARLY LEARNING ACHIEVEMENTS - HELPING STUDENTS GRADUATE ACHIEVEMENTS - MORE THAN 1,100 FAMILIES PARTICIPATED IN THE PARENT-CHILD HOME PROGRAM, A TWO-YEAR HOME VISITING PROGRAM THAT HELPS LOW INCOME CHILDREN AGES 2-4 BE READY TO LEARN WHEN THEY ENTER KINDERGARTEN AND BECOME 30 PERCENTAGE POINTS MORE LIKELY TO GRADUATE HIGH SCHOOL. THE PANDEMIC REQUIRED A RAPID SHIFT TO VIRTUAL HOME VISITS WHICH REQUIRED ADDITIONAL RESOURCES TO PROVIDE TECHNOLOGY FOR FAMILIES AND TO HELP ASSURE PARTICIPATING FAMILIES WERE MEETING THEIR BASIC NEEDS.

4c (Code: ) (Expenses \$ 7,190,256. including grants of \$ 4,156,108. ) (Revenue \$ ) FINANCIAL STABILITY - TAX PREPARATION PIVOTED TO VIRTUAL SERVICE DUE TO THE PANDEMIC HELPING MORE THAN 4,000 HOUSEHOLDS BRINGING \$7 MILLION IN FEDERAL REFUNDS BACK INTO OUR COMMUNITY. 29,000 DAILY FREE SUMMER MEALS SERVED TO LOW-INCOME YOUTH AND STUDENTS, PROVIDED MORE THAN 2,000 YOUTH MEALS EVERY DAY DURING THE SCHOOL YEAR AND PROVIDED MORE THAN 95,000 DELIVERIES OF CULTURALLY APPROPRIATE FOOD TO BIPOC (BLACK, INDIGENOUS, AND PEOPLE OF COLOR) HOUSEHOLDS IN SOUTH KING COUNTY.

4d Other program services (Describe on Schedule O.) (Expenses \$ 25,745,866. including grants of \$ 24,841,696. ) (Revenue \$ 241,242. )

4e Total program service expenses 94,850,826.

**Part IV Checklist of Required Schedules**

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

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question, Yes, No. Rows 22-38 covering various organizational requirements and schedules.

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

Table with 3 columns: Question, Yes, No. Rows 1a-1c regarding Form 1096, Forms W-2G, and backup withholding rules.

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

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 16 regarding employee counts, tax filings, and organizational activities.

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 (37), 1b (37), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

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, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed WA
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection.
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

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, 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 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)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) GORDON MCHENRY, JR. PRESIDENT & CEO	40.00			X			367,983.	0.	15,213.	
(2) DARRELL POWELL COO	40.00			X			178,303.	0.	16,943.	
(3) JIM YEARBY DIRECTOR OF HR	40.00					X	148,006.	0.	24,366.	
(4) ERICA WILEY VP DEVELOPMENT	40.00					X	152,188.	0.	15,691.	
(5) CHRIS HYNES VP BRAND MANAGEMENT	40.00					X	156,964.	0.	9,483.	
(6) SARA LEVIN VP COMMUNITY SERVICES	40.00					X	147,460.	0.	15,670.	
(7) JENNIFER JOHNSTON VP FINANCE & ADMIN	40.00					X	113,897.	0.	12,884.	
(8) CAROL NELSON BOARD CHAIR	1.00	X		X			0.	0.	0.	
(9) DAVE BURMAN CHAIR ELECT/SECRETARY	1.00	X		X			0.	0.	0.	
(10) BRENT BEARDALL TREASURER	1.00	X		X			0.	0.	0.	
(11) FRED RIVERA PAST CHAIR	1.00	X		X			0.	0.	0.	
(12) AMBIKA SINGH DIRECTOR	1.00	X					0.	0.	0.	
(13) BO LEE DIRECTOR	1.00	X					0.	0.	0.	
(14) BRADY WALKINSHAW DIRECTOR	1.00	X					0.	0.	0.	
(15) BREE KAMEENUI-RAMIREZ DIRECTOR	1.00	X					0.	0.	0.	
(16) BRIAN HALL DIRECTOR	1.00	X					0.	0.	0.	
(17) CARMEN BEST 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)	(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			
(18) CRAIG GRYNIEWICZ DIRECTOR	1.00	X					0.	0.	0.	
(19) DENISE STIFFARM DIRECTOR	1.00	X					0.	0.	0.	
(20) EDUARDO M. PEALVER DIRECTOR	1.00	X					0.	0.	0.	
(21) ERIC PETTIGREW DIRECTOR	1.00	X					0.	0.	0.	
(22) JEFF BRADLEY DIRECTOR	1.00	X					0.	0.	0.	
(23) JONATHAN BURKS DIRECTOR	1.00	X					0.	0.	0.	
(24) JONATHAN SPOSATO DIRECTOR	1.00	X					0.	0.	0.	
(25) KATE BEHNCKEN DIRECTOR	1.00	X					0.	0.	0.	
(26) KATHY SURACE-SMITH DIRECTOR	1.00	X					0.	0.	0.	
<b>1b Subtotal</b>							1,264,801.	0.	110,250.	
<b>c Total from continuation sheets to Part VII, Section A</b>							0.	0.	0.	
<b>d Total (add lines 1b and 1c)</b>							1,264,801.	0.	110,250.	

**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 7

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
<b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		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) LEIGH TONER DIRECTOR	1.00	X						0.	0.	0.
(28) LUIS MASIERI DIRECTOR	1.00	X						0.	0.	0.
(29) MALA RAMAN DIRECTOR	1.00	X						0.	0.	0.
(30) MAUD DAUDON DIRECTOR	1.00	X						0.	0.	0.
(31) MICHAEL GREER DIRECTOR	1.00	X						0.	0.	0.
(32) MICHELLE MERRIWEATHER DIRECTOR	1.00	X						0.	0.	0.
(33) MIKA YAMAMOTO DIRECTOR	1.00	X						0.	0.	0.
(34) NATHAN JAMES DIRECTOR	1.00	X						0.	0.	0.
(35) PETER ORSER DIRECTOR	1.00	X						0.	0.	0.
(36) RACHEL SMITH DIRECTOR	1.00	X						0.	0.	0.
(37) RODRIGO LOPEZ DIRECTOR	1.00	X						0.	0.	0.
(38) SANDRA MADRID DIRECTOR	1.00	X						0.	0.	0.
(39) SCOTT MEDN DIRECTOR	1.00	X						0.	0.	0.
(40) SEAN GOODE DIRECTOR	1.00	X						0.	0.	0.
(41) SHKELQIM KERMENDI DIRECTOR	1.00	X						0.	0.	0.
(42) SHOUAN PAN DIRECTOR	1.00	X						0.	0.	0.
(43) STEVE HOOPER, JR. DIRECTOR	1.00	X						0.	0.	0.
(44) 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	<b>1 a</b>	Federated campaigns	<b>1a</b>				
	<b>b</b>	Membership dues	<b>1b</b>				
	<b>c</b>	Fundraising events	<b>1c</b>	198,500.			
	<b>d</b>	Related organizations	<b>1d</b>				
	<b>e</b>	Government grants (contributions)	<b>1e</b>	49,008,335.			
	<b>f</b>	All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	50,139,337.			
	<b>g</b>	Noncash contributions included in lines 1a-1f	<b>1g</b>	\$ 9,322,543.			
	<b>h</b>	<b>Total.</b> Add lines 1a-1f		99,346,172.			
	Program Service Revenue	<b>2 a</b>	DESIGNATION PROCESSING	<b>Business Code</b>			
			900099	150,981.	150,981.		
<b>b</b>		EDUCATION & OUTREACH	900099	72,425.	72,425.		
<b>c</b>		TRAINING	900099	17,836.	17,836.		
<b>d</b>							
<b>e</b>							
<b>f</b>		All other program service revenue					
<b>g</b>	<b>Total.</b> Add lines 2a-2f		241,242.				
Other Revenue	<b>3</b>	Investment income (including dividends, interest, and other similar amounts)		125,820.		125,820.	
	<b>4</b>	Income from investment of tax-exempt bond proceeds					
	<b>5</b>	Royalties					
	<b>6 a</b>	Gross rents	(i) Real				
			(ii) Personal				
	<b>b</b>	Less: rental expenses	<b>6b</b>				
	<b>c</b>	Rental income or (loss)	<b>6c</b>				
	<b>d</b>	Net rental income or (loss)					
	<b>7 a</b>	Gross amount from sales of assets other than inventory	(i) Securities				
			(ii) Other				
				33,477,411.			
	<b>b</b>	Less: cost or other basis and sales expenses	<b>7b</b>	33,213,724.			
	<b>c</b>	Gain or (loss)	<b>7c</b>	263,687.			
	<b>d</b>	Net gain or (loss)		263,687.		263,687.	
<b>8 a</b>	Gross income from fundraising events (not including \$ 198,500. of contributions reported on line 1c). See Part IV, line 18						
			52,245.				
		<b>8a</b>					
<b>b</b>	Less: direct expenses	<b>8b</b>	218,206.				
<b>c</b>	Net income or (loss) from fundraising events		-165,961.		-165,961.		
<b>9 a</b>	Gross income from gaming activities. See Part IV, line 19						
		<b>9a</b>					
<b>b</b>	Less: direct expenses	<b>9b</b>					
<b>c</b>	Net income or (loss) from gaming activities						
<b>10 a</b>	Gross sales of inventory, less returns and allowances						
		<b>10a</b>					
<b>b</b>	Less: cost of goods sold	<b>10b</b>					
<b>c</b>	Net income or (loss) from sales of inventory						
Miscellaneous Revenue	<b>11 a</b>	UBI TAX REFUND	<b>Business Code</b>				
			900099	43,125.		43,125.	
	<b>b</b>	OTHER TAX REFUNDS	900099	19,968.		19,968.	
	<b>c</b>						
	<b>d</b>	All other revenue					
<b>e</b>	<b>Total.</b> Add lines 11a-11d		63,093.				
<b>12</b>	<b>Total revenue.</b> See instructions		99,874,053.	241,242.	0.	286,639.	

