

Form **990**

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

2018

Department of the Treasury
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

A For the 2018 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization GREATER TACOMA COMMUNITY FOUNDATION Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite 950 PACIFIC AVENUE, SUITE 1100 City or town, state or province, country, and ZIP or foreign postal code TACOMA, WA 98402 F Name and address of principal officer: MOHAMMAD MOUSA SAME AS C ABOVE	D Employer identification number ** - * * * * * E Telephone number (253) 383-5622 G Gross receipts \$ 39,212,327. H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
J Website: ▶ WWW.GTCF.ORG		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		
L Year of formation: 1977		M State of legal domicile: WA

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: PHILANTHROPIC SERVICES, FUNDING, STEWARDSHIP AND SUPPORT FOR A THRIVING PIERCE COUNTY IN PERPETUITY 2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 3 13 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 13 5 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 5 21 6 Total number of volunteers (estimate if necessary) 6 60 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. 7b Net unrelated business taxable income from Form 990-T, line 38 7b 31,544.	
Revenue	8 Contributions and grants (Part VIII, line 1h) Prior Year 6,577,084. Current Year 10,962,243. 9 Program service revenue (Part VIII, line 2g) 0. 0. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 3,690,581. 5,581,427. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 128,582. 142,373. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 10,396,247. 16,686,043.	
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 6,607,964. 5,875,300. 14 Benefits paid to or for members (Part IX, column (A), line 4) 0. 0. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 1,722,726. 1,781,009. 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. 0. b Total fundraising expenses (Part IX, column (D), line 25) ▶ 462,357. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1,155,197. 1,042,071. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 9,485,887. 8,698,380. 19 Revenue less expenses. Subtract line 18 from line 12 910,360. 7,987,663.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16) Beginning of Current Year 112,635,731. End of Year 111,249,424. 21 Total liabilities (Part X, line 26) 3,032,259. 3,691,124. 22 Net assets or fund balances. Subtract line 21 from line 20 109,603,472. 107,558,300.	

Part II Signature Block

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

Sign Here	Signature of officer MOHAMMAD MOUSA, CFO Type or print name and title	Date
Paid Preparer Use Only	Print/Type preparer's name ED E. RAMOS, CPA Preparer's signature Date Check if self-employed <input type="checkbox"/> PTIN P00601133 Firm's name ▶ DWYER PEMBERTON & COULSON, P.C. Firm's address ▶ P.O. BOX 1614 TACOMA, WA 98401-1614 Firm's EIN ▶ ** - * * * * * Phone no. 253.572.9922	

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

Part III Statement of Program Service Accomplishments

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

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

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

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

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 \$ 7,046,478. including grants of \$ 5,875,300.) (Revenue \$ 142,373.) GREATER TACOMA COMMUNITY FOUNDATION PROVIDED MORE THAN \$7.9 MILLION TO THE COMMUNITY THROUGH DONOR-ADVISED GRANTS, SUPPORT FOR THE ALIGNMENT AND DEVELOPMENT OF EXPANDED LEARNING OPPORTUNITIES THROUGHOUT PIERCE COUNTY, FUNDING FOR COMMUNITY-DRIVEN EFFORTS TO IMPROVE SOCIAL AND ENVIRONMENTAL CONDITIONS THROUGHOUT THE PUYALLUP WATERSHED, SCHOLARSHIPS, GENERAL OPERATING GRANTS, CAPACITY-BUILDING GRANTS, SUPPORT FOR COMMUNITY-DRIVEN CENSUS 2020 PREPARATION, GRANTS FOR GRASSROOTS PROJECTS, IMPACT INVESTING AND PHILANTHROPIC EDUCATION.

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

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

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

4e Total program service expenses 7,046,478.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1 through 21 regarding organizational requirements and reporting.

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	X	
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	X	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

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

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

		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	2a 21		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	X	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	X	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	X	
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year		
	7d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		X
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?		X
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		X
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state?	13a	
Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15	X
If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16	X
If "Yes," complete Form 4720, Schedule O.			

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 in Schedule O. See instructions.

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year (13); 1b Enter the number of voting members included in line 1a, above, who are independent (13); 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? (X); 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? (X); 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? (X); 5 Did the organization become aware during the year of a significant diversion of the organization's assets? (X); 6 Did the organization have members or stockholders? (X); 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? (X); 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? (X); 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? (X); b Each committee with authority to act on behalf of the governing body? (X); 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O (X).

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? (X); 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? (X); 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 (X); 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? (X); 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done (X); 13 Did the organization have a written whistleblower policy? (X); 14 Did the organization have a written document retention and destruction policy? (X); 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official (X); b Other officers or key employees of the organization (X); If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? (X); 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed WA
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
[] Own website [] Another's website [X] Upon request [] Other (explain in Schedule O)
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records
GREATER TACOMA COMMUNITY FDN - 253-383-5622
950 PACIFIC AVENUE, SUITE 1100, TACOMA, WA 98402

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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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) DWIGHT WILLIAMS CHAIR	2.00	X		X				0.	0.	0.
(2) MARY THOMAS VICE CHAIR	2.00	X		X				0.	0.	0.
(3) GARY BROOKS TREASURER	2.00	X		X				0.	0.	0.
(4) SCOTT LIMOLI SECRETARY	2.00	X		X				0.	0.	0.
(5) CARLA PELSTER DIRECTOR	2.00	X						0.	0.	0.
(6) BOB PITTMAN DIRECTOR	2.00	X						0.	0.	0.
(7) BRIAN GREEN DIRECTOR	2.00	X						0.	0.	0.
(8) JOHN KORSMO DIRECTOR	2.00	X						0.	0.	0.
(9) LAMONT LOO DIRECTOR	2.00	X						0.	0.	0.
(10) ALI MODARRS DIRECTOR	2.00	X						0.	0.	0.
(11) BRETT WILLIS DIRECTOR	2.00	X						0.	0.	0.
(12) CARLA SANTORNO DIRECTOR	2.00	X						0.	0.	0.
(13) PHIL CARTER DIRECTOR	2.00	X						0.	0.	0.
(14) KATHI LITTMANN PRESIDENT & CEO	40.00 1.00			X				226,727.	0.	31,625.
(15) MOHAMMAD MOUSA CFO	40.00 2.00			X				130,371.	0.	13,413.
(16) GINA ANSTEY VP OF PROGRAMS & INITIATIV	40.00					X		110,382.	0.	11,360.
(17) MEGAN SUKYS VP, COMMUNICATIONS	40.00					X		100,686.	0.	5,776.

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			
1b Sub-total							568,166.	0.	62,174.	
c Total from continuation sheets to Part VII, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)							568,166.	0.	62,174.	

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

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

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	10,962,243.				
	g Noncash contributions included in lines 1a-1f: \$		3,691,674.				
	h Total. Add lines 1a-1f		10,962,243.				
Program Service Revenue	2 a	Business Code					
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		2,086,482.			2,086,482.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	(i) Real	(ii) Personal				
		Less: rental expenses					
		Rental income or (loss)					
		d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		26,021,229.					
		Less: cost or other basis and sales expenses		22,526,284.			
		c Gain or (loss)		3,494,945.			
	d Net gain or (loss)		3,494,945.			3,494,945.	
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a					
		b Less: direct expenses	b				
		c Net income or (loss) from fundraising events					
9 a Gross income from gaming activities. See Part IV, line 19	a						
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities						
10 a Gross sales of inventory, less returns and allowances	a						
	b Less: cost of goods sold	b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code					
11 a ADMINISTRATIVE FEE REVENUE	561000		130,223.	130,223.			
b OTHER REVENUE	900099		12,150.	12,150.			
c							
d All other revenue							
e Total. Add lines 11a-11d			142,373.				
12 Total revenue. See instructions			16,686,043.	142,373.	0.	5,581,427.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	5,583,586.	5,583,586.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	291,714.	291,714.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	411,014.	131,524.	207,268.	72,222.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,080,718.	427,197.	445,437.	208,084.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	44,092.	9,276.	19,504.	15,312.
9 Other employee benefits	131,910.	51,994.	54,139.	25,777.
10 Payroll taxes	113,275.	43,045.	48,708.	21,522.
11 Fees for services (non-employees):				
a Management				
b Legal	3,750.		3,750.	
c Accounting	29,875.		29,875.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch. O.)	378,133.	205,967.	154,014.	18,152.
12 Advertising and promotion	7,755.	1,500.	6,100.	155.
13 Office expenses	47,700.	18,917.	21,479.	7,304.
14 Information technology	82,746.	29,519.	36,357.	16,870.
15 Royalties				
16 Occupancy	107,508.	35,478.	53,754.	18,276.
17 Travel	80,033.	76,477.	3,250.	306.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	167,750.	69,250.	57,277.	41,223.
20 Interest	963.		963.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	24,459.	8,071.	12,230.	4,158.
23 Insurance	7,481.	2,843.	3,217.	1,421.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a COMMUNITY EVENTS	36,556.	36,556.		
b EQUIPMENT RENTAL AND MA	28,761.	9,491.	14,381.	4,889.
c COMMUNICATIONS	12,290.	4,715.	5,653.	1,922.
d STAFF TRAINING	8,653.	4,355.	3,157.	1,141.
e All other expenses	17,658.	5,003.	9,032.	3,623.
25 Total functional expenses. Add lines 1 through 24e	8,698,380.	7,046,478.	1,189,545.	462,357.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing		1	
	2 Savings and temporary cash investments	6,333,826.	2	9,212,621.
	3 Pledges and grants receivable, net	750,000.	3	2,073,471.
	4 Accounts receivable, net		4	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	24,225.	9	39,203.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 226,273.		
	b Less: accumulated depreciation	10b 156,079.	38,052.	10c 70,194.
	11 Investments - publicly traded securities	102,274,629.	11	95,986,339.
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11	1,500,000.	13	1,375,836.
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	1,714,999.	15	2,491,760.
16 Total assets. Add lines 1 through 15 (must equal line 34)	112,635,731.	16	111,249,424.	
Liabilities	17 Accounts payable and accrued expenses	633,113.	17	204,723.
	18 Grants payable	395,469.	18	1,254,399.
	19 Deferred revenue	1,019,743.	19	1,303,626.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	500,264.	21	431,871.
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	483,670.	25	496,505.
	26 Total liabilities. Add lines 17 through 25	3,032,259.	26	3,691,124.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	104,649,678.	27	101,658,361.
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets	4,953,794.	29	5,899,939.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	109,603,472.	33	107,558,300.	
34 Total liabilities and net assets/fund balances	112,635,731.	34	111,249,424.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	16,686,043.
2	Total expenses (must equal Part IX, column (A), line 25)	2	8,698,380.
3	Revenue less expenses. Subtract line 2 from line 1	3	7,987,663.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	109,603,472.
5	Net unrealized gains (losses) on investments	5	-9,981,306.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-51,529.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	107,558,300.

Part XII Financial Statements and Reporting

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

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

Form 990 (2018)

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 for instructions and the latest information.

OMB No. 1545-0047

2018

Open to Public
Inspection

Name of the organization GREATER TACOMA COMMUNITY FOUNDATION	Employer identification number **-*****
--	---

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		
Total						

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	8,904,875.	5,075,212.	8,549,192.	6,577,084.	10,799,687.	39,906,050.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge ...						
4 Total. Add lines 1 through 3	8,904,875.	5,075,212.	8,549,192.	6,577,084.	10,799,687.	39,906,050.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						12,311,566.
6 Public support. Subtract line 5 from line 4.						27,594,484.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7 Amounts from line 4	8,904,875.	5,075,212.	8,549,192.	6,577,084.	10,799,687.	39,906,050.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources ...	1,970,313.	836,434.	1,720,441.	1,963,211.	2,615,049.	9,105,448.
9 Net income from unrelated business activities, whether or not the business is regularly carried on ...						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	187,719.	96,443.	99,331.	128,582.	142,373.	654,448.
11 Total support. Add lines 7 through 10						49,665,946.
12 Gross receipts from related activities, etc. (see instructions)					12	63,513.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	14	55.56 %
15 Public support percentage from 2017 Schedule A, Part II, line 14	15	57.97 %
16a 33 1/3% support test - 2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input checked="" type="checkbox"/>	
b 33 1/3% support test - 2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
17a 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
b 10% -facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	<input type="checkbox"/>	

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2017 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2017 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2018. 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 - 2017. 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 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 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>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined 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>		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

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

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

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

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

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

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2018 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2018			
a From 2013			
b From 2014			
c From 2015			
d From 2016			
e From 2017			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2018 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI . See instructions.			
6 Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2019. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2014			
b Excess from 2015			
c Excess from 2016			
d Excess from 2017			
e Excess from 2018			

Schedule A (Form 990 or 990-EZ) 2018

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.)

FILE COPY

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

2018

Open to Public Inspection

Name of the organization **GREATER TACOMA COMMUNITY FOUNDATION** Employer identification number ****-*******

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	84	
2 Aggregate value of contributions to (during year)	4,921,718.	
3 Aggregate value of grants from (during year)	1,765,610.	
4 Aggregate value at end of year	24,727,030.	
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).
 Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space

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

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

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

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

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

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

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

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

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

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

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

(i) Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

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

a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

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

Schedule D (Form 990) 2018

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

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

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange programs
- e Other _____

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

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

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

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

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided 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	76,561,354.	67,968,403.	64,615,943.	69,484,324.	71,598,940.
b Contributions	975,922.	931,748.	1,943,223.	121,544.	3,244,240.
c Net investment earnings, gains, and losses	-3,117,519.	10,039,865.	4,490,311.	-3,129,520.	-1,265,043.
d Grants or scholarships	4,678,772.	2,378,662.	3,081,074.	1,860,405.	4,093,813.
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	69,740,985.	76,561,354.	67,968,403.	64,615,943.	69,484,324.

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

- a Board designated or quasi-endowment 97.07 %
- b Permanent endowment 2.93 %
- c Temporarily restricted endowment _____ %

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

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

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

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? Yes No

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		226,273.	156,079.	70,194.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				70,194.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related.

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

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) ANNUITIES PAYABLE UNDER THE	
(3) SPLIT-INTEREST AGREEMENT	496,505.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	496,505.

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

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

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

1	Total revenue, gains, and other support per audited financial statements	1	5,721,514.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	-9,981,306.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	-51,529.
e	Add lines 2a through 2d	2e	-10,032,835.
3	Subtract line 2e from line 1	3	15,754,349.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	931,694.
c	Add lines 4a and 4b	4c	931,694.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	16,686,043.

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

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

1	Total expenses and losses per audited financial statements	1	8,089,809.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	8,089,809.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	608,571.
c	Add lines 4a and 4b	4c	608,571.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	8,698,380.

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:

EXPLANATION FOR PART IV, LINE 2B:

THE GREATER TACOMA COMMUNITY FOUNDATION SERVES AS TRUSTEE FOR FIVE CHARITABLE REMAINDER UNITRUSTS. EACH UNITRUST WILL TERMINATE UPON THE DEATH OF THE UNITRUST RECIPIENT(S) AT WHICH TIME THE COMMUNITY FOUNDATION WILL ESTABLISH AN ENDOWMENT FUND TO BENEFIT CHARITABLE ORGANIZATION(S) AS SPECIFIED IN THE INDIVIDUAL TRUST AGREEMENTS.

PART X, LINE 2:

THE COMMUNITY FOUNDATION BELIEVES IT HAS NO UNCERTAIN TAX POSITIONS.

Part XIII Supplemental Information (continued)

PART XI, LINE 2D - OTHER ADJUSTMENTS:

CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS -51,529.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

AGENCY FUND INCOME 931,694.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

AGENCY FUND EXPENSES 608,571.



**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2018

**Open to Public
Inspection**

Name of the organization **GREATER TACOMA COMMUNITY FOUNDATION** Employer identification number ****_*******

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
AMERICAN CANCER SOCIETY, GREAT WEST DIVISION, PIERCE COUNTY - 1313 BROADWAY STE 100 - TACOMA, WA 98402	**_*****	501(C)(3)	198.	0.			GENERAL CHARITABLE SUPPORT
AMERICAN CANCER SOCIETY, GREAT WEST DIVISION, PIERCE COUNTY - 1313 BROADWAY STE 100 - TACOMA, WA 98402	**_*****	501(C)(3)	3,517.	0.			GENERAL OPERATIONS IN PIERCE COUNTY, WA
MERICAN CANCER SOCIETY, GREAT WEST DIVISION, PIERCE COUNTY - 1313 BROADWAY STE 100 - TACOMA, WA 98402	**_*****	501(C)(3)	825.	0.			GENERAL SUPPORT OF PIERCE COUNTY, WA
MERICAN CANCER SOCIETY, GREAT WEST DIVISION, PIERCE COUNTY - 1313 BROADWAY STE 100 - TACOMA, WA 98402	**_*****	501(C)(3)	6,850.	0.			RESEARCH
ALCHEMY INDOOR SKATEPARK AND EDUCATION CENTER - PO BOX 569 - TACOMA, WA 98402	**_*****	501(C)(3)	3,000.	0.			ELO PROGRAMMING AT TPS SITES
ALCHEMY INDOOR SKATEPARK AND EDUCATION CENTER - PO BOX 569 - TACOMA, WA 98402	**_*****	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **157.**

3 Enter total number of other organizations listed in the line 1 table **8.**

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

Schedule I (Form 990) (2018)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
ALCHEMY INDOOR SKATEPARK AND EDUCATION CENTER - PO BOX 569 - TACOMA, WA 98402	**-*****	501(C)(3)	4,875.	0.			ELO PROGRAMMING: ELOC AT APPROVED TACOMA PUBLIC SCHOOLS SITES
ALZHEIMER'S ASSOCIATION WESTERN AND CENTRAL WA STATE CHAPTER - 100 W HARRISON ST N200 - SEATTLE, WA 98119	**-*****	501(C)(3)	5,000.	0.			GENERAL OPERATING SUPPORT
AMERICAN CIVIL LIBERTIES UNION OF WASHINGTON FOUNDATION - 901 5TH AVE STE 630 - SEATTLE, WA 98164	**-*****	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
AMERICAN LEADERSHIP FORUM TACOMA/PIERCE COUNTY - PO BOX 1914 - TACOMA, WA 98401	**-*****	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
AMERICAN LEADERSHIP FORUM TACOMA/PIERCE COUNTY - PO BOX 1914 - TACOMA, WA 98401	**-*****	501(C)(3)	1,000.	0.			GENERAL OPERATING SUPPORT
AMERICAN LEADERSHIP FORUM TACOMA/PIERCE COUNTY - PO BOX 1914 - TACOMA, WA 98401	**-*****	501(C)(3)	250.	0.			GENERAL OPERATING SUPPORT
AMERICAN LEADERSHIP FORUM TACOMA/PIERCE COUNTY - PO BOX 1914 - TACOMA, WA 98401	**-*****	501(C)(3)	8,000.	0.			ALF CLASS XXV (INVOICE #6889)
ANNIE WRIGHT SCHOOLS 827 N TACOMA AVE TACOMA, WA 98403	**-*****	501(C)(3)	21,600.	0.			BENEFITTING STUDENTS
ANNIE WRIGHT SCHOOLS 827 N TACOMA AVE TACOMA, WA 98403	**-*****	501(C)(3)	20,000.	0.			NEW POOL CAPITAL CAMPAIGN

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
ARK INSTITUTE OF LEARNING 1916 S WASHINGTON ST TACOMA, WA 98405	**_*****	501(C)(3)	7,500.	0.			SCHOLARSHIPS
ARK INSTITUTE OF LEARNING 1916 S WASHINGTON ST TACOMA, WA 98405	**_*****	501(C)(3)	500.	0.			GENERAL OPERATING SUPPORT
ARLINGTON MISSION OFFICE ATTN: BANICA MISSION FALLS CHURCH, VA 22046	**_*****	501(C)(3)	7,500.	0.			BANICA MISSIONS
BELLARMINE PREPARATORY SCHOOL 2300 S WASHINGTON ST TACOMA, WA 98405-1399	**_*****	501(C)(3)	250.	0.			GENERAL OPERATING SUPPORT
BELLARMINE PREPARATORY SCHOOL 2300 S WASHINGTON ST TACOMA, WA 98405-1399	**_*****	501(C)(3)	1,000.	0.			GENERAL OPERATING SUPPORT
BELLARMINE PREPARATORY SCHOOL 2300 S WASHINGTON ST TACOMA, WA 98405-1399	**_*****	501(C)(3)	5,000.	0.			BELLARMINE ROBOTICS PROGRAM CHALLENGE
BELLARMINE PREPARATORY SCHOOL 2300 S WASHINGTON ST TACOMA, WA 98405-1399	**_*****	501(C)(3)	2,224.	0.			GENERAL OPERATING SUPPORT
BELLARMINE PREPARATORY SCHOOL 2300 S WASHINGTON ST TACOMA, WA 98405-1399	**_*****	501(C)(3)	3,480.	0.			GENERAL OPERATING SUPPORT
BELLARMINE PREPARATORY SCHOOL 2300 S WASHINGTON ST TACOMA, WA 98405-1399	**_*****	501(C)(3)	2,000.	0.			GENERAL OPERATING SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
BIG BROTHERS BIG SISTERS OF PUGET SOUND - 1600 S GRAHAM ST - SEATTLE, WA 98108	**-*****	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
BIG BROTHERS BIG SISTERS OF PUGET SOUND TACOMA-PIERCE COUNTY DIVISION - 3640 S CEDAR ST STE R - TACOMA, WA 98409	**-*****	501(C)(3)	3,000.	0.			ELO PROGRAMMING AT TPS SITES
BIG BROTHERS BIG SISTERS OF PUGET SOUND TACOMA-PIERCE COUNTY DIVISION - 3640 S CEDAR ST STE R - TACOMA, WA 98409	**-*****	501(C)(3)	4,875.	0.			ELO PROGRAMMING: ELOC AT APPROVED TACOMA PUBLIC SCHOOLS SITES
BOYS & GIRLS CLUBS OF SOUTH PUGET SOUND - 3875 S 66TH ST STE 100 - TACOMA, WA 98409	**-*****	501(C)(3)	1,400.	0.			SUMMER BOOST PROGRAM
BOYS & GIRLS CLUBS OF SOUTH PUGET SOUND - 3875 S 66TH ST STE 100 - TACOMA, WA 98409	**-*****	501(C)(3)	500.	0.			GENERAL OPERATING SUPPORT
BOYS & GIRLS CLUBS OF SOUTH PUGET SOUND - 3875 S 66TH ST STE 100 - TACOMA, WA 98409	**-*****	501(C)(3)	120,000.	0.			ELO COORDINATOR SALARY
BOYS & GIRLS CLUBS OF SOUTH PUGET SOUND - 3875 S 66TH ST STE 100 - TACOMA, WA 98409	**-*****	501(C)(3)	500.	0.			GENERAL OPERATING SUPPORT: IN HONOR OF THE HOLIDAYS
BOYS & GIRLS CLUBS OF SOUTH PUGET SOUND - 3875 S 66TH ST STE 100 - TACOMA, WA 98409	**-*****	501(C)(3)	10,000.	0.			PROGRAMMING AT EASTSIDE COMMUNITY CENTER
BOYS & GIRLS CLUBS OF SOUTH PUGET SOUND - 3875 S 66TH ST STE 100 - TACOMA, WA 98409	**-*****	501(C)(3)	3,480.	0.			GENERAL OPERATING SUPPORT