**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
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	88,105,905.	88,105,905.		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22 .....				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 .....				
<b>4</b> Benefits paid to or for members .....				
<b>5</b> Compensation of current officers, directors, trustees, and key employees .....	593,166.	249,153.	115,182.	228,831.
<b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) .....				
<b>7</b> Other salaries and wages .....	9,650,903.	4,079,633.	1,863,526.	3,707,744.
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	261,796.	98,220.	55,603.	107,973.
<b>9</b> Other employee benefits .....	1,114,228.	471,894.	214,790.	427,544.
<b>10</b> Payroll taxes .....	717,708.	269,269.	152,433.	296,006.
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management .....				
<b>b</b> Legal .....	16,026.	1,520.	11,211.	3,295.
<b>c</b> Accounting .....	83,679.	12,325.	57,465.	13,889.
<b>d</b> Lobbying .....	36,083.	32,691.	2,165.	1,227.
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees .....	32,066.		32,066.	
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch. O.)	520,867.	268,999.	156,707.	95,161.
<b>12</b> Advertising and promotion .....	220,538.	151,878.	67,847.	813.
<b>13</b> Office expenses .....	199,888.	128,731.	22,759.	48,398.
<b>14</b> Information technology .....	326,408.	157,655.	47,982.	120,771.
<b>15</b> Royalties .....				
<b>16</b> Occupancy .....	127,311.	30,402.	68,837.	28,072.
<b>17</b> Travel .....	118,358.	88,928.	17,716.	11,714.
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
<b>19</b> Conferences, conventions, and meetings .....	118,892.	7,650.	105,550.	5,692.
<b>20</b> Interest .....	516.	143.	77.	296.
<b>21</b> Payments to affiliates .....	705,142.	126,926.	472,445.	105,771.
<b>22</b> Depreciation, depletion, and amortization .....	501,831.	179,852.	156,107.	165,872.
<b>23</b> Insurance .....	62,099.	14,829.	33,577.	13,693.
<b>24</b> 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.)				
<b>a</b> EQUIPMENT RENTAL & MAIN	303,391.	134,944.	49,069.	119,378.
<b>b</b> SPECIAL EVENTS	118,001.	75,251.	42,750.	0.
<b>c</b> NEWSLETTERS & PUBLICATI	93,801.	57,332.	12,628.	23,841.
<b>d</b> SUPPLIES	82,092.	65,158.	6,869.	10,065.
<b>e</b> All other expenses	206,325.	41,538.	21,374.	143,413.
<b>25</b> Total functional expenses. Add lines 1 through 24e	104,317,020.	94,850,826.	3,786,735.	5,679,459.
<b>26</b> Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here  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
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	7,150,011.	<b>1</b>	1,332,739.
	<b>2</b> Savings and temporary cash investments .....	10,989,087.	<b>2</b>	10,512,931.
	<b>3</b> Pledges and grants receivable, net .....	34,489,827.	<b>3</b>	34,085,477.
	<b>4</b> Accounts receivable, net .....	200,510.	<b>4</b>	815,550.
	<b>5</b> 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 .....		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>	
	<b>8</b> Inventories for sale or use .....	2,000.	<b>8</b>	2,000.
	<b>9</b> Prepaid expenses and deferred charges .....	170,457.	<b>9</b>	104,255.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 19,357,121.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 12,225,802.	7,601,769.	<b>10c</b> 7,131,319.
	<b>11</b> Investments - publicly traded securities .....	6,378,646.	<b>11</b>	6,378,646.
	<b>12</b> Investments - other securities. See Part IV, line 11 .....	12,456,046.	<b>12</b>	15,781,285.
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>	
	<b>14</b> Intangible assets .....		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....	13,798.	<b>15</b>	3,272.
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	79,452,151.	<b>16</b>	76,147,474.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	4,224,741.	<b>17</b>	3,160,541.
	<b>18</b> Grants payable .....	1,516,815.	<b>18</b>	4,574,366.
	<b>19</b> Deferred revenue .....		<b>19</b>	
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....	6,132,184.	<b>21</b>	3,595,131.
	<b>22</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....	1,826,037.	<b>24</b>	0.
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D .....	29,994.	<b>25</b>	20,755.
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	13,729,771.	<b>26</b>	11,350,793.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions .....	24,240,550.	<b>27</b>	33,455,945.
	<b>28</b> Net assets with donor restrictions .....	41,481,830.	<b>28</b>	31,340,736.
	<b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds .....		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>31</b>	
	<b>32</b> Total net assets or fund balances .....	65,722,380.	<b>32</b>	64,796,681.
<b>33</b> Total liabilities and net assets/fund balances .....	79,452,151.	<b>33</b>	76,147,474.	

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	99,874,053.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	104,317,020.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	-4,442,967.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	<b>4</b>	65,722,380.
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	-3,748.
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain on Schedule O)	<b>9</b>	3,521,016.
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	<b>10</b>	64,796,681.

**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 in 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
<b>2a</b>		X
<b>2b</b>	X	
<b>2c</b>	X	
<b>3a</b>	X	
<b>3b</b>	X	

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

**2020**

Open to Public Inspection

<b>Name of the organization</b> UNITED WAY OF KING COUNTY	<b>Employer identification number</b> 91-0565555
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**Part I Reason for Public Charity Status.** (All organizations must complete this part.) See instructions.

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

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2  A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: \_\_\_\_\_
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9  An agricultural research organization described in **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 in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
  - a  **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
  - b  **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
  - c  **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
  - d  **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
  - e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
  - f Enter the number of supported organizations .....
- g Provide the following information about the supported organization(s).

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

**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) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	59,989,263.	70,136,178.	61,463,331.	79,997,758.	99,346,172.	370,932,702.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 through 3 .....	59,989,263.	70,136,178.	61,463,331.	79,997,758.	99,346,172.	370,932,702.
<b>5</b> 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) .....						88,588,117.
<b>6 Public support.</b> Subtract line 5 from line 4.						282,344,585.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>7</b> Amounts from line 4 .....	59,989,263.	70,136,178.	61,463,331.	79,997,758.	99,346,172.	370,932,702.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....	538,412.	719,424.	310,169.	245,806.	125,820.	1,939,631.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....	400,314.		47,303.			447,617.
<b>10</b> 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.	128,088.
<b>11 Total support.</b> Add lines 7 through 10						373,448,038.
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	1,143,626.
<b>13 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....						<input type="checkbox"/>

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

<b>14</b> Public support percentage for 2020 (line 6, column (f), divided by line 11, column (f)) .....	<b>14</b>	75.60 %
<b>15</b> Public support percentage from 2019 Schedule A, Part II, line 14 .....	<b>15</b>	75.22 %
<b>16a 33 1/3% support test - 2020.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input checked="" type="checkbox"/>
<b>b 33 1/3% support test - 2019.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>17a 10% -facts-and-circumstances test - 2020.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>b 10% -facts-and-circumstances test - 2019.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....		<input type="checkbox"/>



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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						

**14 First 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**

<b>15</b> Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2019 Schedule A, Part III, line 15 .....	<b>16</b>	%

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

<b>17</b> Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from 2019 Schedule A, Part III, line 17 .....	<b>18</b>	%

**19a 33 1/3% support tests - 2020.** 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 - 2019.** 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
<b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
<b>2</b> Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
<b>3a</b> 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>b</b> Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
<b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
<b>4a</b> 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>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
<b>c</b> Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in 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>		
<b>5a</b> 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>b Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
<b>c Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>6</b> Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
<b>7</b> 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 or 990-EZ).</i>		
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
<b>9a</b> Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
<b>b</b> Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>c</b> Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>10a</b> Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
<b>b</b> Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

**Part IV Supporting Organizations** (continued)

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

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> 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>		
<b>1</b>		
<b>2</b> Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		
<b>2</b>		

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in 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>		
<b>1</b>		

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
<b>1</b>		
<b>2</b> Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
<b>2</b>		
<b>3</b> By reason of the relationship described in 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>		
<b>3</b>		

**Section E. Type III Functionally Integrated Supporting Organizations**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).		
<b>2</b> Activities Test. Answer lines 2a and 2b below.		
<b>a</b> Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in 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>2a</b>		
<b>b</b> Did the activities described in 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>		
<b>2b</b>		
<b>3</b> Parent of Supported Organizations. Answer lines 3a and 3b below.		
<b>a</b> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No" provide details in Part VI.</i>		
<b>3a</b>		
<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
<b>3b</b>		

**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	<b>Adjusted Net Income</b> (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	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> 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	<b>Minimum Asset Amount</b> (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	<b>Distributable Amount.</b> 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).		

Schedule A (Form 990 or 990-EZ) 2020

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

<b>Section D - Distributions</b>		<b>Current Year</b>
<b>1</b>	Amounts paid to supported organizations to accomplish exempt purposes	<b>1</b>
<b>2</b>	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	<b>2</b>
<b>3</b>	Administrative expenses paid to accomplish exempt purposes of supported organizations	<b>3</b>
<b>4</b>	Amounts paid to acquire exempt-use assets	<b>4</b>
<b>5</b>	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i> )	<b>5</b>
<b>6</b>	Other distributions ( <i>describe in Part VI</i> ). See instructions.	<b>6</b>
<b>7</b>	<b>Total annual distributions.</b> Add lines 1 through 6.	<b>7</b>
<b>8</b>	Distributions to attentive supported organizations to which the organization is responsive ( <i>provide details in Part VI</i> ). See instructions.	<b>8</b>
<b>9</b>	Distributable amount for 2020 from Section C, line 6	<b>9</b>
<b>10</b>	Line 8 amount divided by line 9 amount	<b>10</b>

<b>Section E - Distribution Allocations</b> (see instructions)	<b>(i) Excess Distributions</b>	<b>(ii) Underdistributions Pre-2020</b>	<b>(iii) Distributable Amount for 2020</b>
<b>1</b> Distributable amount for 2020 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2020 (reasonable cause required - <i>explain in Part VI</i> ). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2020			
<b>a</b> From 2015			
<b>b</b> From 2016			
<b>c</b> From 2017			
<b>d</b> From 2018			
<b>e</b> From 2019			
<b>f</b> <b>Total</b> of lines 3a through 3e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2020 distributable amount			
<b>i</b> Carryover from 2015 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
<b>4</b> Distributions for 2020 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2020 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from line 4.			
<b>5</b> Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
<b>6</b> Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
<b>7</b> <b>Excess distributions carryover to 2021.</b> Add lines 3j and 4c.			
<b>8</b> Breakdown of line 7:			
<b>a</b> Excess from 2016			
<b>b</b> Excess from 2017			
<b>c</b> Excess from 2018			
<b>d</b> Excess from 2019			
<b>e</b> Excess from 2020			

Schedule A (Form 990 or 990-EZ) 2020

**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.

# Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury  
Internal Revenue Service

# Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

# 2020

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 or 990-EZ), 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, 990-EZ, or 990-PF), 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, 990-EZ, or 990-PF).

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/>	\$ 35,104,744.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	<hr/> <hr/> <hr/>	\$ 5,344,290.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	<hr/> <hr/> <hr/>	\$ 4,118,049.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	<hr/> <hr/> <hr/>	\$ 3,678,684.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	<hr/> <hr/> <hr/>	\$ 3,259,106.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	<hr/> <hr/> <hr/>	\$ 2,763,899.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" 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 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
7	<hr/> <hr/> <hr/>	\$ 2,145,762.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input 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
6	MARKETABLE SECURITIES _____ _____ _____	\$ 2,763,899.	12/15/20
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____

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
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

**SCHEDULE C**  
**(Form 990 or 990-EZ)**

**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

**2020**

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](http://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.