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
BOYS & GIRLS CLUBS OF SOUTH PUGET SOUND - 3875 S 66TH ST STE 100 - TACOMA, WA 98409	**-*****	501(C)(3)	33,300.	0.			GENERAL OPERATING SUPPORT
BOYS & GIRLS CLUBS OF SOUTH PUGET SOUND - 3875 S 66TH ST STE 100 - TACOMA, WA 98409	**-*****	501(C)(3)	14,256.	0.			SUPPORT OF THE DONALD G. TOPPING HOPE CENTER
BOYS & GIRLS CLUBS OF SOUTH PUGET SOUND - 3875 S 66TH ST STE 100 - TACOMA, WA 98409	**-*****	501(C)(3)	3,000.	0.			SOCIAL EMOTIONAL LEARNING ELO WORK TEAM - KORY EGGENBERGER
BOYS & GIRLS CLUBS OF SOUTH PUGET SOUND - 3875 S 66TH ST STE 100 - TACOMA, WA 98409	**-*****	501(C)(3)	3,000.	0.			SOCIAL EMOTIONAL LEARNING COMMUNICATIONS AND ENGAGEMENT WORK TEAM - ELVIN BUCU
BOYS & GIRLS CLUBS OF SOUTH PUGET SOUND - 3875 S 66TH ST STE 100 - TACOMA, WA 98409	**-*****	501(C)(3)	1,000.	0.			USDA MEAL PROGRAM
BOYS & GIRLS CLUBS OF SOUTH PUGET SOUND - 3875 S 66TH ST STE 100 - TACOMA, WA 98409	**-*****	501(C)(3)	1,000.	0.			LEGACY OF HOPE GIFT
BOYS & GIRLS CLUBS OF SOUTH PUGET SOUND - 3875 S 66TH ST STE 100 - TACOMA, WA 98409	**-*****	501(C)(3)	2,085.	0.			GENERAL OPERATING SUPPORT
BOYS & GIRLS CLUBS OF SOUTH PUGET SOUND - 3875 S 66TH ST STE 100 - TACOMA, WA 98409	**-*****	501(C)(3)	300.	0.			GENERAL OPERATING SUPPORT
BOYS & GIRLS CLUBS OF SOUTH PUGET SOUND - 3875 S 66TH ST STE 100 - TACOMA, WA 98409	**-*****	501(C)(3)	30,000.	0.			SITE TECHNICAL ASSISTANCE

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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BUCKLEY YOUTH ACTIVITIES P.O. BOX 1960 BUCKLEY, WA 98321	*****	501(C)(3)	5,000.	0.			GENERAL OPERATING SUPPORT
CARING FOR KIDS 237 ELDORADO AVE UNIVERSITY PLACE, WA 98466-7212	**_*****	501(C)(3)	1,000.	0.			GENERAL OPERATING SUPPORT
CARING FOR KIDS 237 ELDORADO AVE UNIVERSITY PLACE, WA 98466-7212	**_*****	501(C)(3)	4,700.	0.			GENERAL OPERATING SUPPORT
CARING FOR KIDS 237 ELDORADO AVE UNIVERSITY PLACE, WA 98466-7212	**_*****	501(C)(3)	200.	0.			GENERAL OPERATING SUPPORT
CASCADE BICYCLE CLUB 7787 62ND AVE NE SEATTLE, WA 98115	**_*****	501(C)(3)	500.	0.			CHARITABLE PURPOSES
CASCADE BICYCLE CLUB 7787 62ND AVE NE SEATTLE, WA 98115	**_*****	501(C)(3)	5,000.	0.			THE MAJOR TAYLOR PROJECT
CATHOLIC COMMUNITY SERVICES OF WESTERN WASHINGTON - PO BOX 1235 - TACOMA, WA 98405	**_*****	501(C)(3)	9,300.	0.			HOSPITALITY KITCHEN
CATHOLIC COMMUNITY SERVICES OF WESTERN WASHINGTON - PO BOX 1235 - TACOMA, WA 98405	**_*****	501(C)(3)	300.	0.			NATIVITY HOUSE
CATHOLIC COMMUNITY SERVICES OF WESTERN WASHINGTON - PO BOX 1235 - TACOMA, WA 98405	**_*****	501(C)(3)	5,000.	0.			GENERAL OPERATING SUPPORT

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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CENTER FOR DIALOG & RESOLUTION 717 TACOMA AVE S TACOMA, WA 98402	**-*****	501(C)(3)	15,000.	0.			GENERAL OPERATING SUPPORT
CENTER FOR FOOD PRESERVATION ARTS 1521 N FIFE ST FIFE, WA 98406			5,000.	0.			GENERAL SUPPORT
CENTRO LATINO 1208 S 10TH ST TACOMA, WA 98405	**-*****	501(C)(3)	6,000.	0.			2018 SUMMER FILM CAMP
CHARLES WRIGHT ACADEMY 7723 CHAMBERS CREEK RD W TACOMA, WA 98467	**-*****	501(C)(3)	2,000.	0.			GROSS MEMORIAL SOCCER FIELD MAINTENANCE & CAPITAL EXPENSES
CHARLES WRIGHT ACADEMY 7723 CHAMBERS CREEK RD W TACOMA, WA 98467	**-*****	501(C)(3)	2,000.	0.			CAPITAL CAMPAIGN FOR THE LANGUAGE AND PERFORMING ARTS CENTER
CHARLES WRIGHT ACADEMY 7723 CHAMBERS CREEK RD W TACOMA, WA 98467	**-*****	501(C)(3)	2,000.	0.			RETIRE INTERNAL DEBT FOR LANGUAGE AND PERFORMING ARTS CENTER
CHARLES WRIGHT ACADEMY 7723 CHAMBERS CREEK RD W TACOMA, WA 98467	**-*****	501(C)(3)	250.	0.			PHYLLIS M. BOYLE STUDENT OPPORTUNITY FUND
CHARLES WRIGHT ACADEMY 7723 CHAMBERS CREEK RD W TACOMA, WA 98467	**-*****	501(C)(3)	14,000.	0.			CAMNER FUND (\$12,000); ANNUAL FUND (\$2,000)
CHILDREN'S FUND 6028 S 298TH PL S AUBURN, WA 98001	**-*****	501(C)(3)	8,612.	0.			SCHOLARSHIPS FOR ABUSED AND NEGLECTED CHILDREN

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
CHILDREN'S MUSEUM OF TACOMA 1501 PACIFIC AVE STE 202 TACOMA, WA 98402	**-*****	501(C)(3)	2,000.	0.			RIGHT TO PLAY GALA
CHILDREN'S MUSEUM OF TACOMA 1501 PACIFIC AVE STE 202 TACOMA, WA 98402	**-*****	501(C)(3)	3,000.	0.			GENERAL OPERATING SUPPORT (ANNUAL BOARD DONATION)
CHILDREN'S MUSEUM OF TACOMA 1501 PACIFIC AVE STE 202 TACOMA, WA 98402	**-*****	501(C)(3)	500.	0.			POWER OF PLAY LUNCHEON - GENERAL DONATION
CHILDREN'S MUSEUM OF TACOMA 1501 PACIFIC AVE STE 202 TACOMA, WA 98402	**-*****	501(C)(3)	1,000.	0.			GENERAL OPERATING SUPPORT
CHILDREN'S MUSEUM OF TACOMA 1501 PACIFIC AVE STE 202 TACOMA, WA 98402	**-*****	501(C)(3)	137.	0.			GENERAL OPERATING SUPPORT
CHILDREN'S MUSEUM OF TACOMA 1501 PACIFIC AVE STE 202 TACOMA, WA 98402	**-*****	501(C)(3)	1,000.	0.			GENERAL OPERATING SUPPORT
CHINESE RECONCILIATION PROJECT FOUNDATION - PO BOX 7024 - TACOMA, WA 98406	**-*****	501(C)(3)	5,300.	0.			GENERAL OPERATING SUPPORT
CHINESE RECONCILIATION PROJECT FOUNDATION - PO BOX 7024 - TACOMA, WA 98406	**-*****	501(C)(3)	5,000.	0.			MOON FESTIVAL
CITIZENS FOR A HEALTHY BAY 535 DOCK ST STE 213 TACOMA, WA 98402	**-*****	501(C)(3)	1,000.	0.			\$1,000 EMILY PINKNEY STIPEND

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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CITIZENS FOR A HEALTHY BAY 535 DOCK ST STE 213 TACOMA, WA 98402	**-*****	501(C)(3)	2,500.	0.			SISTERHOOD IN THE CITY
CITIZENS FOR A HEALTHY BAY 535 DOCK ST STE 213 TACOMA, WA 98402	**-*****	501(C)(3)	15,000.	0.			GENERAL OPERATING SUPPORT
CITY OF TACOMA, TACOMA PUBLIC UTILITIES - PO BOX 11007 - TACOMA, WA 98411		GOVERNMENT	6,000.	0.			WARM FUND
CITY OF TACOMA, TACOMA PUBLIC UTILITIES - PO BOX 11007 - TACOMA, WA 98411		GOVERNMENT	1,200.	0.			WARM FUND ASSISTANCE FOR CUSTOMER HEATING BILLS
CITY OF TACOMA, TACOMA PUBLIC UTILITIES - PO BOX 11007 - TACOMA, WA 98411		GOVERNMENT	2,000.	0.			WARM FUND
CITY OF TACOMA, TACOMA PUBLIC UTILITIES - PO BOX 11007 - TACOMA, WA 98411		GOVERNMENT	1,400.	0.			WARM FUND
CITY OF TACOMA, TACOMA PUBLIC UTILITIES - PO BOX 11007 - TACOMA, WA 98411		GOVERNMENT	3,200.	0.			WARM FUND
CITY OF TACOMA, TACOMA PUBLIC UTILITIES - PO BOX 11007 - TACOMA, WA 98411		GOVERNMENT	3,400.	0.			WARM FUND
CITY OF TACOMA, TACOMA PUBLIC UTILITIES - PO BOX 11007 - TACOMA, WA 98411		GOVERNMENT	1,286.	0.			WARM FUND - VIRGINIA JORDAN

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CITY OF TACOMA, TACOMA PUBLIC UTILITIES - PO BOX 11007 - TACOMA, WA 98411		GOVERNMENT	2,400.	0.			TACOMA PUBLIC UTILITIES - WARM FUND REIMBURSEMENT
CLE ELUM-ROSLYN WARRIOR BOOSTERS PO BOX 73 SOUTH CLE ELUM, WA 98943	**_*****	501(C)(3)	5,000.	0.			NEW SCOREBOARD
COLECTIVA LEGAL DEL PUEBLO 201 SW 153RD ST BURIEN, WA 98166	**_*****	501(C)(3)	5,000.	0.			LEGAL SUPPORT AND GENERAL SUPPORT IN THE LEGAL SYSTEM
COMMUNITIES IN SCHOOLS OF PENINSULA - PO BOX 684 - VAUGHN, WA 98394	**_*****	501(C)(3)	15,000.	0.			GENERAL OPERATING SUPPORT
COMMUNITY CONNECTION PLACE PO BOX 65288 UNIVERSITY PLACE, WA 98464	**_*****	501(C)(3)	5,000.	0.			GENERAL OPERATING SUPPORT
CRYSTAL JUDSON FAMILY JUSTICE CENTER - 718 COURT E - TACOMA, WA 98402	**_*****	GOVERNMENT	5,000.	0.			VICTIM SERVICES, SUPPORT GROUPS AND COUNSELING (MULT)
CRYSTAL JUDSON FAMILY JUSTICE CENTER - 718 COURT E - TACOMA, WA 98402	**_*****	GOVERNMENT	6,881.	0.			VICTIM ADVOCACY (FRAN)
CRYSTAL JUDSON FAMILY JUSTICE CENTER - 718 COURT E - TACOMA, WA 98402	**_*****	GOVERNMENT	1,522.	0.			SHINE BRIGHTLY EVENT COSTS
CRYSTAL JUDSON FAMILY JUSTICE CENTER - 718 COURT E - TACOMA, WA 98402	**_*****	GOVERNMENT	5,000.	0.			TEEN OUTREACH (PUYT)

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CRYSTAL JUDSON FAMILY JUSTICE CENTER - 718 COURT E - TACOMA, WA 98402	**-*****	GOVERNMENT	3,568.	0.			BBQ FUNDRAISER EXPENSES: VICTIM SERVICES
CRYSTAL JUDSON FAMILY JUSTICE CENTER - 718 COURT E - TACOMA, WA 98402	**-*****	GOVERNMENT	12,000.	0.			VICTIM SERVICES: \$10,000 TADD; \$2,000 TULA
DEGREES OF CHANGE PO BOX 1573 TACOMA, WA 98401	**-*****	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
DIVINE MERCY CARE 4001 FAIR RIDGE DR STE 305 FAIRFAX, VA 22033-2917	**-*****	501(C)(3)	10,000.	0.			TO SUPPORT WOMEN'S HEALTH (IN LIEU OF GALA ATTENDANCE)
EMERGENCY FOOD NETWORK 3318 92ND ST S LAKWOOD, WA 98499	**-*****	501(C)(3)	1,000.	0.			GENERAL OPERATING SUPPORT
EMERGENCY FOOD NETWORK 3318 92ND ST S LAKWOOD, WA 98499	**-*****	501(C)(3)	250.	0.			GENERAL OPERATING SUPPORT - IN HONOR OF NEEL PARIKH
EMERGENCY FOOD NETWORK 3318 92ND ST S LAKWOOD, WA 98499	**-*****	501(C)(3)	600.	0.			PURCHASING AND DISTRIBUTING FOOD TO THOSE IN NEED
EMERGENCY FOOD NETWORK 3318 92ND ST S LAKWOOD, WA 98499	**-*****	501(C)(3)	500.	0.			TOBY MURRAY'S WALK FOR HUNGER
EMERGENCY FOOD NETWORK 3318 92ND ST S LAKWOOD, WA 98499	**-*****	501(C)(3)	1,000.	0.			SPECIAL FOOD PURCHASE - INFANTS & YOUNG CHILDREN

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EMERGENCY FOOD NETWORK 3318 92ND ST S LAKEWOOD, WA 98499	**_*****	501(C)(3)	2,500.	0.			GENERAL OPERATING SUPPORT
EMERGENCY FOOD NETWORK 3318 92ND ST S LAKEWOOD, WA 98499	**_*****	501(C)(3)	6,260.	0.			AGRICULTURE COMMUNITY OF INTEREST WORK
EMERGENCY FOOD NETWORK 3318 92ND ST S LAKEWOOD, WA 98499	**_*****	501(C)(3)	250.	0.			HUNGER WALK IN HONOR OF TOBY MURRAY
EMERGENCY FOOD NETWORK 3318 92ND ST S LAKEWOOD, WA 98499	**_*****	501(C)(3)	500.	0.			GENERAL OPERATING SUPPORT
EMERGENCY FOOD NETWORK 3318 92ND ST S LAKEWOOD, WA 98499	**_*****	501(C)(3)	250.	0.			PROVIDING FOOD FOR THOSE WHO CAN'T AFFORD GROCERIES
EMMANUEL LUTHERAN CHURCH 1315 N STEVENS ST TACOMA, WA 98406	**_*****	501(C)(3)	9,186.	0.			SCHOLARSHIPS AND DESIGNATED FUNDS
EMMANUEL LUTHERAN CHURCH 1315 N STEVENS ST TACOMA, WA 98406	**_*****	501(C)(3)	800.	0.			UNRESTRICTED PURPOSES
EQUAL JUSTICE INITIATIVE 122 COMMERCE ST MONTGOMERY, AL 36104	**_*****	501(C)(3)	25,000.	0.			GENERAL OPERATION SUPPORT AS RECOMMENDED BY ABIGAIL MALLICK
FAMILIES UNLIMITED NETWORK PO BOX 65672 UNIVERSITY PLACE, WA 98464	**_*****	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT

Schedule I (Form 990)

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FIRST CHURCH OF CHRIST, SCIENTIST, TACOMA - 902 DIVISION AVE - TACOMA, WA 98403	**-*****	CHURCH	6,200.	0.			GENERAL OPERATING SUPPORT (UNRESTRICTED)
FIRST PRESBYTERIAN CHURCH 20 TACOMA AVE S TACOMA, WA 98402	**-*****	501(C)(3)	3,700.	0.			GENERAL OPERATING SUPPORT
FIRST PRESBYTERIAN CHURCH 20 TACOMA AVE S TACOMA, WA 98402	**-*****	501(C)(3)	3,517.	0.			GENERAL OPERATING SUPPORT
FORTERRA 901 5TH AVE STE 2200 SEATTLE, WA 98164	**-*****	501(C)(3)	11,750.	0.			FOREST COI ACTIVITY 7.3.3: GREEN PUYALLUP AND GREEN TACOMA PARTNERSHIP SUSTAINABILITY
FORTERRA 901 5TH AVE STE 2200 SEATTLE, WA 98164	**-*****	501(C)(3)	1,900.	0.			PIERCE COUNTY CONSERVATION WORK
FORTERRA 901 5TH AVE STE 2200 SEATTLE, WA 98164	**-*****	501(C)(3)	14,000.	0.			JOINT MUNICIPAL ACTION COMMITTEE "COMMUNITY ASSET MAPPING" PROJECT
FORTERRA 901 5TH AVE STE 2200 SEATTLE, WA 98164	**-*****	501(C)(3)	2,500.	0.			GENERAL OPERATING SUPPORT
FOSS HOME AND VILLAGE 13023 GREENWOOD AVE N SEATTLE, WA 98133-7197	**-*****	501(C)(3)	53,100.	0.			WIRELESS CALL SYSTEM
FOSS WATERWAY DEVELOPMENT AUTHORITY - 535 E DOCK ST STE 204 - TACOMA, WA 98402		GOVERNMENT	26,435.	0.			REIMBURSEMENT FOR CAMPAIGN EXPENSES (1/12/17 - 6/9/17; INVOICE #S 1-6)

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FOUNDATION FOR TACOMA STUDENTS 919 S 9TH ST TACOMA, WA 98405	**-*****	501(C)(3)	1,000.	0.			GRADUATE TACOMA EVENT SUPPORT
FOUNDATION FOR TACOMA STUDENTS 919 S 9TH ST TACOMA, WA 98405	**-*****	501(C)(3)	1,000.	0.			ANNUAL SPONSORSHIP AT "FRIEND" LEVEL
FOUNDATION FOR TACOMA STUDENTS 919 S 9TH ST TACOMA, WA 98405	**-*****	501(C)(3)	1,000.	0.			GRADUATE TACOMA
FOUNDATION FOR TACOMA STUDENTS 919 S 9TH ST TACOMA, WA 98405	**-*****	501(C)(3)	3,000.	0.			SOCIAL EMOTIONAL LEARNING ELO COORDINATION WORK TEAM - TAFONA ERVIN
FOUNDATION FOR TACOMA STUDENTS 919 S 9TH ST TACOMA, WA 98405	**-*****	501(C)(3)	3,000.	0.			SOCIAL EMOTIONAL LEARNING COMMUNICATIONS AND ENGAGEMENT WORK TEAM - KRISTY GLEDHILL
FOUNDATION FOR TACOMA STUDENTS 919 S 9TH ST TACOMA, WA 98405	**-*****	501(C)(3)	3,000.	0.			SOCIAL EMOTIONAL LEARNING DATA WORK TEAM - JOSH STOVALL
FOUNDATION FOR THE AUSTIN SANCTUARY NETWORK - 14311 WELLS PORT DR - AUSTIN, TX 78728	**-*****	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
GENERATION HOPE 415 MICHIGAN AVE NE STE 250 WASHINGTON, DC 20017	**-*****	501(C)(3)	3,000.	0.			GENERAL OPERATING SUPPORT
GENERATION HOPE 415 MICHIGAN AVE NE STE 250 WASHINGTON, DC 20017	**-*****	501(C)(3)	5,000.	0.			GENERAL OPERATING SUPPORT