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
<b>1a</b> Total lobbying expenditures to influence public opinion (grassroots lobbying)															
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying)		66,845.													
<b>c</b> Total lobbying expenditures (add lines 1a and 1b)		66,845.													
<b>d</b> Other exempt purpose expenditures		104,405,288.													
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d)		104,472,133.													
<b>f</b> 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.														
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f)		250,000.													
<b>h</b> Subtract line 1g from line 1a. If zero or less, enter -0-		0.													
<b>i</b> Subtract line 1f from line 1c. If zero or less, enter -0-		0.													
<b>j</b> 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.)

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) Total
<b>2a</b> Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000.
<b>c</b> Total lobbying expenditures	41,621.	54,356.	60,442.	66,845.	223,264.
<b>d</b> Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
<b>f</b> 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
<b>1</b> 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:			
<b>a</b> Volunteers? .....			
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? ..			
<b>c</b> Media advertisements? .....			
<b>d</b> Mailings to members, legislators, or the public? .....			
<b>e</b> Publications, or published or broadcast statements? .....			
<b>f</b> Grants to other organizations for lobbying purposes? .....			
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body? .....			
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? .....			
<b>i</b> Other activities? .....			
<b>j</b> Total. Add lines 1c through 1i .....			
<b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? .....			
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912 .....			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .....			
<b>d</b> 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
<b>1</b> Were substantially all (90% or more) dues received nondeductible by members? .....	<b>1</b>	
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less? .....	<b>2</b>	
<b>3</b> Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? .....	<b>3</b>	

**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."**

<b>1</b> Dues, assessments and similar amounts from members .....	<b>1</b>
<b>2</b> Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	
<b>a</b> Current year .....	<b>2a</b>
<b>b</b> Carryover from last year .....	<b>2b</b>
<b>c</b> Total .....	<b>2c</b>
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .....	<b>3</b>
<b>4</b> 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? .....	<b>4</b>
<b>5</b> Taxable amount of lobbying and political expenditures (See instructions) .....	<b>5</b>

**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.

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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2020

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 Yes/No questions regarding 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 containing questions 1-9 about conservation easements, including checkboxes for various purposes, a table for lines 2a-2d, and Yes/No questions about monitoring and reporting.

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 containing questions 1a-1b and 2 about reporting art and historical treasures, with dollar amount fields for revenue and assets.

**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	12,456,046.	12,320,718.	12,270,674.	11,564,226.	10,746,443.
b Contributions					
c Net investment earnings, gains, and losses	3,855,237.	638,302.	543,742.	1,307,784.	1,377,291.
d Grants or scholarships					
e Other expenditures for facilities and programs	497,932.	473,199.	464,824.	531,998.	492,847.
f Administrative expenses	32,066.	29,775.	28,874.	69,338.	66,661.
g End of year balance	15,781,285.	12,456,046.	12,320,718.	12,270,674.	11,564,226.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment  53.0400 %
  - b Permanent endowment  46.9600 %
  - 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		7,577,419.	3,425,510.	4,151,909.
c Leasehold improvements				
d Equipment		9,427,702.	8,800,292.	627,410.
e Other				
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				7,131,319.



**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	15,781,285.	END-OF-YEAR MARKET VALUE
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶	15,781,285.	

**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)		
<b>Total.</b> (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)	
<b>Total.</b> (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	20,755.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	20,755.

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.

<b>1</b>	Total revenue, gains, and other support per audited financial statements	<b>1</b>	85,328,440.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
<b>a</b>	Net unrealized gains (losses) on investments	<b>2a</b>	3,517,268.
<b>b</b>	Donated services and use of facilities	<b>2b</b>	
<b>c</b>	Recoveries of prior year grants	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	-18,185,928.
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	-14,668,660.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	99,997,100.
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	32,066.
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	-155,113.
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	-123,047.
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.)	<b>5</b>	99,874,053.

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

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

<b>1</b>	Total expenses and losses per audited financial statements	<b>1</b>	86,254,139.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
<b>a</b>	Donated services and use of facilities	<b>2a</b>	
<b>b</b>	Prior year adjustments	<b>2b</b>	
<b>c</b>	Other losses	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	155,113.
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	155,113.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	86,099,026.
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	32,066.
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	18,185,928.
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	18,217,994.
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.)	<b>5</b>	104,317,020.

**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 -18,185,928.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

**Part XIII** Supplemental Information (continued)

FUNDRAISING EXPENSES -218,206.

UBI TAX REFUND 63,093.

TOTAL TO SCHEDULE D, PART XI, LINE 4B -155,113.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

FUNDRAISING EXPENSES 218,206.

UBI TAX REFUND -63,093.

TOTAL TO SCHEDULE D, PART XII, LINE 2D 155,113.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

PASS THROUGH DONOR DESIGNATIONS 18,185,928.



**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	250,745.		250,745.
	2	Less: Contributions	198,500.		198,500.
	3	Gross income (line 1 minus line 2)	52,245.		52,245.
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs			
	7	Food and beverages	117,663.		117,663.
	8	Entertainment			
	9	Other direct expenses	100,543.		100,543.
	10	Direct expense summary. Add lines 4 through 9 in column (d)			218,206.
11	Net income summary. Subtract line 10 from line 3, column (d)			-165,961.	

**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			
	2	Cash prizes			
Direct Expenses	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: \_\_\_\_\_





**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](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2020**

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 non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(THE) DES MOINES AREA FOODBANK P.O. BOX 98788 DES MOINES, WA 98198	91-1183154	501(C)(3)	117,500.	0.			PROGRAMMATIC INVESTMENT
30 DAY FUND INC 1314 RUGBY RD CHARLOTTESVLE, VA 22903	85-0602776	501(C)(3)	10,000.	0.			DESIGNATED GIFT
501 COMMONS 1200 12TH AVE S STE 1101 SEATTLE, WA 98144	94-3089631	501(C)(3)	11,547.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
5TH AVENUE THEATRE ASSOCIATION 1308 5TH AVE SEATTLE, WA 98101	46-3893430	501(C)(3)	21,204.	0.			DESIGNATED GIFT
ABIDE WORLDWIDE PO BOX 464 OTIS ORCHARDS, WA 99027	82-2961410	501(C)(3)	32,760.	0.			DESIGNATED GIFT
AFGHAN HEALTH INITIATIVE 30607 134TH AVE SE AUBURN, WA 98092	85-0906399	501(C)(3)	69,500.	0.			PROGRAMMATIC INVESTMENT

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 269.
- 3 Enter total number of other organizations listed in the line 1 table ▶ 7.

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

Schedule I (Form 990) 2020



**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 non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AFRICATOWN COMMUNITY LAND TRUST 1437 SOUTH JACKSON SUITE 100 SEATTLE, WA 98144	82-1710458	501(C)(3)	75,700.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
AGE UP 3801 BEACON AVE S SEATTLE, WA 98108	45-5092355	501(C)(3)	143,786.	0.			PROGRAMMATIC INVESTMENT
ALLIANCE FOR EDUCATION 509 OLIVE WAY STE 500 SEATTLE, WA 98101	91-1508191	501(C)(3)	26,500.	0.			DESIGNATED GIFT
ALLIED MEDIA PROJECTS 4126 THIRD STREET DETROIT, MI 48201	04-0559608	501(C)(3)	40,000.	0.			PROGRAMMATIC INVESTMENT
AMERICAN CANCER SOCIETY INC 250 WILLIAMS ST 4TH FLR ATLANTA, GA 30303	13-1788491	501(C)(3)	8,587.	0.			DESIGNATED GIFT
AMERICAN CIVIL LIBERTIES UNION OF WASHINGTON FOUNDATION - PO BOX 2728 - SEATTLE, WA 98111	23-7076867	501(C)(3)	5,470.	0.			DESIGNATED GIFT
AMERICAN NATIONAL RED CROSS PO BOX 73857 CHICAGO, IL 60673	53-0196605	501(C)(3)	23,842.	0.			DESIGNATED GIFT
AMERICAN POLYNESIAN ORGANIZATION 1236 S. DONOVAN STREET SEATTLE, WA 98108	45-3827860	501(C)(3)	14,424.	0.			PROGRAMMATIC INVESTMENT
AMPOWERING 11878 175TH PL NE REDMOND, WA 98052	82-1392485	501(C)(3)	65,000.	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 non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
APPLETON EDUCATION FOUNDATION INC 122 E COLLEGE AVE 1-B APPLETON, WI 54911	39-1866090	501(C)(3)	100,000.	0.			DESIGNATED GIFT
ASIAN COUNSELING AND REFERRAL 3639 MARTIN LUTHER KING JR WAY S SEATTLE, WA 98144	91-0916176	501(C)(3)	251,416.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
ATLANTIC STREET CENTER 2103 S ATLANTIC ST SEATTLE, WA 98144	91-0568710	501(C)(3)	890,246.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
AUBURN FOOD BANK, THE PO BOX 464 AUBURN, WA 98071	91-1215485	501(C)(3)	47,364.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
BACKPACK BRIGADE 4111 E MADISON ST SEATTLE, WA 98112	47-4086877	501(C)(3)	50,480.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
BALLARD FOOD BANK 5130 LEARY AVE NW SEATTLE, WA 98107	91-1428805	501(C)(3)	29,210.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
BANCHERO DISABILITY PARTNERS 13732 MIDVALE AVE N APT 103 SEATTLE, WA 98133	91-0879990	501(C)(3)	10,000.	0.			DESIGNATED GIFT
BANK OF AMERICA PO BOX 15796 WILMINGTON, DE 19886	94-1687665		88,595.	0.			PROGRAMMATIC INVESTMENT
BELLEVUE COLLEGE 3000 LANDERHOLM CIRCLE SE BELLEVUE, WA 98007	91-0819265	501(C)(3)	34,875.	0.			PROGRAMMATIC INVESTMENT

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BELLEVUE SCHOOLS FOUNDATION PO BOX 40644 BELLEVUE, WA 98015	91-1080997	501(C)(3)	10,000.	0.			DESIGNATED GIFT
BETHANY BAPTIST CHURCH 713 S HILL PARK DR PUYALLUP, WA 98373	91-0963264	501(C)(3)	6,600.	0.			DESIGNATED GIFT
BILLY GRAHAM EVANGELISTIC ASSOCIATION - 1 BILLY GRAHAM PKWY - CHARLOTTE, NC 28201	41-0692230	501(C)(3)	9,750.	0.			DESIGNATED GIFT
BLACK DIAMOND COMMUNITY CENTER PO BOX 480 BLACK DIAMOND, WA 98010	91-1111686	501(C)(3)	10,086.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
BLACK DOLLAR DAYS TASK FORCE 116 21ST AVE SEATTLE, WA 98122	91-1475024	501(C)(3)	40,000.	0.			PROGRAMMATIC INVESTMENT
BREAST CANCER RESEARCH FOUNDATION INC - 28 WEST 44TH STREET SUITE 609 - NEW YORK, NY 10036	13-3727250	501(C)(3)	15,000.	0.			DESIGNATED GIFT
BRIDGETOWN CHURCH 10500 SW NIMBUS AVE BLDG T PORTLAND, OR 97223	81-1992757	501(C)(3)	13,800.	0.			DESIGNATED GIFT
BUILDING CHANGES 1200 12TH AVE S, SUITE 1200 SEATTLE, WA 98144	91-1410450	501(C)(3)	65,000.	0.			PROGRAMMATIC INVESTMENT
BYRD BARR PLACE 722 18TH AVE. SEATTLE, WA 98122	91-0786727	501(C)(3)	87,000.	0.			PROGRAMMATIC INVESTMENT

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CALVARY CHAPEL OF CENTRALIA 2308 N PEARL ST CENTRALIA, WA 98531	26-3315252	501(C)(3)	9,750.	0.			DESIGNATED GIFT
CARES OF WASHINGTON 1833 N 105TH STREET, SUITE 202 SEATTLE, WA 98133	13-4237286	501(C)(3)	100,000.	0.			PROGRAMMATIC INVESTMENT
CASA LATINA 220 BLANCHARD SEATTLE, WA 98121	91-1689251	501(C)(3)	144,500.	0.			PROGRAMMATIC INVESTMENT
CASCADE PUBLIC MEDIA 401 MERCER ST SEATTLE, WA 98109	91-1221895	501(C)(3)	107,500.	0.			DESIGNATED GIFT
CASCADIA COLLEGE FOUNDATION 18345 CAMPUS WAY NE BOTHELL, WA 98011	91-1986593	501(C)(3)	15,000.	0.			PROGRAMMATIC INVESTMENT
CATHOLIC COMMUNITY SERVICES 100 23RD AVE S SEATTLE, WA 98144	91-1585652	501(C)(3)	428,139.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
CENTER FOR CHILDREN AND YOUTH 300 ELLIOTT AVE WEST, SUITE 360 SEATTLE, WA 98119	20-4457248	501(C)(3)	11,950.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
CENTER FOR COMMUNITY SERVICE 1301 FIFTH AVENUE, SUITE 1500 SEATTLE, WA 98101	91-1648680	501(C)(3)	147,500.	0.			PROGRAMMATIC INVESTMENT
CHARITY GLOBAL INC 40 WORTH ST RM 330 NEW YORK, NY 10013	22-3936753	501(C)(3)	9,600.	0.			DESIGNATED GIFT

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CHIEF SEATTLE CLUB 410 2ND AVENUE EXT S SEATTLE, WA 98104	91-0852503	501(C)(3)	378,210.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
CHILD CARE RESOURCES 1225 SOUTH WELLER, SUITE 300 SEATTLE, WA 98144	91-1465046	501(C)(3)	80,000.	0.			PROGRAMMATIC INVESTMENT
CHILDHAVEN 316 BROADWAY SEATTLE, WA 98122	91-0402430	501(C)(3)	21,005.	0.			DESIGNATED GIFT
CHILDRENS HOME SOCIETY OF WA PO BOX 15190 SEATTLE, WA 98115	91-0575955	501(C)(3)	996,618.	0.			PROGRAMMATIC INVESTMENT
CHINESE INFORMATION & SERVICES 611 S LANE ST SEATTLE, WA 98104	23-7438529	501(C)(3)	395,868.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
CHRISTIAN MISSIONS IN MANY LANDS MANY LANDS 2751 18TH AVENUE WALL, NJ 07719	13-2688413	501(C)(3)	6,357.	0.			DESIGNATED GIFT
CHURCH OF JESUS CHRIST OF LATTER DAY SAINTS - 50 EAST NORTH TEMPLE ST - SALT LAKE CITY, UT 84150	23-7300405	501(C)(3)	9,238.	0.			DESIGNATED GIFT
CLASSICAL 98 1 363 MERCER STREET200 SEATTLE, WA 98109	27-3067797	501(C)(3)	6,000.	0.			DESIGNATED GIFT
CLERGY COMMUNITY FOR CHILDREN & YOUTH COALITION - 1404 EAST YESLER WAY, SUITE 202 A - SEATTLE, WA 98122	91-2064753	501(C)(3)	143,786.	0.			PROGRAMMATIC INVESTMENT

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COALITION FOR REFUGEES FROM BURMA 1265 S MAIN ST., SUITE 309 SEATTLE, WA 98144	27-1458930	501(C)(3)	65,000.	0.			PROGRAMMATIC INVESTMENT
COLLEGE SUCCESS FOUNDATION 15500 SE 30TH PL STE 200 BELLEVUE, WA 98007	91-2036088	501(C)(3)	14,000.	0.			DESIGNATED GIFT
COMMUNITY PASSAGEWAYS PO BOX 28685 SEATTLE, WA 98118	81-3806946	501(C)(3)	83,786.	0.			PROGRAMMATIC INVESTMENT
COMPASS HOUSING ALLIANCE 101 N. 104TH ST SEATTLE, WA 98133	91-0578229	501(C)(3)	33,164.	0.			PROGRAMMATIC INVESTMENT
CONGOLESE INTEGRATION NETWORK 19550 INTERNATIONAL BLVD STE 103 SEATAC, WA 98188	81-3511834	501(C)(3)	44,982.	0.			PROGRAMMATIC INVESTMENT
CONGREGATIONS FOR THE HOMELESS 515 116TH AVE NE #150 BELLEVUE, WA 98004	45-3932748	501(C)(3)	40,500.	0.			PROGRAMMATIC INVESTMENT
COOPERATIVE FOR ASSISTANCE AND RELIEF EVERYWHERE INC - 151 ELLIS STREET NE - ATLANTA, GA 30303	13-1685039	501(C)(3)	110,000.	0.			DESIGNATED GIFT
CORNERSTONE COMMUNITY CHURCH PORTLAND INC - 7460 SW HUNZIKER RD STE A - TIGARD, OR 97223	42-1755583	501(C)(3)	15,000.	0.			DESIGNATED GIFT
COVENANT HOUSE 5 PENN PLAZA NEW YORK, NY 10001	13-2725416	501(C)(3)	15,000.	0.			DESIGNATED GIFT

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CRISIS CONNECTION 2901 3RD AVE STE 100 SEATTLE, WA 98121	91-0773187	501(C)(3)	102,194.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
CULTIVATE SOUTH PARK 1251 S CLOVERDALE ST UNIT B SEATTLE, WA 98108	84-4251891	501(C)(3)	64,500.	0.			PROGRAMMATIC INVESTMENT
DENISE LOUIE EDUCATION CENTER 1930 6TH AVE S STE 401 SEATTLE, WA 98134	91-1016974	501(C)(3)	30,400.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
DOCTORS WITHOUT BORDERS USA INC 333 7TH AVENUE 2ND FLOOR NEW YORK, NY 10001	13-3433452	501(C)(3)	37,000.	0.			DESIGNATED GIFT
DOWNTOWN EMERGENCY SERVICE CTR 515 3RD AVE SEATTLE, WA 98104	91-1275815	501(C)(3)	28,372.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
EAGLE VALLEY COMMUNITY FOUNDATION PO BOX 1580 VAIL, CO 81658	47-1915583	501(C)(3)	10,000.	0.			DESIGNATED GIFT
EAST AFRICAN COMMUNITY SERVICES 7050 32ND AVENUE SOUTH SEATTLE, WA 98118	91-2138852	501(C)(3)	59,500.	0.			PROGRAMMATIC INVESTMENT
EASTHUB PO BOX 971 BELLEVUE, WA 98009	85-0845003	501(C)(3)	50,000.	0.			DESIGNATED GIFT
EASTRIDGE CHURCH 24205 SE ISSAQUAH FC RD SAMMAMISH, WA 98029	91-1322980	501(C)(3)	9,000.	0.			DESIGNATED GIFT

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EASTSIDE BABY CORNER PO BOX 712 ISSAQUAH, WA 98027	91-1617032	501(C)(3)	6,565.	0.			DESIGNATED GIFT
EASTSIDE PATHWAYS P.O. BOX 913 BELLEVUE, WA 98009	45-3005820	501(C)(3)	50,000.	0.			PROGRAMMATIC INVESTMENT
EDMONDS METHODIST CHURCH 828 CASPERS ST EDMONDS, WA 98020	91-0652053	501(C)(3)	33,600.	0.			DESIGNATED GIFT
EDUCATION WITH PURPOSE FOUNDATION FOR PACIFIC ISLANDERS - 1615 W SMITH ST. APT A-204 - KENT, WA 98032	27-5022461	501(C)(3)	130,586.	0.			PROGRAMMATIC INVESTMENT
EL CENTRO DE LA RAZA 2524 16TH AVE S SEATTLE, WA 98144	91-0899927	501(C)(3)	584,727.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
EMERGENCY FEEDING PROGRAM 851 HOUSER WAY N RENTON, WA 98057	91-1902023	501(C)(3)	113,634.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
ENCOMPASS 1407 BOALCH AVE NW NORTH BEND, WA 98045	91-0825232	501(C)(3)	247,426.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
END OF LIFE WASHINGTON PO BOX 61369 SEATTLE, WA 98141	91-1412987	501(C)(3)	10,250.	0.			DESIGNATED GIFT
EQUITY IN EDUCATION COALITION 605 SW 108TH STREET SEATTLE, WA 98146	81-4447635	501(C)(3)	66,917.	0.			PROGRAMMATIC INVESTMENT

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ERITREAN ASSOCIATION IN GREATER SEATTLE - 1528 VALENTINE PL SOUTH - SEATTLE, WA 98144		501(C)(3)	104,500.	0.			PROGRAMMATIC INVESTMENT
EVERGREEN CHILDRENS ASSOCIATION 2208 NW MARKET ST STE 510 SEATTLE, WA 98107	91-1450148	501(C)(3)	6,000.	0.			DESIGNATED GIFT
EVERGREEN TREATMENT SERVICES 1700 AIRPORT WAY S SEATTLE, WA 98134	91-0903529	501(C)(3)	37,860.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
FAITH COVENANT CHURCH 1915 WASHINGTON ST SUMNER, WA 98390	91-6035117	501(C)(3)	12,610.	0.			DESIGNATED GIFT
FALIS COMMUNITY SERVICE 10615 SE 256TH ST SUITE 104 KENT, WA 98030	82-2923129	501(C)(3)	107,036.	0.			PROGRAMMATIC INVESTMENT
FAMILY WORKS 1501 N 45TH ST SEATTLE, WA 98103	91-1757277	501(C)(3)	10,552.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
FARESTART 700 VIRGINIA ST STE 300 SEATTLE, WA 98101	91-1546757	501(C)(3)	162,747.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
FARMER FROG 23210 PARADISE LAKE RD. WOODINVILLE, WA 98077	20-2112828	501(C)(3)	35,000.	0.			PROGRAMMATIC INVESTMENT
FEDERAL WAY YOUTH ACTION TEAM 1911 SW CAMPUS DR APT 653 FEDERAL WAY, WA 98023	82-4707184	501(C)(3)	43,410.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED