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GENTLEMEN BY CHOICE COMMUNITY DEVELOPMENT CORPORATION - TACOMA GENTS - 1016 W OWENS AVE - LAS VEGAS, NV 89106	**-*****	501(C)(3)	3,000.	0.			TACOMA GENTS - ELO PROGRAMMING AT TPS SITES
GENTLEMEN BY CHOICE COMMUNITY DEVELOPMENT CORPORATION - TACOMA GENTS - 1016 W OWENS AVE - LAS VEGAS, NV 89106	**-*****	501(C)(3)	4,875.	0.			ELO PROGRAMMING: ELOC AT APPROVED TACOMA PUBLIC SCHOOLS SITES (TACOMA GENTS)
GEORGE WEYERHAEUSER PACIFIC RIM BONSAI COLLECTION - PO BOX 6108 - FEDERAL WAY, WA 98063	**-*****	501(C)(3)	60,000.	0.			GENERAL OPERATING SUPPORT
GEORGE WEYERHAEUSER PACIFIC RIM BONSAI COLLECTION - PO BOX 6108 - FEDERAL WAY, WA 98063	**-*****	501(C)(3)	176,400.	0.			GENERAL OPERATING SUPPORT
GEORGE WEYERHAEUSER PACIFIC RIM BONSAI COLLECTION - PO BOX 6108 - FEDERAL WAY, WA 98063	**-*****	501(C)(3)	2,000.	0.			YOUTH PROGRAMMING
GEORGE WEYERHAEUSER PACIFIC RIM BONSAI COLLECTION - PO BOX 6108 - FEDERAL WAY, WA 98063	**-*****	501(C)(3)	126,500.	0.			GENERAL OPERATING SUPPORT
GEORGE WEYERHAEUSER PACIFIC RIM BONSAI COLLECTION - PO BOX 6108 - FEDERAL WAY, WA 98063	**-*****	501(C)(3)	95,000.	0.			GENERAL OPERATING EXPENSES
GEORGE WEYERHAEUSER PACIFIC RIM BONSAI COLLECTION - PO BOX 6108 - FEDERAL WAY, WA 98063	**-*****	501(C)(3)	61,000.	0.			GENERAL OPERATING SUPPORT
GIRL SCOUTS OF WESTERN WASHINGTON 601 VALLEY ST SEATTLE, WA 98109	**-*****	501(C)(3)	3,000.	0.			SOCIAL EMOTIONAL LEARNING ELO COORDINATION WORK TEAM - ALECIA CUNNINGHAM

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
GIRL SCOUTS OF WESTERN WASHINGTON 601 VALLEY ST SEATTLE, WA 98109	**_*****	501(C)(3)	500.	0.			RESIDENT CAMP FINANCIAL ASSISTANCE FUND
GIRL SCOUTS OF WESTERN WASHINGTON 601 VALLEY ST SEATTLE, WA 98109	**_*****	501(C)(3)	7,700.	0.			SUMMER GIRL SCOUT CAMP EXPENSES FOR PIERCE COUNTY GIRLS
GLOBAL PEACE FILM FESTIVAL, INC PO BOX 3310 WINTER PARK, FL 32790	**_*****	501(C)(3)	150,000.	0.			"FOR THEY KNOW NOT WHAT THEY DO" FILM PROJECT
GOOD SAMARITAN FOUNDATION PO BOX 5296 TACOMA, WA 98415-0296	**_*****	501(C)(3)	23,650.	0.			HELPING DISABLED CHILDREN GET COMMUNICATION DEVICES AT THE CHILDREN'S THERAPY UNIT
GOOD SAMARITAN FOUNDATION PO BOX 5296 TACOMA, WA 98415-0296	**_*****	501(C)(3)	5,000.	0.			GENERAL OPERATING SUPPORT FOR OB ADDICTION UNIT
GOOD SAMARITAN FOUNDATION PO BOX 5296 TACOMA, WA 98415-0296	**_*****	501(C)(3)	15,000.	0.			START PROGRAM
GRACE BAPTIST CHURCH 2507 N VASSAULT ST TACOMA, WA 98406	**_*****	501(C)(3)	7,200.	0.			THE ANNUAL FUND
GREAT PENINSULA CONSERVANCY 423 PACIFIC AVE STE 401 BREMERTON, WA 98337	**_*****	501(C)(3)	1,000.	0.			CAMP HAHOBUS PROJECT
GREAT PENINSULA CONSERVANCY 423 PACIFIC AVE STE 401 BREMERTON, WA 98337	**_*****	501(C)(3)	8,500.	0.			GENERAL OPERATING SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
GREAT PENINSULA CONSERVANCY 423 PACIFIC AVE STE 401 BREMERTON, WA 98337	**-*****	501(C)(3)	1,000.	0.			GENERAL OPERATING SUPPORT
GREAT PENINSULA CONSERVANCY 423 PACIFIC AVE STE 401 BREMERTON, WA 98337	**-*****	501(C)(3)	660.	0.			GENERAL OPERATING SUPPORT
GREATER LAKES MENTAL HEALTH FOUNDATION - 9330 59TH AVE SW - LAKEWOOD, WA 98499	**-*****	501(C)(3)	515.	0.			GENERAL OPERATING SUPPORT
GREATER LAKES MENTAL HEALTH FOUNDATION - 9330 59TH AVE SW - LAKEWOOD, WA 98499	**-*****	501(C)(3)	2,000.	0.			GENERAL OPERATING SUPPORT
GREATER LAKES MENTAL HEALTH FOUNDATION - 9330 59TH AVE SW - LAKEWOOD, WA 98499	**-*****	501(C)(3)	1,529.	0.			EMERGENCY FUND
GREATER LAKES MENTAL HEALTH FOUNDATION - 9330 59TH AVE SW - LAKEWOOD, WA 98499	**-*****	501(C)(3)	5,800.	0.			GENERAL SUPPORT FOR CHARITABLE PROGRAMS
GREATER METRO PARKS FOUNDATION 4702 S 19TH ST TACOMA, WA 98405	**-*****	501(C)(3)	500.	0.			EASTSIDE COMMUNITY CENTER - RON VIGNEC MEMORIAL
GREATER METRO PARKS FOUNDATION 4702 S 19TH ST TACOMA, WA 98405	**-*****	501(C)(3)	10,000.	0.			IMAGINE EASTSIDE COMMUNITY CENTER
GREATER METRO PARKS FOUNDATION 4702 S 19TH ST TACOMA, WA 98405	**-*****	501(C)(3)	1,500.	0.			FOR EASTSIDE COMMUNITY CENTER BUILDING FUND TO HONOR RON VIGNEC

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
HARBOR WILDWATCH 3110 JUDSON ST GIG HARBOR, WA 98335	**-*****	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
HARMONY HILL OF UNION 7362 E STATE RTE 106 UNION, WA 98592	**-*****	501(C)(3)	5,000.	0.			HARMONY HILL ANNUAL FUND
HARMONY HILL OF UNION 7362 E STATE RTE 106 UNION, WA 98592	**-*****	501(C)(3)	500.	0.			GENERAL OPERATING SUPPORT
HARMONY HILL OF UNION 7362 E STATE RTE 106 UNION, WA 98592	**-*****	501(C)(3)	1,500.	0.			GENERAL OPERATING SUPPORT
HARMONY HILL OF UNION 7362 E STATE RTE 106 UNION, WA 98592	**-*****	501(C)(3)	500.	0.			ATTENDANCE AT CANCER RETREATS
HILLTOP ARTISTS PO BOX 6829 TACOMA, WA 98417	**-*****	501(C)(3)	1,000.	0.			GENERAL OPERATING SUPPORT
HILLTOP ARTISTS PO BOX 6829 TACOMA, WA 98417	**-*****	501(C)(3)	6,500.	0.			ARTS CONNECT
HOPES AND DREAMS FOUNDATION 4020 S BELL ST TACOMA, WA 98418	**-*****	501(C)(3)	4,875.	0.			ELO PROGRAMMING: ELOC AT APPROVED TACOMA PUBLIC SCHOOLS SITES
HOPES AND DREAMS FOUNDATION 4020 S BELL ST TACOMA, WA 98418	**-*****	501(C)(3)	3,000.	0.			ELO PROGRAMMING AT TPS SITES

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
HOPEPARKS 6424 N 9TH ST TACOMA, WA 98406	**-*****	501(C)(3)	20,100.	0.			SERVING ABUSED OR DISFIGURED CHILDREN
HOPEPARKS 6424 N 9TH ST TACOMA, WA 98406	**-*****	501(C)(3)	2,500.	0.			GENERAL OPERATING SUPPORT
HUMANE SOCIETY FOR TACOMA-PIERCE COUNTY - 2608 CENTER ST - TACOMA, WA 98409	**-*****	501(C)(3)	1,500.	0.			GET THE SCOOP! PET WASTE AWARENESS CAMPAIGN
HUMANE SOCIETY FOR TACOMA-PIERCE COUNTY - 2608 CENTER ST - TACOMA, WA 98409	**-*****	501(C)(3)	250.	0.			GENERAL OPERATING SUPPORT
HUMANE SOCIETY FOR TACOMA-PIERCE COUNTY - 2608 CENTER ST - TACOMA, WA 98409	**-*****	501(C)(3)	500.	0.			ANIMAL TREATMENT AND INSURING ADOPTION
HUMANE SOCIETY FOR TACOMA-PIERCE COUNTY - 2608 CENTER ST - TACOMA, WA 98409	**-*****	501(C)(3)	560.	0.			GENERAL OPERATING SUPPORT
HUMANE SOCIETY FOR TACOMA-PIERCE COUNTY - 2608 CENTER ST - TACOMA, WA 98409	**-*****	501(C)(3)	695.	0.			GENERAL OPERATING SUPPORT
HUMANE SOCIETY FOR TACOMA-PIERCE COUNTY - 2608 CENTER ST - TACOMA, WA 98409	**-*****	501(C)(3)	3,440.	0.			GENERAL OPERATING SUPPORT
HUMANE SOCIETY FOR TACOMA-PIERCE COUNTY - 2608 CENTER ST - TACOMA, WA 98409	**-*****	501(C)(3)	9,300.	0.			GENERAL OPERATING SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
HUMANE SOCIETY FOR TACOMA-PIERCE COUNTY - 2608 CENTER ST - TACOMA, WA 98409	**_*****	501(C)(3)	200.	0.			GENERAL OPERATING SUPPORT
IMMANUEL PRESBYTERIAN CHURCH 901 N J ST TACOMA, WA 98403	**_*****	CHURCH	2,600.	0.			SUPPORTING COMMUNITY AND CHURCH PROGRAMS
IMMANUEL PRESBYTERIAN CHURCH 901 N J ST TACOMA, WA 98403	**_*****	CHURCH	21,200.	0.			GENERAL CHARITABLE PURPOSES
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**_*****	501(C)(3)	3,900.	0.			JEFFERSON CLEMENTE COURSE; SPIRIT AWAKENING; PTHS FOOD BANK GARDEN
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**_*****	501(C)(3)	2,500.	0.			ANNUAL DISTRIBUTION FOR THE PORT TOWNSEND PUBLIC LIBRARY FOUNDATION
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**_*****	501(C)(3)	15,000.	0.			PT MARINE SCIENCE CENTER; NORTHWEST WATERSHED INSTITUTE
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**_*****	501(C)(3)	11,300.	0.			JEFFERSON COUNTY HISTORICAL SOCIETY
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**_*****	501(C)(3)	8,200.	0.			CIVIC PURPOSES AND ASSISTANCE OF YOUTH AND SENIORS IN HADLOCK, WA
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**_*****	501(C)(3)	1,000.	0.			ANNUAL SCHOLARSHIP DISTRIBUTION

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**_*****	501(C)(3)	1,000.	0.			DOVE HOUSE: GENERAL OPERATING SUPPORT
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**_*****	501(C)(3)	4,250.	0.			SUNFIELD FARMS; BOILER ROOM; KPTZ RADIO
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**_*****	501(C)(3)	2,500.	0.			UNITED WAY OF CLALLAM COUNTY: GENERAL OPERATING SUPPORT
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**_*****	501(C)(3)	500.	0.			TO CONNECT EXECUTIVE DIRECTORS OF NPOS
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**_*****	501(C)(3)	10,000.	0.			NORTH OLYMPIC LAND TRUST
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**_*****	501(C)(3)	3,000.	0.			PENINSULA COLLEGE'S BASIC EDUCATION FOR ADULTS
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**_*****	501(C)(3)	2,500.	0.			GENERAL OPERATING SUPPORT
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**_*****	501(C)(3)	2,000.	0.			SKILLMATION
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**_*****	501(C)(3)	5,000.	0.			JEFFERSON LAND TRUST: GENERAL OPERATING SUPPORT

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**_*****	501(C)(3)	1,550.	0.			PT FILM INSTITUTE
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**_*****	501(C)(3)	700.	0.			NW MARITIME CENTER: GENERAL OPERATING SUPPORT
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**_*****	501(C)(3)	9,900.	0.			COMMUNITY GRANT TO BAYVIEW HOUSING
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**_*****	501(C)(3)	1,000.	0.			GENERAL OPERATING SUPPORT
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**_*****	501(C)(3)	1,000.	0.			KEY CITY PUBLIC THEATRE GENERAL OPERATING SUPPORT
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**_*****	501(C)(3)	1,000.	0.			JEFFERSON COUNTY HUMANE SOCIETY
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**_*****	501(C)(3)	500.	0.			PORT TOWNSEND EDUCATION FOUNDATION
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**_*****	501(C)(3)	500.	0.			NON-PROFIT EXECUTIVE DIRECTOR ENRICHMENT
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**_*****	501(C)(3)	10,000.	0.			FORT WORDEN FOUNDATION: GENERAL OPERATING SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**-*****	501(C)(3)	14,000.	0.			PORT TOWNSEND SCHOOL OF THE ARTS - GENERAL OPERATING SUPPORT
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**-*****	501(C)(3)	1,850.	0.			YONKERS PARTHERS IN EDUCATION (\$350); JEFFERSON CLEMENTE PROGRAMS (\$1,500)
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**-*****	501(C)(3)	500.	0.			UNITED GOOD NEIGHBORS
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**-*****	501(C)(3)	4,000.	0.			PORT TOWNSEND MARINE SCIENCE CENTER - GENERAL OPERATING SUPPORT
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**-*****	501(C)(3)	6,600.	0.			UNITED GOOD NEIGHBORS OF JEFFERSON COUNTY: GENERAL OPERATING SUPPORT
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**-*****	501(C)(3)	1,600.	0.			PORT TOWNSEND SCHOOL OF THE ARTS: GENERAL OPERATING SUPPORT
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**-*****	501(C)(3)	500.	0.			PORT TOWNSEND SCHOOL OF THE ARTS - GENERAL OPERATING SUPPORT
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**-*****	501(C)(3)	1,000.	0.			2018 SCHOLARSHIP TO JEFFERSON COUNTY SCHOOL OF WOODWORKING
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**-*****	501(C)(3)	2,500.	0.			HABITAT FOR HUMANITY OF EAST JEFFERSON COUNTY - GENERAL OPERATING SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**-*****	501(C)(3)	500.	0.			PRISONER'S LEGAL SERVICES N.Y. - PAUL J. CURRAN AWARD
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**-*****	501(C)(3)	375.	0.			COLLEGE OF HOLY CROSS (\$350) AND JEFFERSON COMMUNITY FOUNDATION (\$25)
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**-*****	501(C)(3)	2,500.	0.			JUMPING MOUSE CHILDREN'S CENTER - GENERAL OPERATING SUPPORT
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**-*****	501(C)(3)	2,500.	0.			GENERAL OPERATING SUPPORT
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**-*****	501(C)(3)	2,500.	0.			UNITED GOOD NEIGHBORS
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**-*****	501(C)(3)	2,000.	0.			STRONGER TOWNS - SKILLMATION PROGRAM
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**-*****	501(C)(3)	2,024.	0.			GENERAL OPERATING SUPPORT
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**-*****	501(C)(3)	1,000.	0.			SCHOLARSHIP TO CIERA HALLIGAN TO PRATT INSTITUTE OF ART
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**-*****	501(C)(3)	1,000.	0.			SCHOLARSHIP TO ALANA MCCLEESE TO WESTERN WASHINGTON UNIVERSITY

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**-*****	501(C)(3)	5,000.	0.			THE WASHINGTON PULP & PAPER FOUNDATION. IN MEMORY OF ROGER P. HAGAN
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**-*****	501(C)(3)	1,000.	0.			PORT TOWNSEND FILM INSTITUTE
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**-*****	501(C)(3)	1,000.	0.			NW IMMIGRANT RIGHTS PROJECT - "BOND FUND"
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**-*****	501(C)(3)	900.	0.			QUIMPER UNITARIAN UNIVERSALIST FELLOWSHIP
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**-*****	501(C)(3)	10,000.	0.			NORTHWEST MARITIME CENTER
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**-*****	501(C)(3)	5,000.	0.			JEFFERSON COMMUNITY FOUNDATION GENERAL OPERATING SUPPORT
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**-*****	501(C)(3)	500.	0.			NON-PROFIT EXECUTIVE DIRECTOR ENRICHMENT PROGRAMS
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**-*****	501(C)(3)	500.	0.			NON-PROFIT EXECUTIVE DIRECTOR ENRICHMENT
JEFFERSON COMMUNITY FOUNDATION 201 WEST PATISON STE B PORT HADLOCK, WA 98339	**-*****	501(C)(3)	2,200.	0.			CHILDREN'S ORTHOPEDIC HOSPITAL FOR UNCOMPENSATED CARE OF JEFFERSON CO. KIDS

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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KBTC ASSOCIATION 2320 S 19TH ST TACOMA, WA 98405	**-*****	501(C)(3)	4,875.	0.			ELO PROGRAMMING: ELOC AT APPROVED TACOMA PUBLIC SCHOOLS SITES (KBTC KIDS AFTER SCHOOL PROGRAM)
KBTC ASSOCIATION 2320 S 19TH ST TACOMA, WA 98405	**-*****	501(C)(3)	60,000.	0.			ELO COORDINATOR SALARY
KBTC ASSOCIATION 2320 S 19TH ST TACOMA, WA 98405	**-*****	501(C)(3)	15,000.	0.			SITE TECHNICAL ASSISTANCE
KBTC ASSOCIATION 2320 S 19TH ST TACOMA, WA 98405	**-*****	501(C)(3)	250.	0.			GENERAL OPERATING SUPPORT
KBTC ASSOCIATION 2320 S 19TH ST TACOMA, WA 98405	**-*****	501(C)(3)	300.	0.			GENERAL OPERATING SUPPORT
KBTC ASSOCIATION 2320 S 19TH ST TACOMA, WA 98405	**-*****	501(C)(3)	500.	0.			GENERAL OPERATING SUPPORT
KBTC ASSOCIATION 2320 S 19TH ST TACOMA, WA 98405	**-*****	501(C)(3)	3,000.	0.			SOCIAL EMOTIONAL LEARNING ELO COORDINATION WORK TEAM - ALYSSA TORREZ
KIN ON HEALTH CARE CENTER 4416 S BRANDON ST SEATTLE, WA 98118	**-*****	501(C)(3)	10,000.	0.			BUILDING PROJECT FOR ASSISTED LIVING FACILITY AND ADULT FAMILY HOME
KROWNLESS KINGS 1809 S HOSMER ST TACOMA, WA 98405	**-*****	501(C)(3)	8,875.	0.			PROGRAMMING AT TACOMA PUBLIC SCHOOLS WHOLE CHILD PARTNERSHIP EXPANDED LEARNING CENTERS

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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KROWNLESS KINGS 1809 S HOSMER ST TACOMA, WA 98405	**-*****	501(C)(3)	3,000.	0.			ELO PROGRAMMING AT TPS SITES
LAKEWOLD GARDENS PO BOX 39780 LAKEWOOD, WA 98496	**-*****	501(C)(3)	37,300.	0.			GENERAL OPERATING SUPPORT
LAKEWOLD GARDENS PO BOX 39780 LAKEWOOD, WA 98496	**-*****	501(C)(3)	530.	0.			ATTENDANCE AT NPO TRAININGS & MATCHING FOR COMMUNITY KIDS DAY
LAKEWOLD GARDENS PO BOX 39780 LAKEWOOD, WA 98496	**-*****	501(C)(3)	4,000.	0.			GENERAL OPERATING SUPPORT
LAKEWOLD GARDENS PO BOX 39780 LAKEWOOD, WA 98496	**-*****	501(C)(3)	45,850.	0.			GENERAL OPERATING SUPPORT
LAKEWOLD GARDENS PO BOX 39780 LAKEWOOD, WA 98496	**-*****	501(C)(3)	500.	0.			GENERAL OPERATING SUPPORT
LAKEWOLD GARDENS PO BOX 39780 LAKEWOOD, WA 98496	**-*****	501(C)(3)	74,600.	0.			GENERAL OPERATING SUPPORT
LAKEWOLD GARDENS PO BOX 39780 LAKEWOOD, WA 98496	**-*****	501(C)(3)	7,000.	0.			PRESERVATION AND ADA ENHANCEMENT CAMPAIGN
LAKEWOLD GARDENS PO BOX 39780 LAKEWOOD, WA 98496	**-*****	501(C)(3)	37,300.	0.			GENERAL OPERATING SUPPORT