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FEEST - FOOD EMPOWERMENT EDUCATION & SUSTAINABILITY TEAM - 605 SW 108TH STREET - SEATTLE, WA 98146	46-2680838	501(C)(3)	144,036.	0.			PROGRAMMATIC INVESTMENT
FILIPINO COMMUNITY OF SEATTLE 5740 M. L. KING JR WAY SOUTH SEATTLE, WA 98118	91-6055858	501(C)(3)	197,436.	0.			PROGRAMMATIC INVESTMENT
FOOD LIFELINE 815 S 96TH ST SEATTLE, WA 98108	91-1090450	501(C)(3)	115,240.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
FRED HUTCHINSON CANCER RESEARCH CENTER - 1100 FAIRVIEW AVE N - SEATTLE, WA 98109	23-7156071	501(C)(3)	509,100.	0.			DESIGNATED GIFT
FRIENDS OF YOUTH 13116 NE 132ND ST KIRKLAND, WA 98034	91-0672501	501(C)(3)	39,022.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
GLOBAL-HELP ORGANIZATION 2318 FAIRVIEW AVE E UNIT 2 SEATTLE, WA 98102	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)	215,836.	0.			PROGRAMMATIC INVESTMENT
GOD IS 9254 57TH AVENUE SOUTH SEATTLE, WA 98118	81-3639951	501(C)(3)	22,800.	0.			PROGRAMMATIC INVESTMENT
GOOD SHEPHERD YOUTH OUTREACH P.O. BOX 25492 FEDERAL WAY, WA 98093	26-3713948	501(C)(3)	225,000.	0.			PROGRAMMATIC INVESTMENT

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GREEN RIVER COLLEGE FOUNDATION 12401 SE 320TH STREET AUBURN, WA 98092	51-0168649	501(C)(3)	207,000.	0.			PROGRAMMATIC INVESTMENT
GRIST MAGAZINE INC 1201 WESTERN AVENUE SEATTLE, WA 98101	06-1664153	501(C)(3)	10,000.	0.			DESIGNATED GIFT
HABITAT FOR HUMANITY INTERNATIONAL 560 NACHES AVE SW STE 110 RENTON, WA 98057	91-1342397	501(C)(3)	60,700.	0.			DESIGNATED GIFT
HAMLIN ROBINSON SCHOOL 1701 20TH AVE S SEATTLE, WA 98144	91-1344121	501(C)(3)	5,550.	0.			DESIGNATED GIFT
HERITAGE CHURCH 8803 NE 76TH ST VANCOUVER, WA 98662	91-1209733	501(C)(3)	9,750.	0.			DESIGNATED GIFT
HERZL-NER TAMID CONSERVATIVE CONGREGATION - PO BOX 574 - MERCER ISLAND, WA 98040	91-0254210	501(C)(3)	9,000.	0.			DESIGNATED GIFT
HIGHLINE AREA FOOD BANK P.O. BOX 66427 BURIEN, WA 98166	91-1665389	501(C)(3)	6,000.	0.			PROGRAMMATIC INVESTMENT
HIGHLINE COLLEGE FOUNDATION P.O. BOX 98000 M/S CV-3 DES MOINES, WA 98198-9800	23-7428279	501(C)(3)	165,000.	0.			PROGRAMMATIC INVESTMENT
HISTORICAL SOCIETY OF SEATTLE & KING COUNTY - PO BOX 80816 - SEATTLE, WA 98108	91-0513034	501(C)(3)	11,000.	0.			DESIGNATED GIFT

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HOPE FOR HEROISM 270 SOUTH HANFORD STREET STE 207 SEATTLE, WA 98134	91-2105756	501(C)(3)	46,000.	0.			DESIGNATED GIFT
HOPELINK 8990 154TH AVE NE REDMOND, WA 98052	91-0982116	501(C)(3)	98,312.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
HORN OF AFRICA SERVICES 4714 RAINIER AVE S, STE 105 SEATTLE, WA 98118	91-1897087	501(C)(3)	508,403.	0.			PROGRAMMATIC INVESTMENT
HOUSING CONNECTOR 1301 5TH AVE, SUITE 1500 SEATTLE, WA 98101	84-2100263	501(C)(3)	30,000.	0.			PROGRAMMATIC INVESTMENT
HUMANE SOCIETY FOR SEATTLE-KING CO 13212 SE EASTGATE WAY BELLEVUE, WA 98005	91-0282060	501(C)(3)	15,768.	0.			DESIGNATED GIFT
HUNGER INTERVENTION PROGRAM 3841 NE 123RD ST SEATTLE, WA 98125	26-3716527	501(C)(3)	65,100.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
ICON CHURCH 1300 NE 68TH ST SEATTLE, WA 98115	83-1560282	501(C)(3)	7,200.	0.			DESIGNATED GIFT
IMAGINE HOUSING 10604 NE 38TH PLACE STE 215 KIRKLAND, WA 98033	94-3110312	501(C)(3)	52,547.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
INTERACTION TRANSITION 1265 S MAIN STREET #305-B SEATTLE, WA 98144	51-0175651	501(C)(3)	130,000.	0.			PROGRAMMATIC INVESTMENT

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INTERCULTURAL CHILDREN & FAMILY SERVICES - 6320 EVERGREEN WAY STE. 205 - EVERETT, WA 98203	46-3280147	501(C)(3)	403,058.	0.			PROGRAMMATIC INVESTMENT
IRAQI COMMUNITY CENTER OF WASHINGTON - 10610 SE KENT KANGLEY RD SUITE 207 - KENT, WA 98030	61-1729234	501(C)(3)	314,361.	0.			PROGRAMMATIC INVESTMENT
ISSAQUAH FOOD & CLOTHING BANK 179 1ST AVE SE ISSAQUAH, WA 98027	91-1245499	501(C)(3)	12,382.	0.			DESIGNATED GIFT
JEWISH FAMILY SERVICE 1601 16TH AVE SEATTLE, WA 98122	91-0565537	501(C)(3)	62,130.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
JEWISH FEDERATION OF GREATER SEATTLE - 2033 6TH AVE STE 810 - SEATTLE, WA 98121	91-0575950	501(C)(3)	96,125.	0.			DESIGNATED GIFT
KENT FOOD BANK 515 W HARRISON ST STE 107 KENT, WA 98032	91-0881434	501(C)(3)	33,127.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
KENT YOUTH AND FAMILY SERVICES 232 2ND AVE S STE 201 KENT, WA 98032	23-7090029	501(C)(3)	5,119.	0.			DESIGNATED GIFT
KEWFOREST SCHOOL INC 11917 UNION TPKE FOREST HILLS, NY 11375	11-1666834	501(C)(3)	250,000.	0.			DESIGNATED GIFT
KIN ON HEALTH CARE CENTER 4416 S BRANDON ST SEATTLE, WA 98118	91-1620786	501(C)(3)	13,893.	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 non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KIND INC 1201 L ST NW FL 2 WASHINGTON, DC 20005	26-2763038	501(C)(3)	75,000.	0.			DESIGNATED GIFT
KINDERING 16120 NE 8TH ST BELLEVUE, WA 98008	91-0816827	501(C)(3)	128,591.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
KING COUNTY BAR ASSOCIATION 1200 5TH AVE STE 700 SEATTLE, WA 98101	91-0721603	501(C)(6)	5,910,681.	0.			PROGRAMMATIC INVESTMENT
KING COUNTY DEPT. OF COMMUNITY 401 FIFTH AVE STE 500 SEATTLE, WA 98104		501(C)(3)	640,000.	0.			PROGRAMMATIC INVESTMENT
KING COUNTY SEXUAL ASSAULT RESOURCE CENTER - 707 S GRADY WAY STE 300 - RENTON, WA 98057	91-0967255	501(C)(3)	19,600.	0.			DESIGNATED GIFT
LAKE BURIEN PRESBYTERIAN CHURCH 15003 14TH AVE SW BURIEN, WA 98166	91-0616446	501(C)(3)	12,000.	0.			DESIGNATED GIFT
LEGAL COUNSEL FOR YOUTH & CHILDREN P.O. BOX 28629 SEATTLE, WA 98118	27-3006526	501(C)(3)	17,500.	0.			PROGRAMMATIC INVESTMENT
LEGAL FOUNDATION OF WASHINGTON 1325 4TH AVE STE 1335 SEATTLE, WA 98101	91-1263533	501(C)(3)	120,000.	0.			DESIGNATED GIFT
LIFELONG AIDS ALLIANCE 210 S LUCILE STREET SEATTLE, WA 98108	91-1215715	501(C)(3)	13,495.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED

Schedule I (Form 990)

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LIFEWIRE PO BOX 6398 BELLEVUE, WA 98008	91-1190193	501(C)(3)	113,125.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
LOW INCOME HOUSING INSTITUTE 1253 S. JACKSON STREET, SUITE A SEATTLE, WA 98144	94-3155150	501(C)(3)	7,345.	0.			PROGRAMMATIC INVESTMENT
MAPLE VALLEY FOOD BANK PO BOX 322 MAPLE VALLEY, WA 98038	91-6057006	501(C)(3)	13,909.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
MAPLE VALLEY PRESBYTERIAN CHURCH 22659 SWEENEY RD SE MAPLE VALLEY, WA 98038	91-1209341	501(C)(3)	12,000.	0.			DESIGNATED GIFT
MARTHAS VILLAGE AND KITCHEN INC 83791 DATE AVE INDIO, CA 92201	33-0777892	501(C)(3)	20,000.	0.			DESIGNATED GIFT
MARYS PLACE SEATTLE 1830 9TH AVE SEATTLE, WA 98101	27-2087950	501(C)(3)	13,368.	0.			DESIGNATED GIFT
MARY'S PLACE SEATTLE 1830 9TH AVE. SEATTLE, WA 98101	27-2087950	501(C)(3)	65,000.	0.			PROGRAMMATIC INVESTMENT
MERCY HOUSING NORTHWEST 6930 MARTIN LUTHER KING JR. WAY S. SEATTLE, WA 98118	91-1546525	501(C)(3)	6,300.	0.			PROGRAMMATIC INVESTMENT
METROPOLITAN SEATTLE JEWISH DAY SCHOOL - 15749 NE 4TH ST - BELLEVUE, WA 98008	91-1085790	501(C)(3)	11,800.	0.			DESIGNATED GIFT