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
LAKEWOLD GARDENS PO BOX 39780 LAKEWOOD, WA 98496	**-*****	501(C)(3)	22,925.	0.			GENERAL OPERATING SUPPORT
LAKEWOLD GARDENS PO BOX 39780 LAKEWOOD, WA 98496	**-*****	501(C)(3)	300.	0.			GENERAL OPERATING SUPPORT
LAKEWOLD GARDENS PO BOX 39780 LAKEWOOD, WA 98496	**-*****	501(C)(3)	225.	0.			BOARD TRAINING AT DUNN GARDENS
LAKEWOLD GARDENS PO BOX 39780 LAKEWOOD, WA 98496	**-*****	501(C)(3)	22,925.	0.			GENERAL OPERATING SUPPORT
LAKEWOLD GARDENS PO BOX 39780 LAKEWOOD, WA 98496	**-*****	501(C)(3)	695.	0.			GENERAL OPERATING SUPPORT
LEAGUE OF WOMEN VOTERS - TACOMA PIERCE COUNTY - 621 TACOMA AVE S STE 202 - TACOMA, WA 98402	**-*****	501(C)(3)	5,000.	0.			GENERAL OPERATING SUPPORT
LEMAY - AMERICA'S CAR MUSEUM 2702 E D ST TACOMA, WA 98421	**-*****	501(C)(3)	417.	0.			GENERAL OPERATING SUPPORT
LEMAY - AMERICA'S CAR MUSEUM 2702 E D ST TACOMA, WA 98421	**-*****	501(C)(3)	18,900.	0.			GENERAL OPERATING SUPPORT
LEMAY - AMERICA'S CAR MUSEUM 2702 E D ST TACOMA, WA 98421	**-*****	501(C)(3)	250.	0.			GENERAL OPERATING SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
LEMAY - AMERICA'S CAR MUSEUM 2702 E D ST TACOMA, WA 98421	**_*****	501(C)(3)	10,000.	0.			CAPITAL IMPROVEMENTS
LEMAY - AMERICA'S CAR MUSEUM 2702 E D ST TACOMA, WA 98421	**_*****	501(C)(3)	13,000.	0.			CAPITAL IMPROVEMENTS
LIFE CHRISTIAN ACADEMY 1717 S UNION TACOMA, WA 98405-1997	**_*****	501(C)(3)	6,500.	0.			STUDENT SCHOLARSHIPS
MAINSRING SCHOOLS 1100 WEST LIVE OAK ST AUSTIN, TX 78704	**_*****	501(C)(3)	5,000.	0.			GENERAL OPERATING SUPPORT
MARY BRIDGE BRIGADE PO BOX 5299 TACOMA, WA 98415-0299	**_*****	501(C)(3)	28,486.	0.			FRANCES C. PETERSEN LEUKEMIA FUND
MARY BRIDGE CHILDREN'S FOUNDATION PO BOX 5296 TACOMA, WA 98415-0296	**_*****	501(C)(3)	20,000.	0.			MARY BRIDGE CHILDREN'S HOSPITAL: GENERAL OPERATING SUPPORT
MARY BRIDGE CHILDREN'S FOUNDATION PO BOX 5296 TACOMA, WA 98415-0296	**_*****	501(C)(3)	6,974.	0.			GENERAL OPERATING SUPPORT
MARY BRIDGE CHILDREN'S FOUNDATION PO BOX 5296 TACOMA, WA 98415-0296	**_*****	501(C)(3)	5,000.	0.			GENERAL OPERATING SUPPORT - MARY BRIDGE MENTAL HEALTH CHILDREN'S ADVOCACY CENTER
MARY BRIDGE CHILDREN'S FOUNDATION PO BOX 5296 TACOMA, WA 98415-0296	**_*****	501(C)(3)	900.	0.			GENERAL OPERATING SUPPORT FOR MARY BRIDGE CHILDREN'S FOUNDATION

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
MARY BRIDGE CHILDREN'S FOUNDATION PO BOX 5296 TACOMA, WA 98415-0296	**-*****	501(C)(3)	7,885.	0.			HELPING DISABLED CHILDREN GET COMMUNICATION DEVICES
MARY BRIDGE CHILDREN'S FOUNDATION PO BOX 5296 TACOMA, WA 98415-0296	**-*****	501(C)(3)	11,980.	0.			UNCOMPENSATED CARE
MARY BRIDGE CHILDREN'S FOUNDATION PO BOX 5296 TACOMA, WA 98415-0296	**-*****	501(C)(3)	5,300.	0.			CARE/KEEP/MAINTENANCE OF CRIPPLED CHILDREN AT MARY BRIDGE CHILDREN'S HOSPITAL
MARY BRIDGE CHILDREN'S FOUNDATION PO BOX 5296 TACOMA, WA 98415-0296	**-*****	501(C)(3)	204.	0.			GENERAL CHARITABLE SUPPORT
MARY BRIDGE CHILDREN'S FOUNDATION PO BOX 5296 TACOMA, WA 98415-0296	**-*****	501(C)(3)	5,000.	0.			GENERAL OPERATING SUPPORT
METRO PARKS TACOMA 4702 S 19TH ST TACOMA, WA 98405	**-*****	GOVERNMENT	3,000.	0.			SOCIAL EMOTIONAL LEARNING COMMUNICATIONS AND ENGAGEMENT WORK TEAM - HUNTER T. GEORGE
METRO PARKS TACOMA 4702 S 19TH ST TACOMA, WA 98405	**-*****	GOVERNMENT	3,000.	0.			SOCIAL EMOTIONAL LEARNING ELO COORDINATION WORK TEAM - LEIF ELLSWORTH
METRO PARKS TACOMA 4702 S 19TH ST TACOMA, WA 98405	**-*****	GOVERNMENT	1,500.	0.			NORTHWEST TREK WILDLIFE PARK
MOUNTAIN VIEW COMMUNITY CENTER 3607 122ND AVE E EDGEWOOD, WA 98372	**-*****	501(C)(3)	1,500.	0.			KID'S CLUB PROGRAM (YPQI)

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
MOUNTAIN VIEW COMMUNITY CENTER 3607 122ND AVE E EDGEWOOD, WA 98372	**-*****	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
MULTICARE HEALTH SYSTEM PO BOX 5299 TACOMA, WA 98415-0299	**-*****	501(C)(3)	10,400.	0.			GENERAL CHARITABLE PURPOSE
MULTICARE HEALTH SYSTEM PO BOX 5299 TACOMA, WA 98415-0299	**-*****	501(C)(3)	42,729.	0.			GENERAL PURPOSES AT TACOMA GENERAL HOSPITAL
MULTICARE HEALTH SYSTEM PO BOX 5299 TACOMA, WA 98415-0299	**-*****	501(C)(3)	11,980.	0.			MEDICAL EXPENSE SHORTFALLS FOR PEOPLE WITH LIFE THREATENING ILLNESSES
MULTICARE HEALTH SYSTEM PO BOX 5299 TACOMA, WA 98415-0299	**-*****	501(C)(3)	7,500.	0.			GENERAL OPERATING SUPPORT
MUSEUM OF GLASS 1801 DOCK ST TACOMA, WA 98402	**-*****	501(C)(3)	1,000.	0.			GENERAL OPERATING SUPPORT
MUSEUM OF GLASS 1801 DOCK ST TACOMA, WA 98402	**-*****	501(C)(3)	9,000.	0.			GENERAL OPERATING SUPPORT
MUSEUM OF GLASS 1801 DOCK ST TACOMA, WA 98402	**-*****	501(C)(3)	7,000.	0.			GENERAL OPERATING SUPPORT
MUSEUM OF GLASS 1801 DOCK ST TACOMA, WA 98402	**-*****	501(C)(3)	500.	0.			GENERAL OPERATING SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
MUSEUM OF GLASS 1801 DOCK ST TACOMA, WA 98402	**_*****	501(C)(3)	250.	0.			GENERAL OPERATING EXPENSES
MUSEUM OF GLASS 1801 DOCK ST TACOMA, WA 98402	**_*****	501(C)(3)	800.	0.			SUPPORT OF CURRENT AND FUTURE EXHIBITIONS
MUSEUM OF GLASS 1801 DOCK ST TACOMA, WA 98402	**_*****	501(C)(3)	417.	0.			GENERAL OPERATING SUPPORT
MUSEUM OF GLASS 1801 DOCK ST TACOMA, WA 98402	**_*****	501(C)(3)	275.	0.			GENERAL OPERATING SUPPORT
MUSEUM OF GLASS 1801 DOCK ST TACOMA, WA 98402	**_*****	501(C)(3)	3,265.	0.			GEORGE H. WEYERHAEUSER, JR. MEMORIAL ENDOWMENT
NATIONAL WILDLIFE FEDERATION 11100 WILDLIFE CENTER DR RESTON, VA 20190	**_*****	501(C)(3)	5,480.	0.			GENERAL OPERATING SUPPORT
NEIGHBORHOOD CLINIC 1323 SOUTH YAKIMA AVENUE TACOMA, WA 98405	**_*****	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
NEW CONNECTIONS 613 S 15TH ST TACOMA, WA 98405	**_*****	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
NORTHWEST IMMIGRANT RIGHTS PROJECT 615 2ND AVE STE 400 SEATTLE, WA 98104	**_*****	501(C)(3)	10,000.	0.			AREA OF GREATEST NEED

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
NORTHWEST IMMIGRANT RIGHTS PROJECT 615 2ND AVE STE 400 SEATTLE, WA 98104	**_*****	501(C)(3)	20,000.	0.			AREA OF GREATEST NEED
NORTHWEST IMMIGRANT RIGHTS PROJECT 615 2ND AVE STE 400 SEATTLE, WA 98104	**_*****	501(C)(3)	10,000.	0.			LEGAL SUPPORT AND GENERAL SUPPORT AFTER NAVIGATING THE LEGAL SYSTEM
NORTHWEST IMMIGRANT RIGHTS PROJECT 615 2ND AVE STE 400 SEATTLE, WA 98104	**_*****	501(C)(3)	500.	0.			GENERAL OPERATING SUPPORT
NORTHWEST TREK FOUNDATION 11610 TREK DR E EATONVILLE, WA 98328	**_*****	501(C)(3)	8,220.	0.			GENERAL OPERATING SUPPORT
NORTHWEST TREK FOUNDATION 11610 TREK DR E EATONVILLE, WA 98328	**_*****	501(C)(3)	8,800.	0.			MAINTAINING PHYSICAL PLANT & EDUCATIONAL INSTITUTE COLLECTIONS AT NORTHWEST TREK
NORTHWEST TREK FOUNDATION 11610 TREK DR E EATONVILLE, WA 98328	**_*****	501(C)(3)	1,200.	0.			CAPITAL IMPROVEMENTS/MAJOR RENOVATIONS/GRAPHICS/IMPR
NOURISH PIERCE COUNTY 1702 S 72ND ST STE E TACOMA, WA 98408	**_*****	501(C)(3)	250.	0.			GENERAL OPERATING SUPPORT
NOURISH PIERCE COUNTY 1702 S 72ND ST STE E TACOMA, WA 98408	**_*****	501(C)(3)	500.	0.			GENERAL OPERATING SUPPORT
NOURISH PIERCE COUNTY 1702 S 72ND ST STE E TACOMA, WA 98408	**_*****	501(C)(3)	2,663.	0.			GENERAL OPERATING SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
NOURISH PIERCE COUNTY 1702 S 72ND ST STE E TACOMA, WA 98408	**-*****	501(C)(3)	1,000.	0.			GRAHAM FOOD BANK AT HOLY DISCIPLES CHURCH
NOURISH PIERCE COUNTY 1702 S 72ND ST STE E TACOMA, WA 98408	**-*****	501(C)(3)	250.	0.			GENERAL OPERATING SUPPORT
NOURISH PIERCE COUNTY 1702 S 72ND ST STE E TACOMA, WA 98408	**-*****	501(C)(3)	2,500.	0.			GENERAL OPERATING SUPPORT
OASIS YOUTH CENTER 2215 PACIFIC AVE TACOMA, WA 98402	**-*****	501(C)(3)	1,500.	0.			GENERAL OPERATING SUPPORT
OASIS YOUTH CENTER 2215 PACIFIC AVE TACOMA, WA 98402	**-*****	501(C)(3)	12,500.	0.			OASIS YOUTH CENTER - GENERAL OPERATING SUPPORT
OASIS YOUTH CENTER 2215 PACIFIC AVE TACOMA, WA 98402	**-*****	501(C)(3)	10,500.	0.			GENERAL OPERATING SUPPORT
OASIS YOUTH CENTER 2215 PACIFIC AVE TACOMA, WA 98402	**-*****	501(C)(3)	500.	0.			GENERAL OPERATING SUPPORT
OLYMPIC VIEW COMMUNITY FOUNDATION 720 E WASHINGTON ST STE #111 SEQUIM, WA 98382	**-*****	501(C)(3)	700.	0.			PENINSULA FRIENDS OF THE ANIMALS: LIFETIME CARE
OLYMPIC VIEW COMMUNITY FOUNDATION 720 E WASHINGTON ST STE #111 SEQUIM, WA 98382	**-*****	501(C)(3)	5,822.	0.			GENERAL OPERATING SUPPORT (DENNIS BOYD TRAIL FUND - 827567)

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
OLYMPIC VIEW COMMUNITY FOUNDATION 720 E WASHINGTON ST STE #111 SEQUIM, WA 98382	**-*****	501(C)(3)	17,161.	0.			GENERAL OPERATING SUPPORT (PFOA - 820952)
PACIFIC HARBORS COUNCIL BOY SCOUTS OF AMERICA - 4802 S 19TH ST - TACOMA, WA 98405	**-*****	501(C)(3)	825.	0.			GENERAL OPERATING SUPPORT
PACIFIC HARBORS COUNCIL BOY SCOUTS OF AMERICA - 4802 S 19TH ST - TACOMA, WA 98405	**-*****	501(C)(3)	9,000.	0.			SUMMER BOY SCOUT CAMP EXPENSES FOR PIERCE COUNTY BOYS
PACIFIC LUTHERAN UNIVERSITY 12180 PARK AVE S TACOMA, WA 98447	**-*****	501(C)(3)	9,500.	0.			GENERAL OPERATING SUPPORT
PACIFIC LUTHERAN UNIVERSITY 12180 PARK AVE S TACOMA, WA 98447	**-*****	501(C)(3)	11,980.	0.			SCHOLARSHIPS
PACIFIC LUTHERAN UNIVERSITY 12180 PARK AVE S TACOMA, WA 98447	**-*****	501(C)(3)	240.	0.			HALEY INFORMATION CENTER AT THE LIBRARY
PACIFIC LUTHERAN UNIVERSITY 12180 PARK AVE S TACOMA, WA 98447	**-*****	501(C)(3)	1,500.	0.			PLU BIG BUDDIES PROGRAM (YPQI)
PACIFIC LUTHERAN UNIVERSITY 12180 PARK AVE S TACOMA, WA 98447	**-*****	501(C)(3)	10,600.	0.			NURSING SCHOLARSHIPS FOR TRANSFER STUDENTS FROM TCC, HIGHLINE, AND OLYMPIC COLLEGE
PACIFIC LUTHERAN UNIVERSITY 12180 PARK AVE S TACOMA, WA 98447	**-*****	501(C)(3)	2,500.	0.			KURT MAYER SCHOLARSHIP IN HOLOCAUST STUDIES

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
PCAF 3009 S 40TH ST TACOMA, WA 98409	**-*****	501(C)(3)	6,000.	0.			GENERAL OPERATING SUPPORT
PCAF 3009 S 40TH ST TACOMA, WA 98409	**-*****	501(C)(3)	500.	0.			GENERAL OPERATING SUPPORT
PCAF 3009 S 40TH ST TACOMA, WA 98409	**-*****	501(C)(3)	250.	0.			GENERAL OPERATING SUPPORT
PCAF 3009 S 40TH ST TACOMA, WA 98409	**-*****	501(C)(3)	1,000.	0.			GENERAL OPERATING SUPPORT
PEACE COMMUNITY CENTER 2106 S CUSHMAN AVE TACOMA, WA 98405	**-*****	501(C)(3)	25,000.	0.			CURRENT CAPITAL CAMPAIGN
PEACE COMMUNITY CENTER 2106 S CUSHMAN AVE TACOMA, WA 98405	**-*****	501(C)(3)	5,000.	0.			GENERAL OPERATING SUPPORT
PEACE COMMUNITY CENTER 2106 S CUSHMAN AVE TACOMA, WA 98405	**-*****	501(C)(3)	60,000.	0.			ELO COORDINATOR SALARY
PEACE COMMUNITY CENTER 2106 S CUSHMAN AVE TACOMA, WA 98405	**-*****	501(C)(3)	1,000.	0.			GENERAL OPERATING SUPPORT
PEACE COMMUNITY CENTER 2106 S CUSHMAN AVE TACOMA, WA 98405	**-*****	501(C)(3)	15,000.	0.			SITE TECHNICAL ASSISTANCE

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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PEACE COMMUNITY CENTER 2106 S CUSHMAN AVE TACOMA, WA 98405	**-*****	501(C)(3)	1,000.	0.			LEARNERS TO LEADERS EVENT
PEACH FOUNDATION 1098 MARLIN AVE FOSTER CITY, CA 94404	**-*****	501(C)(3)	28,800.	0.			SCHOLARSHIP FUND
PHILANTHROPY NORTHWEST 2101 4TH AVE STE 650 SEATTLE, WA 98121	**-*****	501(C)(3)	6,645.	0.			MEMBERSHIP DUES
PIERCE COLLEGE FOUNDATION 1601 39TH AVE SE PUYALLUP, WA 98374	**-*****	501(C)(3)	15,765.	0.			SCHOLARSHIPS/EDUCATIONAL EXPENSES FOR DISABLED STUDENTS IN FINANCIAL NEED
PIERCE COLLEGE FOUNDATION 1601 39TH AVE SE PUYALLUP, WA 98374	**-*****	501(C)(3)	10,501.	0.			GENERAL OPERATING SUPPORT
PIERCE COLLEGE FOUNDATION 1601 39TH AVE SE PUYALLUP, WA 98374	**-*****	501(C)(3)	500.	0.			SUPPORT FOR UNMET STUDENT NEED TO "FILL THE GAP BETWEEN STUDENT NEEDS AND PUBLIC SUPPORT"
PIERCE CONSERVATION DISTRICT PO BOX 1057 PUYALLUP, WA 98371	**-*****	GOVERNMENT	1,000.	0.			\$1,000 CHRIS TOWE STIPEND
PIERCE CONSERVATION DISTRICT PO BOX 1057 PUYALLUP, WA 98371	**-*****	GOVERNMENT	6,457.	0.			JHFS COI ACTIVITY 4.3.1: NATIVE AMERICAN COMMUNITY GARDEN
PIERCE CONSERVATION DISTRICT PO BOX 1057 PUYALLUP, WA 98371	**-*****	GOVERNMENT	1,000.	0.			PLACE PLANNING TEAM STIPENDS

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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PIERCE CONSERVATION DISTRICT PO BOX 1057 PUYALLUP, WA 98371	**_*****	GOVERNMENT	20,800.	0.			JHFS COI ACTIVITY 1.2.2: COMMUNITY COUNCIL SUPPORT
PIERCE CONSERVATION DISTRICT PO BOX 1057 PUYALLUP, WA 98371	**_*****	GOVERNMENT	4,000.	0.			COMMUNITY CREATED RESEARCH
PIERCE CONSERVATION DISTRICT PO BOX 1057 PUYALLUP, WA 98371	**_*****	GOVERNMENT	4,000.	0.			FOREST COI ACTIVITY 7.3.3: GREEN CITIES (TACOMA, PUYALLUP AND PIERCE COUNTY)
PIERCE CONSERVATION DISTRICT PO BOX 1057 PUYALLUP, WA 98371	**_*****	GOVERNMENT	3,000.	0.			TACOMA WHOLE CHILD PARTNERSHIP
PIERCE CONSERVATION DISTRICT PO BOX 1057 PUYALLUP, WA 98371	**_*****	GOVERNMENT	4,875.	0.			ELO PROGRAMMING: ELOC AT APPROVED TACOMA PUBLIC SCHOOLS SITES
PIERCE CONSERVATION DISTRICT PO BOX 1057 PUYALLUP, WA 98371	**_*****	GOVERNMENT	2,500.	0.			8TH AVE NW GREEN STREET RAIN GARDEN REHAB
PIERCE CONSERVATION DISTRICT PO BOX 1057 PUYALLUP, WA 98371	**_*****	GOVERNMENT	4,000.	0.			DIVERSITY, EQUITY AND INCLUSION COMMUNITY OF PRACTICE
PIERCE CONSERVATION DISTRICT PO BOX 1057 PUYALLUP, WA 98371	**_*****	GOVERNMENT	2,497.	0.			SOUTH PRAIRIE CREEK KNOTWEED CONTROL
PIERCE CONSERVATION DISTRICT PO BOX 1057 PUYALLUP, WA 98371	**_*****	GOVERNMENT	4,000.	0.			ACTIVITY 1.2.1 : COMMUNITY CREATED RESEARCH

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
PIERCE CONSERVATION DISTRICT PO BOX 1057 PUYALLUP, WA 98371	**-*****	GOVERNMENT	5,522.	0.			ACTIVITY 1.1.1, ACTIVITY 1.4.1, ACTIVITY 1.1.2, ACTIVITY 1.1.3, ACTIVITY 1.2.4
PIERCE COUNTY LIBRARY FOUNDATION 3005 112TH ST E TACOMA, WA 98446-2215	**-*****	501(C)(3)	250.	0.			GENERAL OPERATING SUPPORT
PIERCE COUNTY LIBRARY FOUNDATION 3005 112TH ST E TACOMA, WA 98446-2215	**-*****	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
PIERCE COUNTY LIBRARY FOUNDATION 3005 112TH ST E TACOMA, WA 98446-2215	**-*****	501(C)(3)	250.	0.			GENERAL OPERATING SUPPORT
PIERCE COUNTY LIBRARY FOUNDATION 3005 112TH ST E TACOMA, WA 98446-2215	**-*****	501(C)(3)	1,100.	0.			PURCHASING MATERIALS FOR THE PENINSULA LIBRARY
PIERCE COUNTY LIBRARY FOUNDATION 3005 112TH ST E TACOMA, WA 98446-2215	**-*****	501(C)(3)	400.	0.			SUPPORTING LIBRARY SERVICES AT THE KEY CENTER LIBRARY
PIERCE COUNTY LIBRARY FOUNDATION 3005 112TH ST E TACOMA, WA 98446-2215	**-*****	501(C)(3)	600.	0.			LIBRARY COLLECTIONS
PIERCE COUNTY LIBRARY FOUNDATION 3005 112TH ST E TACOMA, WA 98446-2215	**-*****	501(C)(3)	1,400.	0.			SUPPORTING THE STEILACOOM LIBRARY
PIERCE COUNTY LIBRARY FOUNDATION 3005 112TH ST E TACOMA, WA 98446-2215	**-*****	501(C)(3)	600.	0.			SUPPORTING OUTREACH EFFORTS

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
PLANNED PARENTHOOD OF THE GREAT NORTHWEST AND THE HAWAIIAN ISLANDS - 2001 E MADISON ST - SEATTLE, WA 98122	**_*****	501(C)(3)	250.	0.			GENERAL OPERATING SUPPORT
PLANNED PARENTHOOD OF THE GREAT NORTHWEST AND THE HAWAIIAN ISLANDS - 2001 E MADISON ST - SEATTLE, WA 98122	**_*****	501(C)(3)	515.	0.			GENERAL SUPPORT OF TACOMA AREA PROGRAMS
PLANNED PARENTHOOD OF THE GREAT NORTHWEST AND THE HAWAIIAN ISLANDS - 2001 E MADISON ST - SEATTLE, WA 98122	**_*****	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
PLANNED PARENTHOOD OF THE GREAT NORTHWEST AND THE HAWAIIAN ISLANDS - 2001 E MADISON ST - SEATTLE, WA 98122	**_*****	501(C)(3)	300.	0.			GENERAL OPERATING SUPPORT
PLANNED PARENTHOOD OF THE GREAT NORTHWEST AND THE HAWAIIAN ISLANDS - 2001 E MADISON ST - SEATTLE, WA 98122	**_*****	501(C)(3)	150.	0.			GENERAL OPERATING SUPPORT
PLANNED PARENTHOOD OF THE GREAT NORTHWEST AND THE HAWAIIAN ISLANDS - 2001 E MADISON ST - SEATTLE, WA 98122	**_*****	501(C)(3)	250.	0.			SEXUAL AND REPRODUCTIVE HEALTH CARE TO WOMEN AND MEN IN THE PACIFIC NORTHWEST
PLANNED PARENTHOOD OF THE GREAT NORTHWEST AND THE HAWAIIAN ISLANDS - 2001 E MADISON ST - SEATTLE, WA 98122	**_*****	501(C)(3)	500.	0.			GENERAL OPERATING SUPPORT
PLATEAU OUTREACH MINISTRIES PO BOX 391 ENUMCLAW, WA 98022	**_*****	501(C)(3)	5,000.	0.			GENERAL OPERATING SUPPORT AND WHITE RIVER COMMUNITY EXPANSION
POINT DEFIANCE ZOOLOGICAL SOCIETY 5400 N PEARL ST TACOMA, WA 98407	**_*****	501(C)(3)	6,850.	0.			GENERAL OPERATING SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
POINT DEFIANCE ZOOLOGICAL SOCIETY 5400 N PEARL ST TACOMA, WA 98407	**_*****	501(C)(3)	1,000.	0.			GENERAL OPERATING SUPPORT
POINT DEFIANCE ZOOLOGICAL SOCIETY 5400 N PEARL ST TACOMA, WA 98407	**_*****	501(C)(3)	2,000.	0.			GENERAL OPERATING SUPPORT
POINT DEFIANCE ZOOLOGICAL SOCIETY 5400 N PEARL ST TACOMA, WA 98407	**_*****	501(C)(3)	6,850.	0.			NEW EXHIBIT ACQUISITION SPECIAL EMPHASIS WHEN POSSIBLE
POINT DEFIANCE ZOOLOGICAL SOCIETY 5400 N PEARL ST TACOMA, WA 98407	**_*****	501(C)(3)	2,500.	0.			SUPPORT AS RESTRICTED BY DONOR
POINT DEFIANCE ZOOLOGICAL SOCIETY 5400 N PEARL ST TACOMA, WA 98407	**_*****	501(C)(3)	16,100.	0.			SUPPORT AS RESTRICTED BY DONOR
POINT DEFIANCE ZOOLOGICAL SOCIETY 5400 N PEARL ST TACOMA, WA 98407	**_*****	501(C)(3)	1,700.	0.			SUPPORT AS DETERMINED BY THE SOCIETY'S BOARD
POINT DEFIANCE ZOOLOGICAL SOCIETY 5400 N PEARL ST TACOMA, WA 98407	**_*****	501(C)(3)	900.	0.			SUPPORT AS RESTRICTED BY DONOR
PRIESTS OF THE SACRED HEART PO BOX 367 HALES CORNERS, WI 53130	**_*****	501(C)(3)	9,300.	0.			SACRED HEART MONASTERY IN HALES CORNERS, WI
PROJECT CHILD SUCCESS 1501 PACIFIC AVE SE STE 203 TACOMA, WA 98402	**_*****	501(C)(3)	10,100.	0.			FOCUS ON CHILDCARE

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	**-*****	501(C)(3)	69,700.	0.			JUST AND HEALTHY FOOD SYSTEMS COMMUNITY OF INTEREST WORK
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	**-*****	501(C)(3)	19,328.	0.			COI ACTIVITIES
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	**-*****	501(C)(3)	80,000.	0.			INDUSTRIAL STORMWATER COMMUNITY OF INTEREST WORK
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	**-*****	501(C)(3)	272.	0.			(ADMIN)
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	**-*****	501(C)(3)	1,500.	0.			ACTIVE TRANSPORTATION COMMUNITY OF INTEREST WORK
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	**-*****	501(C)(3)	2,688.	0.			ADMINISTRATIVE COORDINATOR (ACTIVITY 4.1.2)
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	**-*****	501(C)(3)	28,614.	0.			ACTIVE TRANSPORTATION COMMUNITY OF INTEREST WORK
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	**-*****	501(C)(3)	75,738.	0.			ACTIVITY
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	**-*****	501(C)(3)	5,000.	0.			ACTIVE TRANSPORTATION COMMUNITY OF INTEREST WORK

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	**-*****	501(C)(3)	527.	0.			ACTIVITY 2.5.2: FOOD TRUCK FOR SUMMER WORKSHOP
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	**-*****	501(C)(3)	82,600.	0.			ENVIRONMENTAL EDUCATION COMMUNITY OF INTEREST WORK
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	**-*****	501(C)(3)	200,000.	0.			BUILDING CAPACITY OF PUYALLUP WATERSHED INITIATIVE COMMUNITIES OF INTEREST
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	**-*****	501(C)(3)	2,000.	0.			INDUSTRIAL STORMWATER COMMUNITY OF INTEREST WORK
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	**-*****	501(C)(3)	4,000.	0.			ACTIVITY 5.2; \$4,000 CONSULTANT FEE FOR TRYGG CONSULTING
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	**-*****	501(C)(3)	72,600.	0.			AGRICULTURE COMMUNITY OF INTEREST WORK
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	**-*****	501(C)(3)	4,000.	0.			ACTIVITY 4.1.1 (MANAGER)
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	**-*****	501(C)(3)	10,000.	0.			JUST AND HEALTHY FOOD SYSTEMS COMMUNITY OF INTEREST WORK
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	**-*****	501(C)(3)	3,500.	0.			PROFESSIONAL AND ORGANIZATIONAL DEVELOPMENT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	**-*****	501(C)(3)	56,000.	0.			ACTIVE TRANSPORTATION COMMUNITY OF INTEREST WORK
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	**-*****	501(C)(3)	1,050.	0.			ACTIVE TRANSPORTATION COMMUNITY OF INTEREST WORK
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	**-*****	501(C)(3)	19,750.	0.			ENVIRONMENTAL EDUCATION COMMUNITY OF INTEREST WORK
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	**-*****	501(C)(3)	2,300.	0.			INDUSTRIAL STORMWATER COMMUNITY OF INTEREST WORK
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	**-*****	501(C)(3)	4,328.	0.			ACTIVE TRANSPORTATION COMMUNITY OF INTEREST WORK
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	**-*****	501(C)(3)	2,000.	0.			AGRICULTURE COMMUNITY OF INTEREST WORK
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	**-*****	501(C)(3)	14,883.	0.			ACTIVE TRANSPORTATION COMMUNITY OF INTEREST WORK
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	**-*****	501(C)(3)	77,500.	0.			FORESTS COMMUNITY OF INTEREST WORK
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	**-*****	501(C)(3)	132.	0.			EECOI ACTIVITY 4.2.1: MEETING SUPPLIES

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	**-*****	501(C)(3)	1,444.	0.			JHFS COI ACTIVITY 1.4.2 - COI ASSISTANT COORDINATOR (PARTNERS FOR PLACES)
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	**-*****	501(C)(3)	300.	0.			DIVERSITY, EQUITY AND INCLUSION COMMUNITY OF PRACTICE
PUYALLUP WATERSHED INITIATIVE 1208 S 10TH ST TACOMA, WA 98405	**-*****	501(C)(3)	1,800.	0.			CITY OF TACOMA INFRASTRUCTURE & PLANNING SUBCOMMITTEE REPORT PREPARATION
R. MERLE PALMER MINORITY SCHOLARSHIP FOUNDATION - PO BOX 7119 - TACOMA, WA 98417	**-*****	501(C)(3)	700.	0.			SCHOLARSHIPS FOR PIERCE COUNTY HIGH SCHOOL
R. MERLE PALMER MINORITY SCHOLARSHIP FOUNDATION - PO BOX 7119 - TACOMA, WA 98417	**-*****	501(C)(3)	1,000.	0.			GENERAL OPERATING SUPPORT
R. MERLE PALMER MINORITY SCHOLARSHIP FOUNDATION - PO BOX 7119 - TACOMA, WA 98417	**-*****	501(C)(3)	23,900.	0.			GENERAL OPERATING SUPPORT
R. MERLE PALMER MINORITY SCHOLARSHIP FOUNDATION - PO BOX 7119 - TACOMA, WA 98417	**-*****	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
RAINBOW CENTER 2215 PACIFIC AVE TACOMA, WA 98402	**-*****	501(C)(3)	2,500.	0.			GENERAL OPERATING SUPPORT
RAINBOW CENTER 2215 PACIFIC AVE TACOMA, WA 98402	**-*****	501(C)(3)	15,000.	0.			GENERAL OPERATING SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
RAINIER FOOTHILLS WELLNESS FOUNDATION - PO BOX 905 - ENUMCLAW, WA 98022	**-*****	501(C)(3)	5,000.	0.			CARE VAN TRANSPORTATION SERVICE
REBUILDING TOGETHER SOUTH SOUND 4019 S ORCHARD ST TACOMA, WA 98466	**-*****	501(C)(3)	20,000.	0.			GENERAL OPERATING SUPPORT
RESCUE MISSION PO BOX 1912 TACOMA, WA 98401	**-*****	501(C)(3)	1,250.	0.			GENERAL OPERATING SUPPORT
RESCUE MISSION PO BOX 1912 TACOMA, WA 98401	**-*****	501(C)(3)	3,515.	0.			GENERAL OPERATIONS IN TACOMA, WA
RESCUE MISSION PO BOX 1912 TACOMA, WA 98401	**-*****	501(C)(3)	300.	0.			GENERAL OPERATING SUPPORT
RESCUE MISSION PO BOX 1912 TACOMA, WA 98401	**-*****	501(C)(3)	500.	0.			EMERGENCY FAMILY SHELTER FUND
RESCUE MISSION PO BOX 1912 TACOMA, WA 98401	**-*****	501(C)(3)	15,000.	0.			GENERAL OPERATING SUPPORT
RESCUE MISSION PO BOX 1912 TACOMA, WA 98401	**-*****	501(C)(3)	9,300.	0.			GENERAL OPERATING SUPPORT
RESCUE MISSION PO BOX 1912 TACOMA, WA 98401	**-*****	501(C)(3)	2,500.	0.			GENERAL OPERATING SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
RESCUE MISSION PO BOX 1912 TACOMA, WA 98401	**-*****	501(C)(3)	6,850.	0.			GENERAL OPERATING SUPPORT
RESCUE MISSION PO BOX 1912 TACOMA, WA 98401	**-*****	501(C)(3)	500.	0.			GENERAL OPERATING SUPPORT
RESCUE MISSION PO BOX 1912 TACOMA, WA 98401	**-*****	501(C)(3)	500.	0.			GENERAL OPERATING EXPENSES
RESCUE MISSION PO BOX 1912 TACOMA, WA 98401	**-*****	501(C)(3)	695.	0.			GENERAL OPERATING SUPPORT
RESCUE MISSION PO BOX 1912 TACOMA, WA 98401	**-*****	501(C)(3)	1,250.	0.			GENERAL OPERATING SUPPORT
RESCUE MISSION PO BOX 1912 TACOMA, WA 98401	**-*****	501(C)(3)	300.	0.			GENERAL OPERATING SUPPORT
ROTARY CLUB OF UPPER KITTITAS COUNTY FOUNDATION - PO BOX 1035 - CLE ELUM, WA 98922	**-*****	501(C)(3)	7,500.	0.			INTERACT CLUB
ROTARY CLUB OF UPPER KITTITAS COUNTY FOUNDATION - PO BOX 1035 - CLE ELUM, WA 98922	**-*****	501(C)(3)	10,000.	0.			SUNCADIA OWNERS UKC ROTARY SCHOLARSHIP PROGRAM
SALVATION ARMY NORTHWEST DIVISION PO BOX 9219 SEATTLE, WA 98109	**-*****	501(C)(3)	5,160.	0.			GENERAL OPERATING SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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SCHOOL'S OUT WASHINGTON 801 23RD AVE S STE A SEATTLE, WA 98144	**_*****	501(C)(3)	5,000.	0.			SUMMER BLAST PROFESSIONAL DEVELOPMENT TRAINING
SCHOOL'S OUT WASHINGTON 801 23RD AVE S STE A SEATTLE, WA 98144	**_*****	501(C)(3)	3,825.	0.			BRIDGE CONFERENCE PARTICIPATION (9 PARTICIPANTS AT \$425/EA)
SCHOOL'S OUT WASHINGTON 801 23RD AVE S STE A SEATTLE, WA 98144	**_*****	501(C)(3)	4,825.	0.			SCHOLARSHIPS FOR BRIDGE CONFERENCE FEES
SCHOOL'S OUT WASHINGTON 801 23RD AVE S STE A SEATTLE, WA 98144	**_*****	501(C)(3)	20,000.	0.			PER DIEM: "REGISTRY ANGELS"
SCHOOL'S OUT WASHINGTON 801 23RD AVE S STE A SEATTLE, WA 98144	**_*****	501(C)(3)	15,000.	0.			SITE TECHNICAL ASSISTANCE
SCHOOL'S OUT WASHINGTON 801 23RD AVE S STE A SEATTLE, WA 98144	**_*****	501(C)(3)	60,000.	0.			ELO COORDINATOR SALARY
SECOND CITY CHAMBER SERIES PO BOX 7879 TACOMA, WA 98417	**_*****	501(C)(3)	5,000.	0.			GENERAL OPERATING SUPPORT
SHANAMAN TACOMA PIERCE COUNTY SPORTS MUSEUM - PO BOX 1614 - TACOMA, WA 98401-1614	**_*****	501(C)(3)	15,000.	0.			GENERAL OPERATING SUPPORT
SHANAMAN TACOMA PIERCE COUNTY SPORTS MUSEUM - PO BOX 1614 - TACOMA, WA 98401-1614	**_*****	501(C)(3)	15,000.	0.			GENERAL OPERATING SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
SHARED HOUSING SERVICES 901 S 11TH ST TACOMA, WA 98405	**-*****	501(C)(3)	1,228.	0.			GENERAL OPERATING SUPPORT
SHARED HOUSING SERVICES 901 S 11TH ST TACOMA, WA 98405	**-*****	501(C)(3)	15,000.	0.			GENERAL OPERATING SUPPORT
SKYLINE PRESBYTERIAN CHURCH 6301 WESTGATE BLVD TACOMA, WA 98406	**-*****	501(C)(3)	10,000.	0.			GENERAL OPERATING EXPENSES
SKYLINE PRESBYTERIAN CHURCH 6301 WESTGATE BLVD TACOMA, WA 98406	**-*****	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
SOUTH SOUND CARE FOUNDATION PO BOX 1314 TACOMA, WA 98401	**-*****	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
SOUTHWESTERN WASHINGTON SYNOD ELCA 420 121ST ST S TACOMA, WA 98444	**-*****	501(C)(3)	5,563.	0.			SALISHAN MISSION
SUMNER-BONNEY LAKE EDUCATIONAL FOUNDATION - 1202 WOOD AVE - SUMNER, WA 98390	**-*****	501(C)(3)	400.	0.			PROVIDING SCHOLARSHIPS
SUMNER-BONNEY LAKE EDUCATIONAL FOUNDATION - 1202 WOOD AVE - SUMNER, WA 98390	**-*****	501(C)(3)	400.	0.			GENERAL OPERATING SUPPORT
SUMNER-BONNEY LAKE EDUCATIONAL FOUNDATION - 1202 WOOD AVE - SUMNER, WA 98390	**-*****	501(C)(3)	1,300.	0.			GENERAL OPERATING SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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SUMNER-BONNEY LAKE EDUCATIONAL FOUNDATION - 1202 WOOD AVE - SUMNER, WA 98390	**-*****	501(C)(3)	400.	0.			SCHOLARSHIPS TO STUDENTS STUDYING THE ARTS, MUSIC, OR JOURNALISM
SUMNER-BONNEY LAKE EDUCATIONAL FOUNDATION - 1202 WOOD AVE - SUMNER, WA 98390	**-*****	501(C)(3)	300.	0.			SCHOLARSHIPS FOR STUDENTS MAJORING IN EDUCATION
SUMNER-BONNEY LAKE EDUCATIONAL FOUNDATION - 1202 WOOD AVE - SUMNER, WA 98390	**-*****	501(C)(3)	2,800.	0.			GENERAL OPERATING SUPPORT
SUMNER-BONNEY LAKE EDUCATIONAL FOUNDATION - 1202 WOOD AVE - SUMNER, WA 98390	**-*****	501(C)(3)	4,500.	0.			PROVIDING SCHOLARSHIPS
SUMNER-BONNEY LAKE EDUCATIONAL FOUNDATION - 1202 WOOD AVE - SUMNER, WA 98390	**-*****	501(C)(3)	300.	0.			SCHOLARSHIPS FOR STUDENTS MAJORING IN COMMUNICATIONS OR MUSIC
SUMNER-BONNEY LAKE EDUCATIONAL FOUNDATION - 1202 WOOD AVE - SUMNER, WA 98390	**-*****	501(C)(3)	500.	0.			STUDENT SCHOLARSHIPS
SUSTAINABLE CONNECTIONS 1707 ELLIS ST STE 221 BELLINGHAM, WA 98225	**-*****	501(C)(3)	278.	0.			AGRICULTURE COMMUNITY OF INTEREST WORK
SUSTAINABLE CONNECTIONS 1707 ELLIS ST STE 221 BELLINGHAM, WA 98225	**-*****	501(C)(3)	3,623.	0.			AGRICULTURE COMMUNITY OF INTEREST WORK
SUSTAINABLE CONNECTIONS 1707 ELLIS ST STE 221 BELLINGHAM, WA 98225	**-*****	501(C)(3)	30,305.	0.			AGRICULTURE COMMUNITY OF INTEREST WORK

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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SYMPHONY TACOMA 901 BROADWAY STE 600 TACOMA, WA 98402	**-*****	501(C)(3)	1,400.	0.			GENERAL OPERATING SUPPORT
SYMPHONY TACOMA 901 BROADWAY STE 600 TACOMA, WA 98402	**-*****	501(C)(3)	500.	0.			GENERAL OPERATING SUPPORT
SYMPHONY TACOMA 901 BROADWAY STE 600 TACOMA, WA 98402	**-*****	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
SYMPHONY TACOMA 901 BROADWAY STE 600 TACOMA, WA 98402	**-*****	501(C)(3)	2,500.	0.			GENERAL OPERATING SUPPORT
SYMPHONY TACOMA 901 BROADWAY STE 600 TACOMA, WA 98402	**-*****	501(C)(3)	30,000.	0.			GENERAL OPERATING SUPPORT
SYMPHONY TACOMA 901 BROADWAY STE 600 TACOMA, WA 98402	**-*****	501(C)(3)	2,500.	0.			GENERAL OPERATING SUPPORT
SYMPHONY TACOMA 901 BROADWAY STE 600 TACOMA, WA 98402	**-*****	501(C)(3)	4,875.	0.			PROGRAMMING AT TACOMA PUBLIC SCHOOLS WHOLE CHILD PARTNERSHIP EXPANDED LEARNING CENTERS
SYMPHONY TACOMA 901 BROADWAY STE 600 TACOMA, WA 98402	**-*****	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
TACOMA ART MUSEUM 1701 PACIFIC AVE TACOMA, WA 98402-3214	**-*****	501(C)(3)	3,000.	0.			GENERAL OPERATING SUPPORT