Schedule I (Form 990)

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MILLIONAIR CLUB 2515 WESTERN AVE SEATTLE, WA 98121	91-0607513	501(C)(3)	68,065.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
MOMENTUM UNLIMITED INC 6101 EXECUTIVE BLVD STE 240 ROCKVILLE, MD 20852	38-3852989	501(C)(3)	20,000.	0.			DESIGNATED GIFT
MOTHER NATION 4250 S MEAD ST SEATTLE, WA 98118	46-2691773	501(C)(3)	300,100.	0.			PROGRAMMATIC INVESTMENT
MULTI-SERVICE CENTER PO BOX 23699 FEDERAL WAY, WA 98093	23-7120815	501(C)(3)	205,800.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
MUSLIM HOUSING SERVICES 6727 RAINIER AVE. S #26 SEATTLE, WA 98118	91-1987910	501(C)(3)	107,907.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
NATIVE PROGRAM COMMITTEE 814 NE 40TH ST SEATTLE, WA 98105	82-2361294	501(C)(3)	25,000.	0.			PROGRAMMATIC INVESTMENT
NEIGHBORHOOD HOUSE 1225 S WELLER STREET, SUITE 510 SEATTLE, WA 98144	91-0568305	501(C)(3)	4,373,813.	0.			PROGRAMMATIC INVESTMENT
NEW BIRTH FULL GOSPEL PENTECOSTAL MINISTRIES - 6516 42ND AVE S - SEATTLE, WA 98118	45-2414529	501(C)(3)	20,000.	0.			PROGRAMMATIC INVESTMENT
NORDIC HERITAGE MUSEUM FOUNDATION 2655 NW MARKET ST SEATTLE, WA 98107	91-1107537	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.)

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NORTH HELPLINE 12736 33RD AVE NE SEATTLE, WA 98125	91-1475182	501(C)(3)	33,500.	0.			PROGRAMMATIC INVESTMENT
NORTH SEATTLE COMMUNITY COLLEGE FOUNDATION - 600 UNIVERSITY STREET, SUITE 2409 - SEATTLE, WA 98101	91-1163554	501(C)(3)	101,100.	0.			PROGRAMMATIC INVESTMENT
NORTHWEST ANIMAL RIGHTS NETWORK 1037 NE 65TH ST #174 SEATTLE, WA 98115	91-1341059	501(C)(3)	104,500.	0.			PROGRAMMATIC INVESTMENT
NORTHWEST HARVEST PO BOX 12272 SEATTLE, WA 98102	91-0826037	501(C)(3)	34,850.	0.			DESIGNATED GIFT
NORTHWEST IMMIGRANTS RIGHTS PROJECT - 615 2ND AVE STE 400 - SEATTLE, WA 98104	91-1393082	501(C)(3)	50,075.	0.			DESIGNATED GIFT
NORTHWEST SEATTLE GAMBIAN ASSOCIATION - PO BOX 33178 - SEATTLE, WA 98133	81-1954824	501(C)(3)	40,000.	0.			PROGRAMMATIC INVESTMENT
OPEN DOORS FOR MULTICULTURAL FAMILIES - 24437 RUSSELL ROAD SUITE 110 - KENT, WA 98032	27-1206272	501(C)(3)	1,194,453.	0.			PROGRAMMATIC INVESTMENT
OPERATION MOBILIZATION PO BOX 444 TYRONE, GA 30290	22-2513811	501(C)(3)	12,594.	0.			DESIGNATED GIFT
OPERATION SACK LUNCH PO BOX 4128 SEATTLE, WA 98194	91-1658187	501(C)(3)	14,377.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED

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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ORGANIZATIONAL RESEARCH SVCS. 1100 OLIVE WAY SEATTLE, WA 98101	91-1588023		28,570.	0.			PROGRAMMATIC INVESTMENT
OVERLAKE HOSPITAL FOUNDATION 1035 116TH AVE NE BELLEVUE, WA 98004	91-1050325	501(C)(3)	6,000.	0.			DESIGNATED GIFT
PACIFIC SCIENCE CENTER FOUNDATION 200 2ND AVE N SEATTLE, WA 98109	91-0750867	501(C)(3)	20,416.	0.			DESIGNATED GIFT
PAID BY FISCAL AGENT 720 SECOND AVE SEATTLE, WA 98104		501(C)(3)	9,718,600.	0.			DESIGNATED GIFT
PAN AFRICAN CENTER FOR EMPOWERMENT 1201 3RD AVE STE 150 SEATTLE, WA 98144	47-4502267	501(C)(3)	70,000.	0.			PROGRAMMATIC INVESTMENT
PARA LOS NINOS DE HIGHLINE 15220 6TH AVE SW BURIEN, WA 98166	20-0502368	501(C)(3)	123,786.	0.			PROGRAMMATIC INVESTMENT
PATH 2201 WESTLAKE AVE STE 200 SEATTLE, WA 98121	91-1157127	501(C)(3)	70,000.	0.			DESIGNATED GIFT
PHILANTHROPY NORTHWEST 2101 4TH AVENUE, SUITE 650 SEATTLE, WA 98121	91-1110995	501(C)(3)	14,000.	0.			PROGRAMMATIC INVESTMENT
PIKE MARKET SENIOR CENTER 85 PIKE STREET STE 200 SEATTLE, WA 98101	91-1034838	501(C)(3)	30,400.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED

Schedule I (Form 990)

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PLANNED PARENTHOOD FEDERATION OF AMERICA - 123 WILLIAM ST 10TH FLOOR - NEW YORK, NY 10038	13-1644147	501(C)(3)	15,000.	0.			DESIGNATED GIFT
PLANNED PARENTHOOD OF THE GREAT NORTHWEST AND THE HAWAIIAN ISLANDS - 2001 E MADISON ST - SEATTLE, WA 98122	91-0686012	501(C)(3)	80,522.	0.			DESIGNATED GIFT
PLYMOUTH HOUSING 2113 3RD AVE SEATTLE, WA 98121	91-1122621	501(C)(3)	319,331.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
PORTLAND RESCUE MISSION PO BOX 3713 PORTLAND, OR 97208	93-0429004	501(C)(3)	5,370.	0.			DESIGNATED GIFT
POTLATCH FUND 815 1ST AVENUE SEATTLE, WA 98104	73-1712905	501(C)(3)	30,000.	0.			PROGRAMMATIC INVESTMENT
POWERFUL VOICES 1620 18TH AVE #100 SEATTLE, WA 98122	91-1679907	501(C)(3)	106,786.	0.			PROGRAMMATIC INVESTMENT
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	94-3104375	501(C)(3)	10,800.	0.			DESIGNATED GIFT
PUGET SOUND LABOR AGENCY 2800 FIRST AVE, ROOM 126 SEATTLE, WA 98121	91-0927902	501(C)(3)	18,000.	0.			PROGRAMMATIC INVESTMENT

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RAINIER ATHLETES 17215 SE 29TH CT BELLEVUE, WA 98008	81-3280079	501(C)(3)	33,000.	0.			PROGRAMMATIC INVESTMENT
RAINIER BEACH ACTION COALITION 3703 S EDMUNDS STREET #19 SEATTLE, WA 98118	20-3758788	501(C)(3)	50,250.	0.			PROGRAMMATIC INVESTMENT
RAINIER VALLEY CORPS 1225 S. WELLER ST SEATTLE, WA 98144	47-4257834	501(C)(3)	410,778.	0.			PROGRAMMATIC INVESTMENT
RAINIER VALLEY FOOD BANK 4205 RAINIER AVE S SEATTLE, WA 98118	91-1500768	501(C)(3)	38,830.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
REACH 3604 NE 10TH CRT RENTON, WA 98056	46-1187669	501(C)(3)	126,250.	0.			PROGRAMMATIC INVESTMENT
RECLAIMING OUR GREATNESS PO BOX 1385 RENTON, WA 98057	84-5039413	501(C)(3)	187,250.	0.			PROGRAMMATIC INVESTMENT
RED EAGLE SOARING P.O. BOX 20175 SEATTLE, WA 98102	91-1862731	501(C)(3)	139,786.	0.			PROGRAMMATIC INVESTMENT
REFUGEE WOMENS ALLIANCE 4008 MARTIN LUTHER KING, JR. SEATTLE, WA 98108	91-1296964	501(C)(3)	60,000.	0.			PROGRAMMATIC INVESTMENT
RENTON PARK CHAPEL 16760 128TH AVE SE RENTON, WA 98058	91-1286970	501(C)(3)	42,486.	0.			DESIGNATED GIFT

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RESTORE & REPAIR MISSIONARY OUTREACH - 12629 RENTON AVE S. SUITE F - SEATTLE, WA 98178	11-3840738	501(C)(3)	64,750.	0.			PROGRAMMATIC INVESTMENT
RONALD MCDONALD HOUSE CHARITIES OF WESTERN WASHINGTON & ALASKA - 5130 40TH AVE NE - SEATTLE, WA 98105	91-1061043	501(C)(3)	14,204.	0.			DESIGNATED GIFT
ROSLYN PRESBYTERIAN CHURCH PO BOX 247 ROSLYN, WA 98941	91-1225028	501(C)(3)	15,000.	0.			DESIGNATED GIFT
RWANDA GIRLS INITIATIVE PO BOX 325 MEDINA, WA 98039	26-3503023	501(C)(3)	10,000.	0.			DESIGNATED GIFT
SAFEWAY INC PO BOX 742918 LOS ANGELES, CA 90074	94-3019135		1,803,403.	0.			PROGRAMMATIC INVESTMENT
SALVATION ARMY - SEATTLE 111 QUEEN ANNE AVE N SEATTLE, WA 98109	91-0565002	501(C)(3)	117,354.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
SCHOOL'S OUT WASHINGTON 801 23RD AVENUE SOUTH, SUITE A SEATTLE, WA 98144	91-0482890	501(C)(3)	30,000.	0.			PROGRAMMATIC INVESTMENT
SCHWAB CHARITABLE FUND 211 MAIN STREET SAN FRANCISCO, CA 94105	31-1640316	501(C)(3)	50,000.	0.			DESIGNATED GIFT
SEATTLE AQUARIUM SOCIETY-SEAS 1483 ALASKAN WAY PIER 59 SEATTLE, WA 98101	91-1189249	501(C)(3)	10,000.	0.			DESIGNATED GIFT