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
TACOMA ART MUSEUM 1701 PACIFIC AVE TACOMA, WA 98402-3214	**-*****	501(C)(3)	2,500.	0.			GENERAL OPERATING SUPPORT
TACOMA ART MUSEUM 1701 PACIFIC AVE TACOMA, WA 98402-3214	**-*****	501(C)(3)	1,200.	0.			GENERAL OPERATING SUPPORT
TACOMA ART MUSEUM 1701 PACIFIC AVE TACOMA, WA 98402-3214	**-*****	501(C)(3)	500.	0.			BENAROYA WING GIFT
TACOMA ART MUSEUM 1701 PACIFIC AVE TACOMA, WA 98402-3214	**-*****	501(C)(3)	515.	0.			GENERAL OPERATING SUPPORT
TACOMA ART MUSEUM 1701 PACIFIC AVE TACOMA, WA 98402-3214	**-*****	501(C)(3)	3,000.	0.			ELO PROGRAMMING AT TPS SITES
TACOMA ART MUSEUM 1701 PACIFIC AVE TACOMA, WA 98402-3214	**-*****	501(C)(3)	417.	0.			GENERAL OPERATING SUPPORT
TACOMA ART MUSEUM 1701 PACIFIC AVE TACOMA, WA 98402-3214	**-*****	501(C)(3)	4,875.	0.			PROGRAMMING AT TACOMA PUBLIC SCHOOLS WHOLE CHILD PARTNERSHIP EXPANDED LEARNING CENTERS
TACOMA ART MUSEUM 1701 PACIFIC AVE TACOMA, WA 98402-3214	**-*****	501(C)(3)	1,000.	0.			GENERAL OPERATING SUPPORT
TACOMA ART MUSEUM 1701 PACIFIC AVE TACOMA, WA 98402-3214	**-*****	501(C)(3)	5,990.	0.			GENERAL OPERATING SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
TACOMA ART MUSEUM 1701 PACIFIC AVE TACOMA, WA 98402-3214	**-*****	501(C)(3)	500.	0.			AFTER SCHOOL ARTS PROGRAM
TACOMA ART MUSEUM 1701 PACIFIC AVE TACOMA, WA 98402-3214	**-*****	501(C)(3)	180.	0.			GENERAL OPERATING SUPPORT
TACOMA ARTS LIVE 901 BROADWAY STE 700 TACOMA, WA 98402-4415	**-*****	501(C)(3)	15,000.	0.			SITE TECHNICAL ASSISTANCE
TACOMA ARTS LIVE 901 BROADWAY STE 700 TACOMA, WA 98402-4415	**-*****	501(C)(3)	500.	0.			GENERAL OPERATING SUPPORT
TACOMA ARTS LIVE 901 BROADWAY STE 700 TACOMA, WA 98402-4415	**-*****	501(C)(3)	1,000.	0.			ARTS EDUCATION PROGRAMS
TACOMA ARTS LIVE 901 BROADWAY STE 700 TACOMA, WA 98402-4415	**-*****	501(C)(3)	3,000.	0.			SOCIAL EMOTIONAL LEARNING ELO COORDINATION WORK TEAM - TONY GOMEZ
TACOMA ARTS LIVE 901 BROADWAY STE 700 TACOMA, WA 98402-4415	**-*****	501(C)(3)	6,850.	0.			EDUCATIONAL PROGRAMS
TACOMA ARTS LIVE 901 BROADWAY STE 700 TACOMA, WA 98402-4415	**-*****	501(C)(3)	4,875.	0.			PROGRAMMING AT TACOMA PUBLIC SCHOOLS WHOLE CHILD PARTNERSHIP EXPANDED LEARNING CENTERS
TACOMA ARTS LIVE 901 BROADWAY STE 700 TACOMA, WA 98402-4415	**-*****	501(C)(3)	2,000.	0.			CENTENNIAL CAMPAIGN

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
TACOMA ARTS LIVE 901 BROADWAY STE 700 TACOMA, WA 98402-4415	**-*****	501(C)(3)	3,000.	0.			ELO PROGRAMMING AT TPS SITES
TACOMA ARTS LIVE 901 BROADWAY STE 700 TACOMA, WA 98402-4415	**-*****	501(C)(3)	60,000.	0.			ELO COORDINATOR SALARY
TACOMA ATHLETIC COMMISSION PO BOX 11304 TACOMA, WA 98411	**-*****	501(C)(3)	3,480.	0.			GENERAL OPERATING SUPPORT
TACOMA ATHLETIC COMMISSION PO BOX 11304 TACOMA, WA 98411	**-*****	501(C)(3)	900.	0.			CLAY HUNTINGTON SPORTS COMMUNICATIONS SCHOLARSHIP
TACOMA ATHLETIC COMMISSION PO BOX 11304 TACOMA, WA 98411	**-*****	501(C)(3)	2,200.	0.			TACOMA ATHLETIC COMMISSION SCHOLARSHIP
TACOMA COMMUNITY BOAT BUILDERS 1120 EAST D ST. TACOMA, WA 98421	**-*****	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
TACOMA COMMUNITY BOAT BUILDERS 1120 EAST D ST. TACOMA, WA 98421	**-*****	501(C)(3)	5,000.	0.			GENERAL OPERATING SUPPORT
TACOMA COMMUNITY BOAT BUILDERS 1120 EAST D ST. TACOMA, WA 98421	**-*****	501(C)(3)	15,000.	0.			GENERAL OPERATING SUPPORT
TACOMA COMMUNITY BOAT BUILDERS 1120 EAST D ST. TACOMA, WA 98421	**-*****	501(C)(3)	250.	0.			SUPPORT FOR RESIDENTS OF REMANN HALL

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
TACOMA COMMUNITY COLLEGE FINANCIAL AID SERVICES/ATTN: SCHOLARSHIP COORDINATOR - TACOMA, WA 98466-6100		SCHOOL	1,667.	0.			SCHOLARSHIP FUND
TACOMA COMMUNITY COLLEGE FOUNDATION - 6501 S 19TH ST BLDG 6 - TACOMA, WA 98466	**-*****	501(C)(3)	5,000.	0.			SCHOLARSHIP FUND
TACOMA COMMUNITY HOUSE 1314 S L ST TACOMA, WA 98405	**-*****	501(C)(3)	500.	0.			GENERAL OPERATING SUPPORT
TACOMA COMMUNITY HOUSE 1314 S L ST TACOMA, WA 98405	**-*****	501(C)(3)	3,000.	0.			ELO PROGRAMMING AT TPS SITES
TACOMA COMMUNITY HOUSE 1314 S L ST TACOMA, WA 98405	**-*****	501(C)(3)	500.	0.			GENERAL OPERATING EXPENSES
TACOMA COMMUNITY HOUSE 1314 S L ST TACOMA, WA 98405	**-*****	501(C)(3)	5,000.	0.			LEGAL SUPPORT AND GENERAL SUPPORT AFTER NAVIGATING THE LEGAL SYSTEM
TACOMA COMMUNITY HOUSE 1314 S L ST TACOMA, WA 98405	**-*****	501(C)(3)	5,000.	0.			GENERAL OPERATING SUPPORT
TACOMA COMMUNITY HOUSE 1314 S L ST TACOMA, WA 98405	**-*****	501(C)(3)	250.	0.			CAPITAL CAMPAIGN (IN HONOR OF BOB YAMASHITA)
TACOMA COMMUNITY HOUSE 1314 S L ST TACOMA, WA 98405	**-*****	501(C)(3)	5,000.	0.			CAPITAL CAMPAIGN - EMBRACING AMERICA'S PROMISE

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
TACOMA COMMUNITY HOUSE 1314 S L ST TACOMA, WA 98405	**-*****	501(C)(3)	100,000.	0.			BUILDING CAMPAIGN
TACOMA COMMUNITY HOUSE 1314 S L ST TACOMA, WA 98405	**-*****	501(C)(3)	2,500.	0.			CAPITAL CAMPAIGN
TACOMA COMMUNITY HOUSE 1314 S L ST TACOMA, WA 98405	**-*****	501(C)(3)	750.	0.			GENERAL OPERATING SUPPORT
TACOMA COMMUNITY HOUSE 1314 S L ST TACOMA, WA 98405	**-*****	501(C)(3)	5,000.	0.			GENERAL OPERATING SUPPORT
TACOMA COMMUNITY HOUSE 1314 S L ST TACOMA, WA 98405	**-*****	501(C)(3)	250.	0.			PROVIDE COMPREHENSIVE SOCIAL SERVICES
TACOMA COMMUNITY HOUSE 1314 S L ST TACOMA, WA 98405	**-*****	501(C)(3)	2,500.	0.			GENERAL OPERATING SUPPORT
TACOMA COMMUNITY HOUSE 1314 S L ST TACOMA, WA 98405	**-*****	501(C)(3)	4,875.	0.			ELO PROGRAMMING: ELOC AT APPROVED TACOMA PUBLIC SCHOOLS SITES (READ 2 ME)
TACOMA ELKS LODGE NO. 174 B.P.O.E. PO BOX 11008 TACOMA, WA 98411	**-*****	501(C)(8)	8,600.	0.			TALL ELKS FUND
TACOMA ELKS LODGE NO. 174 B.P.O.E. PO BOX 11008 TACOMA, WA 98411	**-*****	501(C)(8)	3,401.	0.			PROGRAMS THAT BENEFIT CHILDREN

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
TACOMA FARMERS MARKET PO BOX 707 TACOMA, WA 98401	**-*****	501(C)(4)	10,000.	0.			GENERAL OPERATING SUPPORT
TACOMA HISTORICAL SOCIETY PO BOX 1865 TACOMA, WA 98402	**-*****	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
TACOMA HISTORICAL SOCIETY PO BOX 1865 TACOMA, WA 98402	**-*****	501(C)(3)	500.	0.			CURATION, BOOK PUBLISHING, ANNUAL AND EDUCATIONAL TOURS
TACOMA HISTORICAL SOCIETY PO BOX 1865 TACOMA, WA 98402	**-*****	501(C)(3)	1,200.	0.			GENERAL OPERATING SUPPORT
TACOMA HISTORICAL SOCIETY PO BOX 1865 TACOMA, WA 98402	**-*****	501(C)(3)	500.	0.			GENERAL OPERATING SUPPORT
TACOMA HOUSING AUTHORITY 902 S L ST TACOMA, WA 98405		501(C)(3)	10,000.	0.			ASSOCIATED PROJECTS SUPPORTING THE ARLINGTON YOUTH SHELTER
TACOMA OPERA ASSOCIATION 47 ST HELENS AVE STE 201 TACOMA, WA 98402	*****	501(C)(3)	515.	0.			GENERAL OPERATING SUPPORT
TACOMA OPERA ASSOCIATION 47 ST HELENS AVE STE 201 TACOMA, WA 98402	*****	501(C)(3)	1,300.	0.			GENERAL OPERATING SUPPORT
TACOMA OPERA ASSOCIATION 47 ST HELENS AVE STE 201 TACOMA, WA 98402	*****	501(C)(3)	300.	0.			GENERAL OPERATING SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
TACOMA OPERA ASSOCIATION 47 ST HELENS AVE STE 201 TACOMA, WA 98402	*****	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
TACOMA OPERA ASSOCIATION 47 ST HELENS AVE STE 201 TACOMA, WA 98402	*****	501(C)(3)	250.	0.			GENERAL OPERATING SUPPORT
TACOMA OPERA ASSOCIATION 47 ST HELENS AVE STE 201 TACOMA, WA 98402	*****	501(C)(3)	500.	0.			GENERAL OPERATING SUPPORT
TACOMA PIERCE COUNTY HABITAT FOR HUMANITY - 4824 S TACOMA WAY - TACOMA, WA 98409	**_*****	501(C)(3)	1,000.	0.			PROPERTY ACQUISITION
TACOMA PIERCE COUNTY HABITAT FOR HUMANITY - 4824 S TACOMA WAY - TACOMA, WA 98409	**_*****	501(C)(3)	250.	0.			HOUSING
TACOMA PIERCE COUNTY HABITAT FOR HUMANITY - 4824 S TACOMA WAY - TACOMA, WA 98409	**_*****	501(C)(3)	25,000.	0.			GENERAL OPERATING SUPPORT
TACOMA PUBLIC SCHOOLS PO BOX 1357 TACOMA, WA 98401-1357		SCHOOL	1,000.	0.			SHELL ECO CAR CHALLENGE PROJECT
TACOMA PUBLIC SCHOOLS PO BOX 1357 TACOMA, WA 98401-1357		SCHOOL	11,245.	0.			SEL WEB ADMINISTRATION COSTS
TACOMA PUBLIC SCHOOLS PO BOX 1357 TACOMA, WA 98401-1357		SCHOOL	292,090.	0.			SECOND INSTALLMENT OF WALLACE SEL INITIATIVE

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
TACOMA PUBLIC SCHOOLS PO BOX 1357 TACOMA, WA 98401-1357		SCHOOL	4,700.	0.			MUSICAL INSTRUMENT REPAIR AND REPLACEMENT
TACOMA SOUTH PUGET SOUND MESA MORKEN CENTER FOR LEARNING & TECHNO TACOMA, WA 98447	**_*****	501(C)(3)	3,000.	0.			SOCIAL EMOTIONAL LEARNING ELO COORDINATION WORK TEAM - JR NOBELS
TACOMA SOUTH PUGET SOUND MESA MORKEN CENTER FOR LEARNING & TECHNO TACOMA, WA 98447	**_*****	501(C)(3)	4,875.	0.			ELO PROGRAMMING: ELOC AT APPROVED TACOMA PUBLIC SCHOOLS SITES
TACOMA URBAN LEAGUE 2550 S YAKIMA AVE TACOMA, WA 98405	**_*****	501(C)(3)	7,500.	0.			MALE INVOLVEMENT PROGRAM (MIP)
TACOMA URBAN LEAGUE 2550 S YAKIMA AVE TACOMA, WA 98405	**_*****	501(C)(3)	4,875.	0.			ELO PROGRAMMING: ELOC AT APPROVED TACOMA PUBLIC SCHOOLS SITES (MALE INVOLVEMENT PROGRAM)
TACOMA URBAN LEAGUE 2550 S YAKIMA AVE TACOMA, WA 98405	**_*****	501(C)(3)	250.	0.			GENERAL OPERATING SUPPORT
TACOMA URBAN LEAGUE 2550 S YAKIMA AVE TACOMA, WA 98405	**_*****	501(C)(3)	3,000.	0.			SOCIAL EMOTIONAL LEARNING ELO COORDINATION WORK TEAM - T'WANA FRANKLIN
TACOMA URBAN LEAGUE 2550 S YAKIMA AVE TACOMA, WA 98405	**_*****	501(C)(3)	3,000.	0.			ELO PROGRAMMING AT TPS SITES
TACOMA URBAN LEAGUE 2550 S YAKIMA AVE TACOMA, WA 98405	**_*****	501(C)(3)	1,000.	0.			50TH ANNIVERSARY GALA: TABLE FOR 10

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
TACOMA-PIERCE COUNTY HEALTH DEPARTMENT - 3629 S D ST MS 001 - TACOMA, WA 98418-6813	**_*****	GOVERNMENT	13,900.	0.			INCENTIVES/GIFTS/ESSENTIA FOR UNWED FIRST TIME MOTHERS IN PIERCE COUNTY
TAHOMA AUDUBON SOCIETY 2917 MORRISON RD W UNIVERSITY PLACE, WA 98466	**_*****	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
TAHOMA AUDUBON SOCIETY 2917 MORRISON RD W UNIVERSITY PLACE, WA 98466	**_*****	501(C)(3)	1,400.	0.			GENERAL OPERATING SUPPORT
TAHOMA AUDUBON SOCIETY 2917 MORRISON RD W UNIVERSITY PLACE, WA 98466	**_*****	501(C)(3)	500.	0.			GENERAL OPERATING SUPPORT
TAHOMA AUDUBON SOCIETY 2917 MORRISON RD W UNIVERSITY PLACE, WA 98466	**_*****	501(C)(3)	700.	0.			GENERAL OPERATING SUPPORT
TAHOMA AUDUBON SOCIETY 2917 MORRISON RD W UNIVERSITY PLACE, WA 98466	**_*****	501(C)(3)	400.	0.			GENERAL OPERATING SUPPORT
TAHOMA AUDUBON SOCIETY 2917 MORRISON RD W UNIVERSITY PLACE, WA 98466	**_*****	501(C)(3)	12,100.	0.			GENERAL OPERATING SUPPORT
TAHOMA AUDUBON SOCIETY 2917 MORRISON RD W UNIVERSITY PLACE, WA 98466	**_*****	501(C)(3)	1,100.	0.			GENERAL OPERATING SUPPORT
TAHOMA AUDUBON SOCIETY 2917 MORRISON RD W UNIVERSITY PLACE, WA 98466	**_*****	501(C)(3)	500.	0.			GENERAL OPERATING SUPPORT

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
TAHOMA AUDUBON SOCIETY 2917 MORRISON RD W UNIVERSITY PLACE, WA 98466	**_*****	501(C)(3)	3,000.	0.			ELO PROGRAMMING AT TPS SITES
TAHOMA AUDUBON SOCIETY 2917 MORRISON RD W UNIVERSITY PLACE, WA 98466	**_*****	501(C)(3)	300.	0.			FALL APPEAL
TEAMCHILD 1225 S WELLER ST STE 420 SEATTLE, WA 98144	**_*****	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT OPERATIONS: \$2,500
TEMPLE BETH EL 5975 S 12TH STREET TACOMA, WA 98465-1936	**_*****	501(C)(3)	5,000.	0.			GENERAL OPERATING SUPPORT; \$2,500 MILLENIAL FUND
TEMPLE BETH EL 5975 S 12TH STREET TACOMA, WA 98465-1936	**_*****	501(C)(3)	1,000.	0.			HIGH HOLY DAY APPEAL
TEMPLE BETH EL 5975 S 12TH STREET TACOMA, WA 98465-1936	**_*****	501(C)(3)	21,000.	0.			CANTER FUND (\$20,000); LAMED VAV (\$1,000)
THE FIRST TEE OF SOUTH PUGET SOUND 7108 LAKEWOOD DR W TACOMA, WA 98467	**_*****	501(C)(3)	4,875.	0.			ELO PROGRAMMING: ELOC AT APPROVED TACOMA PUBLIC SCHOOLS SITES
THE FIRST TEE OF SOUTH PUGET SOUND 7108 LAKEWOOD DR W TACOMA, WA 98467	**_*****	501(C)(3)	1,000.	0.			YOUTH SCHOLARSHIP FUND
THE FIRST TEE OF SOUTH PUGET SOUND 7108 LAKEWOOD DR W TACOMA, WA 98467	**_*****	501(C)(3)	3,000.	0.			ELO PROGRAMMING AT TPS SITES

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
THE GOODTIMES PROJECT 7400 SAND POINT WAY NE #101 S SHORELINE, WA 98115	**-*****	501(C)(3)	13,300.	0.			GENERAL OPERATING SUPPORT
THE LIGHTHOUSE FOR THE BLIND, INC. 2501 S PLUM ST SEATTLE, WA 98144	**-*****	501(C)(3)	17,500.	0.			MACHINE SHOP ACCESSIBILITY ENHANCEMENTS: 5 X CCTVS
THE LIGHTHOUSE FOR THE BLIND, INC. 2501 S PLUM ST SEATTLE, WA 98144	**-*****	501(C)(3)	4,300.	0.			GENERAL OPERATING SUPPORT
THE MUSEUM OF FLIGHT 9404 E MARGINAL WAY S SEATTLE, WA 98108	**-*****	501(C)(3)	10,000.	0.			AVIATION LEARNING CENTER: IPADS, ASSOCIATED HARDWARE, AND PROGRAMS FOR FLIGHT SIMULATORS
THE REFORMATION PROJECT PO BOX 14862 LENEXA, KS 66285	**-*****	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
THE SALVATION ARMY 1110 S PUGET SOUND AVE TACOMA, WA 98405	**-*****	501(C)(3)	500.	0.			GENERAL OPERATING SUPPORT
THE SALVATION ARMY 1110 S PUGET SOUND AVE TACOMA, WA 98405	**-*****	501(C)(3)	500.	0.			GENERAL OPERATING SUPPORT: IN HONOR OF THE HOLIDAYS
THE SALVATION ARMY 1110 S PUGET SOUND AVE TACOMA, WA 98405	**-*****	501(C)(3)	10,000.	0.			CAPITAL FUND
THE SALVATION ARMY 1110 S PUGET SOUND AVE TACOMA, WA 98405	**-*****	501(C)(3)	500.	0.			GENERAL OPERATING SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
THE SALVATION ARMY 1110 S PUGET SOUND AVE TACOMA, WA 98405	**-*****	501(C)(3)	10,000.	0.			KITCHEN REMODELING PROJECT
THE SALVATION ARMY 1110 S PUGET SOUND AVE TACOMA, WA 98405	**-*****	501(C)(3)	500.	0.			GENERAL OPERATING SUPPORT
THE SALVATION ARMY 1110 S PUGET SOUND AVE TACOMA, WA 98405	**-*****	501(C)(3)	1,228.	0.			GENERAL OPERATING SUPPORT
THE SALVATION ARMY 1110 S PUGET SOUND AVE TACOMA, WA 98405	**-*****	501(C)(3)	825.	0.			GENERAL OPERATING SUPPORT
THE SALVATION ARMY 1110 S PUGET SOUND AVE TACOMA, WA 98405	**-*****	501(C)(3)	3,517.	0.			GENERAL OPERATIONS IN PIERCE COUNTY, WA
THE SALVATION ARMY 1110 S PUGET SOUND AVE TACOMA, WA 98405	**-*****	501(C)(3)	500.	0.			EMERGENCY FAMILY LODGE
THE SALVATION ARMY 1110 S PUGET SOUND AVE TACOMA, WA 98405	**-*****	501(C)(3)	300.	0.			GENERAL OPERATING SUPPORT
THE SALVATION ARMY 1110 S PUGET SOUND AVE TACOMA, WA 98405	**-*****	501(C)(3)	500.	0.			GENERAL OPERATING EXPENSES
THE SALVATION ARMY 1110 S PUGET SOUND AVE TACOMA, WA 98405	**-*****	501(C)(3)	973.	0.			GENERAL OPERATING SUPPORT