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SEATTLE ART MUSEUM 1300 1ST AVE SEATTLE, WA 98101	91-0640788	501(C)(3)	31,500.	0.			DESIGNATED GIFT
SEATTLE CHILDRENS HOSPITAL FOUNDATION - PO BOX 5371 MSC RC-507 - SEATTLE, WA 98145	91-1156519	501(C)(3)	55,684.	0.			DESIGNATED GIFT
SEATTLE COLLEGES 1500 HARVARD AVENUE SEATTLE, WA 98122	91-0826872		155,000.	0.			PROGRAMMATIC INVESTMENT
SEATTLE COLLEGES FOUNDATION 1500 HARVARD AVE SEATTLE, WA 98122	83-0551671	501(C)(3)	362,500.	0.			DESIGNATED GIFT
SEATTLE EDUCATION ACCESS 6920 ROOSEVELT WAY NE, #355 SEATTLE, WA 98115	04-3602577	501(C)(3)	550,744.	0.			PROGRAMMATIC INVESTMENT
SEATTLE FOUNDATION 1601 5TH AVE STE 1900 SEATTLE, WA 98101	91-6013536	501(C)(3)	317,540.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
SEATTLE GIRLS SCHOOL 2706 S JACKSON ST SEATTLE, WA 98144	91-2007300	501(C)(3)	50,000.	0.			DESIGNATED GIFT
SEATTLE INDIAN HEALTH BOARD 611 - 12TH AVENUE SUITE 200 SEATTLE, WA 98144	91-0877683	501(C)(3)	100,100.	0.			PROGRAMMATIC INVESTMENT
SEATTLE MENNONITE CHURCH 3120 NE 125TH STREET SEATTLE, WA 98125	91-1447896	501(C)(3)	20,000.	0.			PROGRAMMATIC INVESTMENT

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SEATTLE PARKS FOUNDATION 105 S MAIN ST STE 235 SEATTLE, WA 98104	91-1998597	501(C)(3)	10,100.	0.			DESIGNATED GIFT
SEATTLE UNIVERSITY 901 12TH AVE ADMIN 120 SEATTLE, WA 98122	91-1130769	501(C)(3)	20,850.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
SEATTLE-KING COUNTY PUBLIC HLTH 401 FIFTH AVENUE, STE 1300 SEATTLE, WA 98104		GOVERNMENT	50,000.	0.			PROGRAMMATIC INVESTMENT
SEATTLES UNION GOSPEL MISSION 3800 S OTHELLO ST SEATTLE, WA 98118	91-0595029	501(C)(3)	27,702.	0.			DESIGNATED GIFT
SEREOLUPI NOMADIC EDUCATION FOUNDATION INC - 104 WOOSTER STREET APT PHN - NEW YORK, NY 10012	41-2189604	501(C)(3)	5,250.	0.			DESIGNATED GIFT
SHORELINE COMMUNITY COLLEGE 16101 GREENWOOD AVE N SHORELINE, WA 98133	91-0822848		62,770.	0.			PROGRAMMATIC INVESTMENT
SHORELINE COMMUNITY COLLEGE FOUNDATION - 16101 GREENWOOD AVE N, ROOM 1005 - SHORELINE, WA 98133	91-1265475	501(C)(3)	125,000.	0.			PROGRAMMATIC INVESTMENT
SKAGITONIANS TO PRESERVE FARMLAND PO BOX 2405 MOUNT VERNON, WA 98273	91-1484503	501(C)(3)	7,500.	0.			DESIGNATED GIFT
SNOQUALMIE VALLEY SHELTER SERVICES 7829 CENTER BLVD SE, SUITE 239 SNOQUALMIE, WA 98065	81-5104730	501(C)(3)	30,000.	0.			PROGRAMMATIC INVESTMENT

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SOCIETY OF ST VINCENT DE PAUL SEA/KING CO - 5950 4TH AVE S - SEATTLE, WA 98108	91-0583891	501(C)(3)	52,107.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
SOLID GROUND 1501 N 45TH ST SEATTLE, WA 98103	23-7421892	501(C)(3)	2,333,111.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
SOMALI FAMILY SAFETY TASK FORCE PO BOX 8611 SEATTLE, WA 98118	46-4692924	501(C)(3)	64,500.	0.			PROGRAMMATIC INVESTMENT
SOMALI HEALTH BOARD 545 ANDOVER PARK WEST, SUITE 105 TUKWILA, WA 98188	46-5114580	501(C)(3)	40,000.	0.			PROGRAMMATIC INVESTMENT
SOMALI YOUTH AND FAMILY CLUB 19550 INTERNATIONAL BLVD, SUITE 106 SEATAC, WA 98188	27-0377330	501(C)(3)	20,000.	0.			PROGRAMMATIC INVESTMENT
SOUND 6400 SOUTHCENTER BLVD TUKWILA, WA 98188	91-0818971	501(C)(3)	10,540.	0.			PROGRAMMATIC INVESTMENT
SOUND CHILD CARE SOLUTIONS 1225 SOUTH WELER STREET SEATTLE, WA 98144	02-0551791		30,000.	0.			PROGRAMMATIC INVESTMENT
SOUTHEAST YOUTH & FAMILY SVCS. 3722 S HUDSON ST SEATTLE, WA 98118	91-1036750	501(C)(3)	380,016.	0.			PROGRAMMATIC INVESTMENT
SOUTHWEST YOUTH & FAMILY SVCS. 4555 DELRIDGE WAY SW SEATTLE, WA 98106	91-1036750	501(C)(3)	1,313,254.	0.			PROGRAMMATIC INVESTMENT

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ST MATTHEWS EVANGELICAL LUTHERAN CHURCH - 1700 EDMONDS AVE NE - RENTON, WA 98056	91-1019006	501(C)(3)	13,500.	0.			DESIGNATED GIFT
ST MONICAS PARISH 4301 88TH AVE SE MERCER ISLAND, WA 98040	91-0724244	501(C)(3)	30,000.	0.			DESIGNATED GIFT
SUSTAINABLE SEATTLE 7511 GREENWOOD AVE N #121 SEATTLE, WA 98103	31-1580932	501(C)(3)	64,500.	0.			PROGRAMMATIC INVESTMENT
TECHNOLOGY ACCESS FOUNDATION 605 SW 108TH ST SEATTLE, WA 98146	91-1731833	501(C)(3)	537,400.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
THE AGAINST MALARIA FOUNDATION 301 W 20TH ST STE 300 KANSAS CITY, MO 64108	20-3069841	501(C)(3)	10,000.	0.			DESIGNATED GIFT
THE CARTER CENTER INC 453 JOHN LEWIS FREEDOM PKWY NE ATLANTA, GA 30307	58-1454716	501(C)(3)	15,000.	0.			DESIGNATED GIFT
THE COMMUNITY LEADERS ROUNDTABLE OF SEATTLE - 1416 SW 151ST ST - BURIE, WA 98166	46-4242313	501(C)(3)	10,990.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
THE KLINE GALLAND CENTER 7500 SEWARD PARK AVE S SEATTLE, WA 98118	91-1154904	501(C)(3)	6,000.	0.			DESIGNATED GIFT
THE LEGACY INSTITUTE PO BOX 82746 KENMORE, WA 98028	91-2168381	501(C)(3)	8,400.	0.			DESIGNATED GIFT

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THE MOUNTAINS TO SOUND GREENWAY TR 2701 1ST AVE STE 240 SEATTLE, WA 98121	91-1531234	501(C)(3)	10,000.	0.			DESIGNATED GIFT
THE SEATTLE ACADEMY OF ARTS AND SCIENCES - 1201 E UNION ST - SEATTLE, WA 98122	91-1223580	501(C)(3)	100,400.	0.			DESIGNATED GIFT
THE SOPHIA WAY 11061 NE 2ND ST BELLEVUE, WA 98004	45-4084539	501(C)(3)	53,200.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
TRAC ASSOCIATES 215 SIXTH AVE N, STE 100 SEATTLE, WA 98109	91-1247183		95,000.	0.			PROGRAMMATIC INVESTMENT
TREEHOUSE 2100 24TH AVE S STE 200 SEATTLE, WA 98144	91-1425676	501(C)(3)	37,172.	0.			DESIGNATED GIFT
TRINITY EVANGELICAL LUTHERAN CHURCH - 2324 LOMBARD AVE - EVERETT, WA 98201	91-6036559	501(C)(3)	37,830.	0.			DESIGNATED GIFT
TRUSTEES OF COLUMBIA UNIVERSITY IN THE CITY OF NEW YORK - 615 WEST 131 STREET 3RD FLOOR - NEW YORK, NY 10027	13-5598093	501(C)(3)	250,000.	0.			DESIGNATED GIFT
TUKWILA PANTRY 3118 S 140TH ST TUKWILA, WA 98168	75-2974441	501(C)(3)	8,130.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
UNITED INDIANS OF ALL TRIBES PO BOX 99100 SEATTLE, WA 98139	91-0889016	501(C)(3)	452,243.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED