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
THE WISHING WELL FOUNDATION 16524 89TH AVE E PUYALLUP, WA 98375	**-*****	501(C)(3)	7,500.	0.			GENERAL OPERATING SUPPORT
THE WISHING WELL FOUNDATION 16524 89TH AVE E PUYALLUP, WA 98375	**-*****	501(C)(3)	5,000.	0.			GENERAL OPERATING SUPPORT
TOYS FOR KIDS 4008 243RD PL SE ISSAQUAH, WA 98029	**-*****	501(C)(3)	5,000.	0.			DAVE HENDERSON SCHOLARSHIP
UNCOMMON 2112 109TH ST S STE 508 TACOMA, WA 98444	**-*****	501(C)(3)	3,000.	0.			ELO PROGRAMMING AT TPS SITES
UNCOMMON 2112 109TH ST S STE 508 TACOMA, WA 98444	**-*****	501(C)(3)	4,875.	0.			ELO PROGRAMMING: ELOC AT APPROVED TACOMA PUBLIC SCHOOLS SITES
UNITED WAY OF PIERCE COUNTY PO BOX 2215 TACOMA, WA 98401-2215	**-*****	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
UNITED WAY OF PIERCE COUNTY PO BOX 2215 TACOMA, WA 98401-2215	**-*****	501(C)(3)	500.	0.			GENERAL OPERATING SUPPORT
UNITED WAY OF PIERCE COUNTY PO BOX 2215 TACOMA, WA 98401-2215	**-*****	501(C)(3)	25,000.	0.			POVERTY TO POSSIBILITIES SUMMIT
UNITED WAY OF PIERCE COUNTY PO BOX 2215 TACOMA, WA 98401-2215	**-*****	501(C)(3)	834.	0.			GENERAL OPERATING SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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 WAY OF PIERCE COUNTY PO BOX 2215 TACOMA, WA 98401-2215	**-*****	501(C)(3)	250.	0.			COMMUNITY CELEBRATION
UNITED WAY OF PIERCE COUNTY PO BOX 2215 TACOMA, WA 98401-2215	**-*****	501(C)(3)	5,000.	0.			BREAKING THE CYCLE OF POVERTY
UNIVERSITY OF PUGET SOUND 1500 N WARNER ST #1080 TACOMA, WA 98416	**-*****	501(C)(3)	100,000.	0.			WELCOME CENTER BUILDING
UNIVERSITY OF PUGET SOUND 1500 N WARNER ST #1080 TACOMA, WA 98416	**-*****	501(C)(3)	5,000.	0.			ACCESS PROGRAMS' SUMMER ACADEMIC CHALLENGE
UNIVERSITY OF PUGET SOUND 1500 N WARNER ST #1080 TACOMA, WA 98416	**-*****	501(C)(3)	1,120.	0.			ERNA F. GUILFOIL SCHOLARSHIP FUND
UNIVERSITY OF PUGET SOUND 1500 N WARNER ST #1080 TACOMA, WA 98416	**-*****	501(C)(3)	825.	0.			GENERAL OPERATING SUPPORT
UNIVERSITY OF PUGET SOUND 1500 N WARNER ST #1080 TACOMA, WA 98416	**-*****	501(C)(3)	42,729.	0.			GENERAL PURPOSES
UNIVERSITY OF PUGET SOUND 1500 N WARNER ST #1080 TACOMA, WA 98416	**-*****	501(C)(3)	11,980.	0.			SCHOLARSHIPS
UNIVERSITY OF WASHINGTON C-314 SCIENCES CTR UW BOX 356350 SEATTLE, WA 98195-6350	**-*****	501(C)(3)	5,990.	0.			SCHOLARSHIPS TO MINORITY STUDENTS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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 C-314 SCIENCES CTR UW BOX 356350 SEATTLE, WA 98195-6350	**-*****	501(C)(3)	400.	0.			MEDICAL RESEARCH
UNIVERSITY OF WASHINGTON, TACOMA 1900 COMMERCE ST BOX 358430 TACOMA, WA 98402	**-*****	501(C)(3)	6,850.	0.			URBAN WATERS PROJECT SPECIAL EMPHASIS WHEN POSSIBLE
UNIVERSITY OF WASHINGTON, TACOMA 1900 COMMERCE ST BOX 358432 TACOMA, WA 98402	**-*****	501(C)(3)	2,000.	0.			ACTIVITY 1.1.1: SEARCH - TRYGG CONSULTING
UNIVERSITY OF WASHINGTON, TACOMA 1900 COMMERCE ST BOX 358432 TACOMA, WA 98402	**-*****	501(C)(3)	2,500.	0.			SUMMER SOIR?E TABLE SPONSORSHIP
UNIVERSITY OF WASHINGTON, TACOMA 1900 COMMERCE ST BOX 358432 TACOMA, WA 98402	**-*****	501(C)(3)	1,784.	0.			STUDENT SUMMER INTERNSHIP AT PACK FOREST
UNIVERSITY OF WASHINGTON, TACOMA 1900 COMMERCE ST BOX 358432 TACOMA, WA 98402	**-*****	501(C)(3)	3,500.	0.			THREE CIRCLES CENTER (ACTIVITY 3.3.1)
UNIVERSITY OF WASHINGTON, TACOMA 1900 COMMERCE ST BOX 358432 TACOMA, WA 98402	**-*****	501(C)(3)	10,000.	0.			ENDOWED SCHOLARSHIP FOR UWT FIRST GENERATION STUDENTS
UNIVERSITY OF WASHINGTON, TACOMA 1900 COMMERCE ST BOX 358432 TACOMA, WA 98402	**-*****	501(C)(3)	5,500.	0.			THREE CIRCLES CENTER
UNIVERSITY OF WASHINGTON, TACOMA 1900 COMMERCE ST BOX 358432 TACOMA, WA 98402	**-*****	501(C)(3)	5,000.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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, TACOMA 1900 COMMERCE ST BOX 358432 TACOMA, WA 98402	**_*****	501(C)(3)	2,000.	0.			GENERAL SUPPORT
UNIVERSITY OF WASHINGTON, TACOMA 1900 COMMERCE ST BOX 358432 TACOMA, WA 98402	**_*****	501(C)(3)	1,000.	0.			UWT ADVISORY BOARD: EVENT SUPPORT
UNIVERSITY PLACE PRESBYTERIAN CHURCH - 8101 27TH ST W - UNIVERSITY PLACE, WA 98465	**_*****	501(C)(3)	165,000.	0.			BUILDING RENOVATION
VADIS 1701 ELM ST SUMNER, WA 98390	**_*****	501(C)(3)	6,000.	0.			FLASH (FULL LIVES AND STABLE HOUSING)
VASHON HOUSEHOLD PO BOX 413 VASHON ISLAND, WA 98070	**_*****	501(C)(3)	5,000.	0.			AREA OF GREATEST NEED
VASHON MAURY COMMUNITY FOOD BANK PO BOX 1205 VASHON ISLAND, WA 98070	**_*****	501(C)(3)	5,000.	0.			AREA OF GREATEST NEED
VASHON MAURY ISLAND LAND TRUST PO BOX 2031 VASHON ISLAND, WA 98070	**_*****	501(C)(3)	15,000.	0.			GENERAL OPERATING SUPPORT
VASHON YOUTH AND FAMILY SERVICES PO BOX 237 VASHON ISLAND, WA 98070	**_*****	501(C)(3)	5,000.	0.			AREA OF GREATEST NEED
VILLAGE KEEPERS PO BOX 64022 UNIVERSITY PLACE, WA 98464	**_*****	501(C)(3)	12,457.	0.			JHFS COI ACTIVITY 5.2.1: SUSTAINABLE VK- FOOD TRUCK CONVERSION

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
VINE MAPLE PLACE PO BOX 1092 MAPLE VALLEY, WA 98038	**-*****	501(C)(3)	5,000.	0.			GENERAL OPERATING SUPPORT
WASHINGTON STATE HISTORICAL SOCIETY - 1911 PACIFIC AVE - TACOMA, WA 98402	**-*****	501(C)(3)	7,500.	0.			SCHOOL TRANSPORTATION FUND
WASHINGTON STATE HISTORICAL SOCIETY - 1911 PACIFIC AVE - TACOMA, WA 98402	**-*****	501(C)(3)	500.	0.			FREE FIELD TRIPS TO THE MUSEUM FOR CHILDREN WHO OTHERWISE WOULD BE UNABLE TO VISIT
WASHINGTON STATE HISTORICAL SOCIETY - 1911 PACIFIC AVE - TACOMA, WA 98402	**-*****	501(C)(3)	500.	0.			GENERAL OPERATING SUPPORT
WHITE OAK FARM AND EDUCATION CENTER - PO BOX 450 - WILLIAMS, OR 97544	**-*****	501(C)(3)	5,000.	0.			AREA OF GREATEST NEED
WHITE RIVER SENIOR SERVICES PO BOX 147 BUCKLEY, WA 98321	**-*****	501(C)(3)	6,000.	0.			DIRT REMOVAL AND LOT IMPROVEMENTS
WILLO WOMEN'S INTERGENERATIONAL LIVING LEGACY ORGANIZATION - 602 BAKER ST - TACOMA, WA 98402	**-*****	501(C)(3)	5,000.	0.			ANNUAL STORYTELLING FESTIVAL
WORLD VISION PO BOX 9716 FEDERAL WAY, WA 98063-9716	**-*****	501(C)(3)	9,300.	0.			GENERAL OPERATING SUPPORT
WRITE253 2602 S 38TH ST TACOMA, WA 98409	**-*****	501(C)(3)	3,000.	0.			ELO PROGRAMMING AT TPS SITES

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
WRITE253 2602 S 38TH ST TACOMA, WA 98409	**-*****	501(C)(3)	5,000.	0.			GENERAL OPERATING SUPPORT
WRITE253 2602 S 38TH ST TACOMA, WA 98409	**-*****	501(C)(3)	4,875.	0.			PROGRAMMING AT TACOMA PUBLIC SCHOOLS WHOLE CHILD PARTNERSHIP EXPANDED LEARNING CENTERS
WRITE253 2602 S 38TH ST TACOMA, WA 98409	**-*****	501(C)(3)	1,500.	0.			WRITE 253
WRITE253 2602 S 38TH ST TACOMA, WA 98409	**-*****	501(C)(3)	7,500.	0.			GENERAL OPERATING SUPPORT
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE #201 TACOMA, WA 98405	**-*****	501(C)(3)	3,000.	0.			TACOMA WHOLE CHILD PARTNERSHIP
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE #201 TACOMA, WA 98405	**-*****	501(C)(3)	2,600.	0.			GENERAL OPERATING SUPPORT
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE #201 TACOMA, WA 98405	**-*****	501(C)(3)	3,000.	0.			SOCIAL EMOTIONAL LEARNING ELO COORDINATION WORK TEAM - CHRIS SPIVEY
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE #201 TACOMA, WA 98405	**-*****	501(C)(3)	1,200.	0.			GENERAL OPERATING SUPPORT
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE #201 TACOMA, WA 98405	**-*****	501(C)(3)	3,000.	0.			SOCIAL EMOTIONAL LEARNING COMMUNICATIONS AND ENGAGEMENT WORK TEAM - DARCY CELLITTI

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE #201 TACOMA, WA 98405	**-*****	501(C)(3)	3,300.	0.			GENERAL OPERATING SUPPORT
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE #201 TACOMA, WA 98405	**-*****	501(C)(3)	700.	0.			PUYALLUP FRIENDS AND SERVANTS PROGRAM
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE #201 TACOMA, WA 98405	**-*****	501(C)(3)	1,200.	0.			GENERAL OPERATING SUPPORT
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE #201 TACOMA, WA 98405	**-*****	501(C)(3)	3,000.	0.			SOCIAL EMOTIONAL LEARNING ELO COORDINATION WORK TEAM - TARA HARKNESS
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE #201 TACOMA, WA 98405	**-*****	501(C)(3)	800.	0.			DESERVING/NEEDY YMCA MEMBER BOYS TO ATTEND CAMP SEYMOUR
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE #201 TACOMA, WA 98405	**-*****	501(C)(3)	100.	0.			MAINTENANCE/UPKEEP OF CAMP SEYMOUR SUMMER CAMP
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE #201 TACOMA, WA 98405	**-*****	501(C)(3)	5,000.	0.			YOUTH AND GOVERNMENT (Y&G)
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE #201 TACOMA, WA 98405	**-*****	501(C)(3)	250.	0.			GENERAL OPERATING SUPPORT
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE #201 TACOMA, WA 98405	**-*****	501(C)(3)	200.	0.			GENERAL OPERATING SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE #201 TACOMA, WA 98405	**_*****	501(C)(3)	1,500.	0.			GENERAL OPERATING SUPPORT
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE #201 TACOMA, WA 98405	**_*****	501(C)(3)	1,400.	0.			SUPPORTING THE GENERAL OPERATIONS OF CAMP SEYMOUR
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE #201 TACOMA, WA 98405	**_*****	501(C)(3)	11,000.	0.			GENERAL OPERATING SUPPORT
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE #201 TACOMA, WA 98405	**_*****	501(C)(3)	2,700.	0.			GENERAL OPERATING SUPPORT
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE #201 TACOMA, WA 98405	**_*****	501(C)(3)	4,600.	0.			GENERAL OPERATING SUPPORT
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE #201 TACOMA, WA 98405	**_*****	501(C)(3)	1,100.	0.			GENERAL OPERATING SUPPORT
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE #201 TACOMA, WA 98405	**_*****	501(C)(3)	1,300.	0.			GENERAL OPERATING SUPPORT
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE #201 TACOMA, WA 98405	**_*****	501(C)(3)	1,300.	0.			GENERAL OPERATING SUPPORT
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE #201 TACOMA, WA 98405	**_*****	501(C)(3)	3,000.	0.			GENERAL OPERATING SUPPORT

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE #201 TACOMA, WA 98405	**-*****	501(C)(3)	2,000.	0.			2018 ANNUAL CAMPAIGN
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE #201 TACOMA, WA 98405	**-*****	501(C)(3)	1,900.	0.			GENERAL OPERATING SUPPORT
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE #201 TACOMA, WA 98405	**-*****	501(C)(3)	500.	0.			GENERAL OPERATING SUPPORT
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE #201 TACOMA, WA 98405	**-*****	501(C)(3)	3,200.	0.			GENERAL OPERATING SUPPORT
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE #201 TACOMA, WA 98405	**-*****	501(C)(3)	2,200.	0.			GENERAL OPERATING SUPPORT
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE #201 TACOMA, WA 98405	**-*****	501(C)(3)	100.	0.			GENERAL OPERATING SUPPORT
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE #201 TACOMA, WA 98405	**-*****	501(C)(3)	600.	0.			GENERAL OPERATING SUPPORT
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE #201 TACOMA, WA 98405	**-*****	501(C)(3)	4,875.	0.			ELO PROGRAMMING: ELOC AT APPROVED TACOMA PUBLIC SCHOOLS SITES (BROTHERHOOD)
YMCA OF PIERCE AND KITSAP COUNTIES 4717 S 19TH ST STE #201 TACOMA, WA 98405	**-*****	501(C)(3)	4,875.	0.			ELO PROGRAMMING: ELOC AT APPROVED TACOMA PUBLIC SCHOOLS SITES (SISTERHOOD)

Schedule I (Form 990)

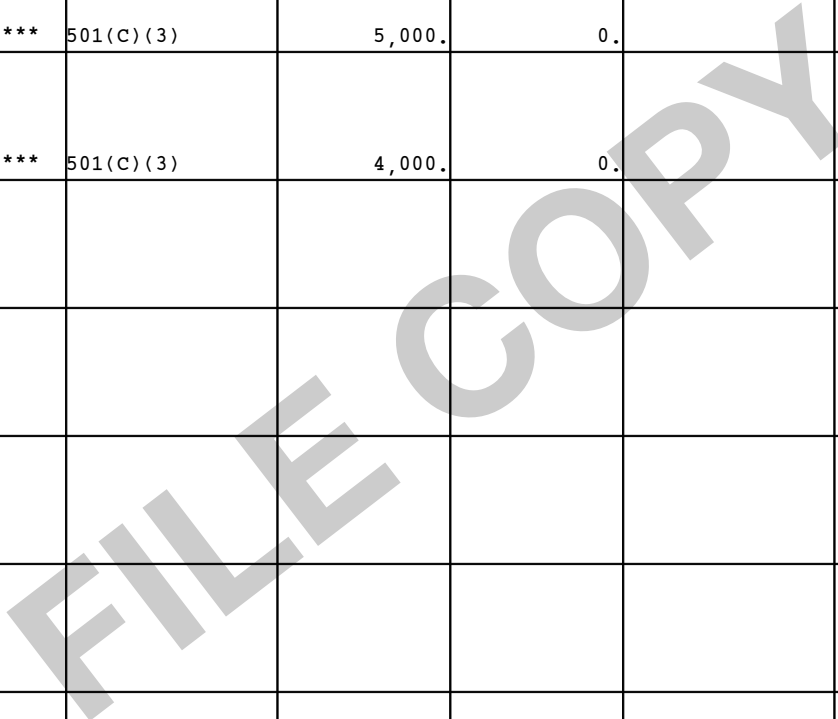
Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
YWCA PIERCE COUNTY 405 BROADWAY TACOMA, WA 98402	**-*****	501(C)(3)	6,300.	0.			GENERAL OPERATING SUPPORT
YWCA PIERCE COUNTY 405 BROADWAY TACOMA, WA 98402	**-*****	501(C)(3)	2,500.	0.			GENERAL OPERATING SUPPORT
YWCA PIERCE COUNTY 405 BROADWAY TACOMA, WA 98402	**-*****	501(C)(3)	3,200.	0.			GENERAL OPERATING SUPPORT
YWCA PIERCE COUNTY 405 BROADWAY TACOMA, WA 98402	**-*****	501(C)(3)	1,200.	0.			GENERAL OPERATING SUPPORT
YWCA PIERCE COUNTY 405 BROADWAY TACOMA, WA 98402	**-*****	501(C)(3)	3,700.	0.			GENERAL OPERATING SUPPORT
YWCA PIERCE COUNTY 405 BROADWAY TACOMA, WA 98402	**-*****	501(C)(3)	2,000.	0.			GENERAL OPERATING SUPPORT
YWCA PIERCE COUNTY 405 BROADWAY TACOMA, WA 98402	**-*****	501(C)(3)	2,600.	0.			GENERAL OPERATING SUPPORT
YWCA PIERCE COUNTY 405 BROADWAY TACOMA, WA 98402	**-*****	501(C)(3)	1,500.	0.			GENERAL OPERATING SUPPORT
YWCA PIERCE COUNTY 405 BROADWAY TACOMA, WA 98402	**-*****	501(C)(3)	3,000.	0.			ELO PROGRAMMING AT TPS SITES

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
YWCA PIERCE COUNTY 405 BROADWAY TACOMA, WA 98402	**-*****	501(C)(3)	5,000.	0.			AREA OF GREATEST NEED
YWCA PIERCE COUNTY 405 BROADWAY TACOMA, WA 98402	**-*****	501(C)(3)	4,000.	0.			GENERAL OPERATING SUPPORT



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
SCHOLARSHIPS	56	274,740.	0.		
SPARK GRANTS	12	16,973.	0.		
OTHER	31	34,729.	0.		

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:

PROCESS FOR MONITORING GRANTS INSIDE THE UNITED STATES IS AS FOLLOWS:

-WHEN A GRANT IS AWARDED, IT IS SENT TO THE GRANTEE ALONG WITH A TRANSMITTAL LETTER THAT STATES THAT THE GRANT FUNDS MUST BE USED TO SUPPORT THE STATED PURPOSE AND, IF APPLICABLE, IN ACCORDANCE WITH THE APPROVED GRANT PROPOSAL PLAN, BUDGET AND TIMELINE. CERTAIN GRANTS REQUIRE THE SUBMISSION OF EVALUATION REPORTS AT SPECIFIED INTERVALS FOLLOWING RECEIPT

Part IV Supplemental Information

OF THE GRANT.

-THE GRANTEE IS REQUIRED TO SIGN AND DATE THE FORM, ACKNOWLEDGING RECEIPT OF THE GRANT AND AGREEMENT WITH THE TERMS OF THE GRANT, AND RETURN THE SIGNED FORM TO THE COMMUNITY FOUNDATION.

SCHEDULE I, PART I, LINE 2

THE SELECTION CRITERIA USED TO AWARD GRANTS IS AS FOLLOWS:

- GRANTEE MUST BE A 501(C)3 TAX-EXEMPT NONPROFIT ORGANIZATION OR BE AFFILIATED WITH A TAX-EXEMPT ORGANIZATION

- THE GRANT MUST BE USED TO PROVIDE A SERVICE PRIMARILY FOR RESIDENTS OF PIERCE COUNTY

- THE COMMUNITY FOUNDATION VALUES THE IMPORTANT WORK THAT NONPROFITS DO WITHIN OUR COMMUNITY AND WE INVEST IN HEALTHY, WELL-RUN NONPROFIT ORGANIZATIONS WITH CLEAR MISSION AND PROGRAMMATIC ALIGNMENT, WHO LEARN FROM THEIR CONSTITUENTS, PARTICIPATE IN FIELD BUILDING ACTIVITIES, ASSESS THEIR IMPACT, AND SHARE GREATER TACOMA COMMUNITY FOUNDATION'S VALUES.

- THE GRANTEE MUST NOT DISCRIMINATE ON THE BASIS OF RACE, COLOR, RELIGION, SEXUAL ORIENTATION, PHYSICAL OR MENTAL DISABILITIES, GENDER OR NATIONAL ORIGIN; BE INCLUSIVE WITH CLIENTS, VOLUNTEERS AND STAFF

- IF A GRANT IS RECOMMENDED TO BE MADE TO A PUBLIC CHARITY ACCORDING TO SECTION 509(A), THE FUNDS MUST BE SPENT FOR CHARITABLE PURPOSES AND

Part IV Supplemental Information

NOT FOR PRIVATE GAIN OR POLITICAL ACTIVITIES

- A RECOMMENDED GRANT WILL NOT BE MADE TO AN INDIVIDUAL OR FAMILY FOLLOWING A TRAGEDY AND WILL PROVIDE NO PRIVATE BENEFIT TO THE DONOR

FILE COPY

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2018

Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990.

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

Department of the Treasury
Internal Revenue Service

Name of the organization

GREATER TACOMA COMMUNITY FOUNDATION

Employer identification number

-***

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 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 filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

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
1b		
2		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7	X	
8		X
9		

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

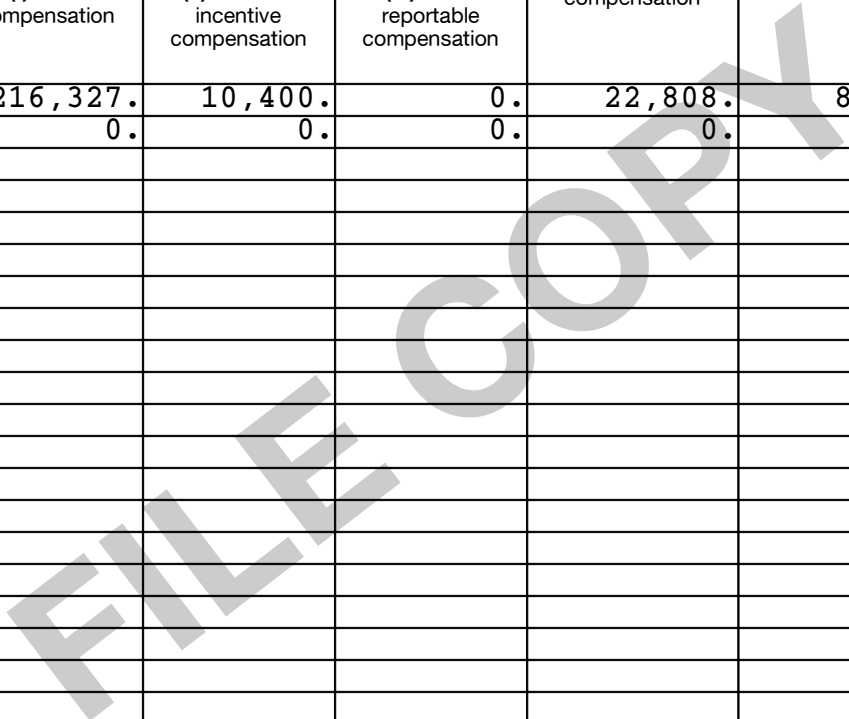
Schedule J (Form 990) 2018

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) KATHI LITTMANN PRESIDENT & CEO	(i)	216,327.	10,400.	0.	22,808.	8,817.	258,352.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(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 7:

REPRESENTS BONUS AT YEAR-END WHICH IS BASED ON REVIEW OF PERFORMANCE BY THE
EXECUTIVE COMMITTEE

FILE COPY

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2018

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

Name of the organization: **GREATER TACOMA COMMUNITY FOUNDATION**
Employer identification number: ****-*******

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	53,176	3,691,674	MARKET VALUE
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ()				
26 Other ()				
27 Other ()				
28 Other ()				

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

	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) 2018

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2018

Open to Public
Inspection

Name of the organization

GREATER TACOMA COMMUNITY FOUNDATION

Employer identification number

** - *****

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

THE AUDIT COMMITTEE THOROUGHLY REVIEWS THE FORM 990 AND RECOMMENDS IT TO THE BOARD OF DIRECTORS FOR ACCEPTANCE. BEFORE FILING WITH THE IRS, ALL BOARD MEMBERS ARE PROVIDED WITH AN ELECTRONIC COPY OF THE FORM 990.

FORM 990, PART VI, SECTION B, LINE 12C:

EACH YEAR THE CONFLICT OF INTEREST POLICY IS DISTRIBUTED IN WRITING TO ALL STAFF AND VOLUNTEERS. THE POLICY STATES THE PURPOSE OF THE POLICY, WHO IS COVERED, AND THE DUTIES OF A COVERED PERSON; EXPLAINS WHEN A CONFLICT OF INTEREST DOES OR DOES NOT EXIST; DESCRIBES THE DISCLOSURE/EVALUATION PROCESS AND PROCEDURES FOR ACTING ON CONFLICT OF INTEREST TRANSACTIONS.

EACH YEAR ALL STAFF MEMBERS AND VOLUNTEERS ARE REQUIRED TO FILL OUT AN ACKNOWLEDGMENT STATEMENT WHERE THEY DESCRIBE ANY AND ALL CONNECTIONS, RELATIONSHIPS OR SITUATIONS WHICH MAY BE A CONFLICT OF INTEREST WITH THE COMMUNITY FOUNDATION. BY SIGNING THE ACKNOWLEDGMENT FORM, THEY INDICATE THAT THEY HAVE CAREFULLY READ THE CONFLICT OF INTEREST POLICY AND THEIR RESPONSES ARE COMPLETE, TRUE AND ACCURATE.

AT COMMITTEE AND BOARD MEETINGS THROUGHOUT THE YEAR, STAFF AND VOLUNTEERS WHO HAVE A CONFLICT OF INTEREST WITH A MATTER THAT IS BEFORE THE COMMITTEE OR BOARD VERBALLY DISCLOSE THE CONFLICT AND ABSTAIN FROM DISCUSSION AND VOTING. THE ABSTENTION IS DOCUMENTED IN THE MEETING MINUTES.

FORM 990, PART VI, SECTION B, LINE 15A:

THE BOARD CHAIR APPOINTS AN AD HOC COMPENSATION COMMITTEE. DURING THE FIRST LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2018)

Name of the organization

GREATER TACOMA COMMUNITY FOUNDATION

Employer identification number

-***

QUARTER OF THE YEAR, THE COMPENSATION COMMITTEE REVIEWS THE PRESIDENT/CEO GOALS FOR THE YEAR. IN THE FOURTH QUARTER OF THE YEAR, BOARD MEMBERS COMPLETE AN EVALUATION OF THE PRESIDENT/CEO'S PERFORMANCE AND THE PRESIDENT/CEO COMPLETES A SELF ASSESSMENT. THE COMPENSATION COMMITTEE REVIEWS THE RESULTS OF THE PERFORMANCE EVALUATION AND THE PRESIDENT/CEO'S SELF ASSESSMENT. THE COMPENSATION COMMITTEE REVIEWS COMPARABLE SALARY DATA AND MAKES A RECOMMENDATION TO THE EXECUTIVE COMMITTEE REGARDING THE PRESIDENT/CEO'S SALARY AND BENEFITS FOR THE UPCOMING YEAR.

THE EXECUTIVE COMMITTEE VOTES ON THE RECOMMENDED ACTION AND DOCUMENTS THE PROCESS, THE NAMES OF MEMBERS PRESENT, AS WELL AS ANY STATED CONFLICTS OF INTEREST AND ABSTENTIONS IN ITS MEETING MINUTES. IN EXECUTIVE SESSION AT THE DECEMBER BOARD MEETING, THE EXECUTIVE COMMITTEE REPORTS ON THE RESULTS OF THE PERFORMANCE EVALUATION, THE PRESIDENT/CEO'S SELF-ASSESSMENT AND THE PRESIDENT/CEO'S COMPENSATION FOR THE UPCOMING YEAR.

FORM 990, PART VI, SECTION C, LINE 18:

THE COMMUNITY FOUNDATION MAKES ITS FORMS 1023 AND 990 AVAILABLE UPON REQUEST TO THE GENERAL PUBLIC.

FORM 990, PART VI, SECTION C, LINE 19:

THE COMMUNITY FOUNDATION MAKES ITS FINANCIAL STATEMENTS AVAILABLE ON ITS WEBSITE AND MAKES ITS GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY AVAILABLE UPON REQUEST.

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

CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS -51,529.

Name of the organization

GREATER TACOMA COMMUNITY FOUNDATION

Employer identification number

** - *****

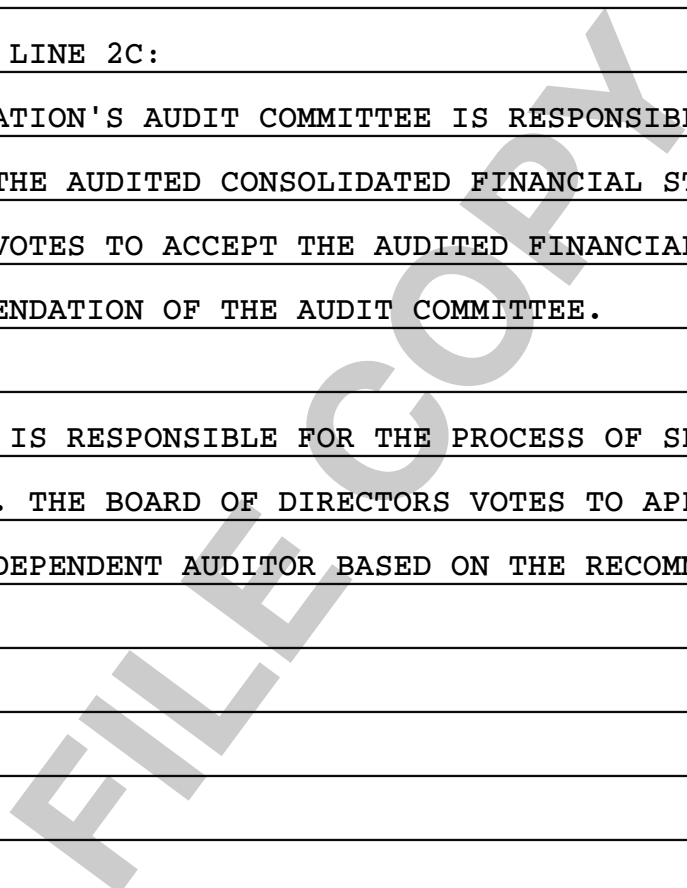
FORM 990, PART XI, LINE 1:

TOTAL REVENUE IS GTCF-ONLY, NOT CONSOLIDATED REVENUE. THE AMOUNT ON LINE 1 CAN BE FOUND IN THE SUPPLEMENTAL SCHEDULES OF THE AUDITED FINANCIAL STATEMENTS.

FORM 990, PART XII, LINE 2C:

THE COMMUNITY FOUNDATION'S AUDIT COMMITTEE IS RESPONSIBLE FOR THE DETAILED REVIEW OF THE AUDITED CONSOLIDATED FINANCIAL STATEMENTS. THE BOARD OF DIRECTORS VOTES TO ACCEPT THE AUDITED FINANCIAL STATEMENTS BASED ON THE RECOMMENDATION OF THE AUDIT COMMITTEE.

THE AUDIT COMMITTEE IS RESPONSIBLE FOR THE PROCESS OF SELECTING THE INDEPENDENT AUDITOR. THE BOARD OF DIRECTORS VOTES TO APPROVE THE SELECTION OF THE INDEPENDENT AUDITOR BASED ON THE RECOMMENDATION OF THE AUDIT COMMITTEE.



Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990.

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

Name of the organization **GREATER TACOMA COMMUNITY FOUNDATION** Employer identification number
* * - * * * * * *

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

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

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

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

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

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

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

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

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

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)	X	
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)		X
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		X
o Sharing of paid employees with related organization(s)		X
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		X

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) THE FRIENDS OF LAKEWOLD GEORGE WEYERHAEUSER PACIFIC RIM BONSAI	B	254,140.	COST
(2) COLLECTION	B	520,900.	COST
(3)			
(4)			
(5)			
(6)			

Part VII Supplemental Information.

Provide additional information for responses to questions on Schedule R. See instructions.

Lined area for supplemental information.

FILE COPY

TAX RETURN FILING INSTRUCTIONS

FORM 990-T

FOR THE YEAR ENDING
DECEMBER 31, 2018

Prepared for	MOHAMMAD MOUSA GREATER TACOMA COMMUNITY FOUNDATION 950 PACIFIC AVENUE, SUITE 1100 TACOMA, WA 98402
Prepared by	DWYER PEMBERTON & COULSON, P.C. P.O. BOX 1614 TACOMA, WA 98401-1614
Amount due or refund	NO AMOUNT IS DUE.
Make check payable to	NO AMOUNT IS DUE.
Mail tax return and check (if applicable) to	DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE CENTER OGDEN, UT 84201-0027
Return must be mailed on or before	NOVEMBER 15, 2019
Special Instructions	THE RETURN SHOULD BE SIGNED AND DATED.

Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))

2018

For calendar year 2018 or other tax year beginning _____, and ending _____

▶ Go to www.irs.gov/Form990T for instructions and the latest information.

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Department of the Treasury
Internal Revenue Service

Open to Public Inspection for
501(c)(3) Organizations Only

<p>A <input type="checkbox"/> Check box if address changed</p> <p>B Exempt under section <input checked="" type="checkbox"/> 501(c)(3)) <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e) <input type="checkbox"/> 408A <input type="checkbox"/> 530(a) <input type="checkbox"/> 529(a)</p> <p>C Book value of all assets at end of year</p>	<p>Print or Type</p>	<p>Name of organization (<input type="checkbox"/> Check box if name changed and see instructions.) GREATER TACOMA COMMUNITY FOUNDATION</p> <p>Number, street, and room or suite no. If a P.O. box, see instructions. 950 PACIFIC AVENUE, SUITE 1100</p> <p>City or town, state or province, country, and ZIP or foreign postal code TACOMA, WA 98402</p>	<p>D Employer identification number (Employees' trust, see instructions.) **-*****</p> <p>E Unrelated business activity code (See instructions.) 900099</p>
<p>F Group exemption number (See instructions.) ▶</p> <p>G Check organization type ▶ <input checked="" type="checkbox"/> 501(c) corporation <input type="checkbox"/> 501(c) trust <input type="checkbox"/> 401(a) trust <input type="checkbox"/> Other trust</p>			

H Enter the number of the organization's unrelated trades or businesses. ▶ _____ Describe the only (or first) unrelated trade or business here ▶ _____ . If only one, complete Parts I-V. If more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III-V.

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes No
If "Yes," enter the name and identifying number of the parent corporation. ▶

J The books are in care of ▶ **GREATER TACOMA COMMUNITY FDN** Telephone number ▶ **253-383-5622**

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1 a Gross receipts or sales				
b Less returns and allowances	c Balance ▶	1c		
2 Cost of goods sold (Schedule A, line 7)		2		
3 Gross profit. Subtract line 2 from line 1c		3		
4 a Capital gain net income (attach Schedule D)		4a		
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)		4b		
c Capital loss deduction for trusts		4c		
5 Income (loss) from a partnership or an S corporation (attach statement)		5		
6 Rent income (Schedule C)		6		
7 Unrelated debt-financed income (Schedule E)		7		
8 Interest, annuities, royalties, and rents from a controlled organization (Schedule F)		8		
9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)		9		
10 Exploited exempt activity income (Schedule I)		10		
11 Advertising income (Schedule J)		11		
12 Other income (See instructions; attach schedule)		12		
13 Total. Combine lines 3 through 12		13	0.	

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.)
(Except for contributions, deductions must be directly connected with the unrelated business income.)

14 Compensation of officers, directors, and trustees (Schedule K)		14	
15 Salaries and wages		15	
16 Repairs and maintenance		16	
17 Bad debts		17	
18 Interest (attach schedule) (see instructions)		18	
19 Taxes and licenses		19	
20 Charitable contributions (See instructions for limitation rules)		20	
21 Depreciation (attach Form 4562)	21		
22 Less depreciation claimed on Schedule A and elsewhere on return	22a	22b	
23 Depletion		23	
24 Contributions to deferred compensation plans		24	
25 Employee benefit programs		25	
26 Excess exempt expenses (Schedule I)		26	
27 Excess readership costs (Schedule J)		27	
28 Other deductions (attach schedule)		28	
29 Total deductions. Add lines 14 through 28		29	0.
30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13		30	0.
31 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)		31	
32 Unrelated business taxable income. Subtract line 31 from line 30		32	0.

Part III Total Unrelated Business Taxable Income	
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions) 0.
34	Amounts paid for disallowed fringes 32,544.
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of lines 33 and 34 32,544.
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions) 1,000.
38	Unrelated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 36, enter the smaller of zero or line 36 31,544.

Part IV Tax Computation	
39	Organizations Taxable as Corporations. Multiply line 38 by 21% (0.21) 6,624.
40	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 38 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)
41	Proxy tax. See instructions
42	Alternative minimum tax (trusts only)
43	Tax on Noncompliant Facility Income. See instructions
44	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies 6,624.

Part V Tax and Payments	
45a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 45a
b	Other credits (see instructions) 45b
c	General business credit. Attach Form 3800 45c
d	Credit for prior year minimum tax (attach Form 8801 or 8827) 45d
e	Total credits. Add lines 45a through 45d 45e
46	Subtract line 45e from line 44 6,624.
47	Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach schedule) 47
48	Total tax. Add lines 46 and 47 (see instructions) 6,624.
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2 0.
50a	Payments: A 2017 overpayment credited to 2018 50a
b	2018 estimated tax payments 50b
c	Tax deposited with Form 8868 50c 6,624.
d	Foreign organizations: Tax paid or withheld at source (see instructions) 50d
e	Backup withholding (see instructions) 50e
f	Credit for small employer health insurance premiums (attach Form 8941) 50f
g	Other credits, adjustments, and payments: <input type="checkbox"/> Form 2439 50g
	<input type="checkbox"/> Form 4136 <input type="checkbox"/> Other Total ▶
51	Total payments. Add lines 50a through 50g 6,624.
52	Estimated tax penalty (see instructions). Check if Form 2220 is attached <input checked="" type="checkbox"/> 0.
53	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed 53
54	Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid 54
55	Enter the amount of line 54 you want: Credited to 2019 estimated tax Refunded 55

Part VI Statements Regarding Certain Activities and Other Information (see instructions)		Yes	No
56	At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here ▶		
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file.		
58	Enter the amount of tax-exempt interest received or accrued during the tax year ▶ \$		

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

Sign Here Signature of officer _____ Date _____ CFO Title _____

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

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	ED E. RAMOS, CPA				P00601133
	Firm's name ▶ DWYER PEMBERTON & COULSON, P.C.	Firm's EIN ▶ **-*****			
	P.O. BOX 1614 Firm's address ▶ TACOMA, WA 98401-1614	Phone no. 253.572.9922			

Underpayment of Estimated Tax by Corporations

Department of the Treasury
Internal Revenue Service

▶ Attach to the corporation's tax return. **FORM 990-T**

▶ Go to www.irs.gov/Form2220 for instructions and the latest information.

2018

Name GREATER TACOMA COMMUNITY FOUNDATION	Employer identification number ** - *****
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Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the estimated tax penalty line of the corporation's income tax return, but **do not** attach Form 2220.

Part I Required Annual Payment			
1 Total tax (see instructions)		1	6,624.
2 a Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1	2a		
b Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method	2b		
c Credit for federal tax paid on fuels (see instructions)	2c		
d Total. Add lines 2a through 2c		2d	
3 Subtract line 2d from line 1. If the result is less than \$500, do not complete or file this form. The corporation does not owe the penalty		3	6,624.
4 Enter the tax shown on the corporation's 2017 income tax return. See instructions. Caution: If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5		4	
5 Required annual payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3		5	6,624.

Part II Reasons for Filing - Check the boxes below that apply. If any boxes are checked, the corporation **must** file Form 2220 even if it does not owe a penalty. See instructions.

6 The corporation is using the adjusted seasonal installment method.

7 The corporation is using the annualized income installment method.

8 The corporation is a "large corporation" figuring its first required installment based on the prior year's tax.

Part III Figuring the Underpayment		(a)	(b)	(c)	(d)
9 Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the corporation's tax year	9	04/15/18	06/15/18	09/15/18	12/15/18
10 Required installments. If the box on line 6 and/or line 7 above is checked, enter the amounts from Sch A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% (0.25) of line 5 above in each column	10	1,656.	1,656.	1,656.	1,656.
11 Estimated tax paid or credited for each period. For column (a) only, enter the amount from line 11 on line 15. See instructions	11				
Complete lines 12 through 18 of one column before going to the next column.					
12 Enter amount, if any, from line 18 of the preceding column	12				
13 Add lines 11 and 12	13				
14 Add amounts on lines 16 and 17 of the preceding column	14		1,656.	3,312.	4,968.
15 Subtract line 14 from line 13. If zero or less, enter -0-	15	0.	0.	0.	0.
16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0-	16		1,656.	3,312.	
17 Underpayment. If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18	17	1,656.	1,656.	1,656.	1,656.
18 Overpayment. If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column	18				

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.

LHA For Paperwork Reduction Act Notice, see separate instructions. Form 2220 (2018)

Part IV Figuring the Penalty

	(a)	(b)	(c)	(d)
19 Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. (C corporations with tax years ending June 30 and S corporations: Use 3rd month instead of 4th month. Form 990-PF and Form 990-T filers: Use 5th month instead of 4th month.) See instructions	19			
20 Number of days from due date of installment on line 9 to the date shown on line 19	20			
21 Number of days on line 20 after 4/15/2018 and before 7/1/2018	21			
22 Underpayment on line 17 x $\frac{\text{Number of days on line 21} \times 5\% (0.05)}{365}$...	22 \$	\$	\$	\$
23 Number of days on line 20 after 06/30/2018 and before 10/1/2018 ...	23			
24 Underpayment on line 17 x $\frac{\text{Number of days on line 23} \times 5\% (0.05)}{365}$...	24 \$	\$	\$	\$
25 Number of days on line 20 after 9/30/2018 and before 1/1/2019	25			
26 Underpayment on line 17 x $\frac{\text{Number of days on line 25} \times 5\% (0.05)}{365}$...	26 \$	\$	\$	\$
27 Number of days on line 20 after 12/31/2018 and before 4/1/2019 ...	27	SEE ATTACHED WORKSHEET		
28 Underpayment on line 17 x $\frac{\text{Number of days on line 27} \times 6\% (0.06)}{365}$...	28 \$	\$	\$	\$
29 Number of days on line 20 after 3/31/2019 and before 7/1/2019	29			
30 Underpayment on line 17 x $\frac{\text{Number of days on line 29} \times \%}{365}$	30 \$	\$	\$	\$
31 Number of days on line 20 after 6/30/2019 and before 10/1/2019 ...	31			
32 Underpayment on line 17 x $\frac{\text{Number of days on line 31} \times \%}{365}$	32 \$	\$	\$	\$
33 Number of days on line 20 after 9/30/2019 and before 1/1/2020	33			
34 Underpayment on line 17 x $\frac{\text{Number of days on line 33} \times \%}{365}$	34 \$	\$	\$	\$
35 Number of days on line 20 after 12/31/2019 and before 3/16/2020 ...	35			
36 Underpayment on line 17 x $\frac{\text{Number of days on line 35} \times \%}{366}$	36 \$	\$	\$	\$
37 Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37 \$	\$	\$	\$
38 Penalty. Add columns (a) through (d) of line 37. Enter the total here and on Form 1120, line 34; or the comparable line for other income tax returns				38 \$
	** AMOUNT WAIVED			280.
				0.

* Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at www.irs.gov. You can also call 1-800-829-4933 to get interest rate information.