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 non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED METHODIST CHURCH 9001 9TH AVE SE SEATTLE, WA 98106	32-0599444	501(C)(3)	27,300.	0.			PROGRAMMATIC INVESTMENT
UNITED NEGRO COLLEGE FUND INC 1805 7TH STREET NW WASHINGTON, DC 20001	13-1624241	501(C)(3)	384,068.	0.			DESIGNATED GIFT
UNITED SERVICES ORGANIZATIONS 17801 INTERNATIONAL BLVD PMB 313 SEATAC, WA 98158	91-0573116	501(C)(3)	5,737.	0.			DESIGNATED GIFT
UNITED WAY OF CORINTH AND ALCORN COUNTY - PO BOX 1104 - CORINTH, MS 38835	64-0333592	501(C)(3)	122,000.	0.			DESIGNATED GIFT
UNITED WAY OF KITSAP COUNTY 6454TH ST SUITE 101 BREMERTON, WA 98337	91-0623990	501(C)(3)	14,581.	0.			DESIGNATED GIFT
UNITED WAY OF SNOHOMISH COUNTY 3120 MCDUGALL AVE STE 200 EVERETT, WA 98201	91-0606507	501(C)(3)	16,780.	0.			DESIGNATED GIFT
UNIVERSITY DISTRICT FOOD BANK 5017 ROOSEVELT WAY NE SEATTLE, WA 98105	91-1224834	501(C)(3)	11,000.	0.			PROGRAMMATIC INVESTMENT
UNIVERSITY OF DENVER 2199 S UNIVERSITY BLVD DENVER, CO 80210	84-0404231	501(C)(3)	60,000.	0.			DESIGNATED GIFT
UNIVERSITY OF WASHINGTON 4300 ROOSEVELT WAY NE 3RD FLOOR SEATTLE, WA 98105	91-6001537	501(C)(3)	110,000.	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 non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF WASHINGTON FOUNDATION - 4333 BROOKLYN AVE NE - SEATTLE, WA 98195	94-3079432	501(C)(3)	583,788.	0.			DESIGNATED GIFT
UNIVERSITY PRESBYTERIAN CHURCH 4540 15TH AVE NE SEATTLE, WA 98105	91-0564756	501(C)(3)	8,500.	0.			DESIGNATED GIFT
URBAN LEAGUE OF METROPOLITAN 105 14TH AVENUE SEATTLE, WA 98122	91-0575954	501(C)(3)	4,673,961.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
VASHON MAURY COMMUNITY FOOD PO BOX 1205 VASHON, WA 98070	94-3165664	501(C)(3)	27,130.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
VINE MAPLE PLACE PO BOX 1092 MAPLE VALLEY, WA 98038	91-2082308	501(C)(3)	65,000.	0.			PROGRAMMATIC INVESTMENT
VOICES OF TOMORROW 15811 AMBAUM BLVD SW BURIEN, WA 98166	46-5211499	501(C)(3)	570,188.	0.			PROGRAMMATIC INVESTMENT
WAPIFASA 3722 S. HUDSON STREET SEATTLE, WA 98118	91-1586900	501(C)(3)	100,000.	0.			PROGRAMMATIC INVESTMENT
WASHINGTON STEM CENTER 210 S HUDSON ST SEATTLE, WA 98134	27-2133169	501(C)(3)	1,000,000.	0.			DESIGNATED GIFT
WASHINGTONS NATIONAL PARK FUND 1904 THIRD AVE SEATTLE, WA 98101	01-0869799	501(C)(3)	500,000.	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 non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WEDONTWASTE INC 5971 BROADWAY DENVER, CO 80216	27-0585966	501(C)(3)	10,000.	0.			DESIGNATED GIFT
WELLSPRING FAMILY SERVICES 1900 RAINIER AVENUE SOUTH SEATTLE, WA 98144	91-0567261	501(C)(3)	3,603,714.	0.			PROGRAMMATIC INVESTMENT
WEST AFRICAN COMMUNITY COUNCIL 6322 44TH AVENUE SOUTH SEATTLE, WA 98118	46-2838797	501(C)(3)	375,790.	0.			PROGRAMMATIC INVESTMENT
WEST SEATTLE FOOD BANK 3419 SW MORGAN ST SEATTLE, WA 98126	91-1464412	501(C)(3)	39,325.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
WESTSIDE BIBLE FELLOWSHIP 526 SE 9TH AVE HILLSBORO, OR 97123	93-0775006	501(C)(3)	8,970.	0.			DESIGNATED GIFT
WHITE CENTER FOOD BANK 10829 8TH AVE SW SEATTLE, WA 98146	91-1167830	501(C)(3)	21,980.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
WISCONSIN LUTHERAN CHILD AND FAMILY SERVICE INC - W175 N11120 STONEWOOD DR - GERMANTOWN, WI 53022	39-1047224	501(C)(3)	7,200.	0.			DESIGNATED GIFT
WITHINREACH 155 NE 100TH ST, SUITE 500 SEATTLE, WA 98125	91-1443685	501(C)(3)	40,000.	0.			PROGRAMMATIC INVESTMENT
WONDER OF WOMEN INTERNATIONAL 115 PREFONTAINE PL S #510 SEATTLE, WA 98104	81-4221805	501(C)(3)	9,450.	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 non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WOOD RIVER JEWISH COMMUNITY INC PO BOX 837 KETCHUM, ID 83340	82-0407350	501(C)(3)	30,000.	0.			DESIGNATED GIFT
WORLD VISION INTERNATIONAL 800 W CHESTNUT AVE MONROVIA, CA 91016	95-3202116	501(C)(3)	5,468.	0.			DESIGNATED GIFT
YEAR UP INC 45 MILK STREET 9TH FLOOR BOSTON, MA 02109	04-3534407	501(C)(3)	30,000.	0.			DESIGNATED GIFT
YES FOUNDATION OF WHITE CENTER PO BOX 47260 SEATTLE, WA 98146	91-2037236	501(C)(3)	40,000.	0.			PROGRAMMATIC INVESTMENT
YMCA OF GREATER SEATTLE 909 4TH AVE SEATTLE, WA 98104	91-0482710	501(C)(3)	494,665.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
YOUNG LIFE 420 N CASCADE AVE COLORADO SPGS, CO 80903	84-0385934	501(C)(3)	13,658.	0.			DESIGNATED GIFT
YOUTH EASTSIDE SERVICES 999 164TH AVE NE BELLEVUE, WA 98008	91-0849093	501(C)(3)	8,218.	0.			DESIGNATED GIFT
YOUTHCARE 2500 NE 54TH ST 100 SEATTLE, WA 98105	91-0917079	501(C)(3)	142,020.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED
YWCA OF SEATTLE KING COUNTY & 1118 5TH AVE SEATTLE, WA 98101	91-0482890	501(C)(3)	634,869.	0.			PROGRAMMATIC INVESTMENT & DESIGNATED

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

**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 GRANTEEES, 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)**

Department of the Treasury  
Internal Revenue Service

**Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees  
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.  
 ▶ Attach to Form 990.  
 ▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2020**

Open to Public Inspection

Name of the organization

UNITED WAY OF KING COUNTY

Employer identification number

91-0565555

**Part I Questions Regarding Compensation**

**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"/> Housing allowance or residence for personal use          |
| <input type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence          |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input checked="" type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account            | <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 .....

**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? .....

**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 checked="" type="checkbox"/> Written employment contract                     |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input type="checkbox"/> Form 990 of other organizations     | <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? .....
- b** Participate in or receive payment from a supplemental nonqualified retirement plan? .....
- c** Participate in or receive payment from an equity-based compensation arrangement? .....
- 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? .....
- b** Any related organization? .....
- 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? .....
- b** Any related organization? .....
- 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 .....

**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 .....

**9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? .....

	Yes	No
<b>1b</b>	X	
<b>2</b>	X	
<b>4a</b>		X
<b>4b</b>		X
<b>4c</b>		X
<b>5a</b>		X
<b>5b</b>		X
<b>6a</b>		X
<b>6b</b>		X
<b>7</b>		X
<b>8</b>		X
<b>9</b>		

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

Schedule J (Form 990) 2020

**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 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)	367,983.	0.	0.	0.	15,213.	383,196.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) DARRELL POWELL COO	(i)	178,303.	0.	0.	8,286.	8,657.	195,246.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) JIM YEARBY DIRECTOR OF HR	(i)	148,006.	0.	0.	6,519.	17,847.	172,372.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) ERICA WILEY VP DEVELOPMENT	(i)	152,188.	0.	0.	7,653.	8,038.	167,879.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) CHRIS HYNES VP BRAND MANAGEMENT	(i)	156,964.	0.	0.	7,802.	1,681.	166,447.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) SARA LEVIN VP COMMUNITY SERVICES	(i)	147,460.	0.	0.	7,632.	8,038.	163,130.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(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.

PART I, LINE 1A:

UNITED WAY OF KING COUNTY PAYS FOR AN ATHLETIC CLUB MEMBERSHIP FOR THE

CHIEF EXECUTIVE OFFICER AND DOES NOT INCLUDE IT AS TAXABLE WAGES.

**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2020**

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](http://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	66	9,312,902.	FAIR MARKET VALUE
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ( OTHER MISC. )	X	1	9,641.	FAIR MARKET VALUE
26 Other ( )				
27 Other ( )				
28 Other ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29** 0

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		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?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		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.		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2020

**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 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

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

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

**2020**

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:

STUDENTS GRADUATE AND FAMILIES ARE FINACIALLY STABLE. OUR MISSION IS TO

BRING CARING PEOPLE TOGETHER TO GIVE, VOLUNTEER AND TAKE ACTION TO HELP

PEOPLE IN NEED AND SOLVE OUR COMMUNITY'S TOUGHEST CHALLENGES.

FORM 990, PART I, LINE 6:

THE ESTIMATE OF 42,567 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 1, DESCRIPTION OF ORGANIZATION MISSION:

DONE. TOGETHER WE ARE WORKING TOWARDS A RACIALLY JUST COMMUNITY WHERE

ALL PEOPLE HAVE HOMES, STUDENTS GRADUATE AND FAMILIES ARE FINANCIALLY

STABLE.

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 \$ 4,692,492. INCLUDING GRANTS OF \$ 3,996,108. REVENUE \$ 90,261

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

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

Schedule O (Form 990 or 990-EZ) 2020

Name of the organization UNITED WAY OF KING COUNTY	Employer identification number 91-0565555
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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 \$ 2,867,446. INCLUDING GRANTS OF \$ 2,659,660. REVENUE \$ 0.

DONOR DESIGNATIONS - CONTRIBUTIONS THAT ARE DESIGNATED TO NONPROFIT

ORGANIZATIONS OTHER THAN UNITED WAY OF KING COUNTY.

EXPENSES \$ 18,185,928. INCL GRANTS OF \$ 18,185,928. REVENUE \$ 150,981.

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

THE REVIEW OF THE FORM 990 IS INITIALLY COMPLETED BY THE CONTROLLER, SR.

DIRECTOR OF FINANCIAL OPERATIONS, AND THE COO. THE FORM 990 WILL BE

PROVIDED TO FINANCE AND AUDIT COMMITTEE MEMBERS TO REVIEW AND PROVIDE

FEEDBACK, COMMENTS, OR SUGGESTIONS PRIOR TO FILING THE FORM 990 WITH THE

IRS. THE FINAL RETURN WILL BE PROVIDED TO THE BOARD OF DIRECTORS AT THE

NEXT SCHEDULED MEETING.

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

Name of the organization UNITED WAY OF KING COUNTY	Employer identification number 91-0565555
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UWKC CEO'S PAY IS SET AT THE MEDIAN OF SALARIES FOR METRO UWS CEOS (ANNUAL

BUDGET ABOVE 25 MILLION). ANNUAL BONUS IS SET BY THE BOARD AT THEIR

DISCRETION USING ANNUAL UWKC PERFORMANCE.

ANNUALLY, THE CEO'S SALARY IS REVIEWED BY THE EXECUTIVE COMMITTEE AND

APPROVED BY THE BOARD. ANNUALLY, THE CHIEF OPERATING OFFICER'S AND THE VICE

PRESIDENTS SALARIES ARE REVIEWED AND APPROVED BY THE CHIEF EXECUTIVE

OFFICER.

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	\$40,367,217 AS REPORTED ON FORM 990
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LESS DONOR DESIGNATIONS	\$18,185,928
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NET CAMPAIGN REVENUE	\$22,181,289
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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	\$88,105,905 AS REPORTED ON FORM 990
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LESS DONOR DESIGNATIONS	\$18,185,928
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Name of the organization UNITED WAY OF KING COUNTY	Employer identification number 91-0565555
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NET FUNDS AWARDED \$69,919,977

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

CHANGE IN BENEFICIAL INTEREST IN TRUST 3,521,016.