

Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-0047

2010Open to Public
Inspection**A** For the 2010 calendar year, or tax year beginning **JUL 1, 2010** and ending **JUN 30, 2011**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization UNITARIAN UNIVERSALIST SERVICE COMMITTEE INC		D Employer identification number 04-6186012
	Doing Business As		E Telephone number (617)-868-6600
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	G Gross receipts \$ 9,141,387.
	689 MASSACHUSETTS AVENUE		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	City or town, state or country, and ZIP + 4 CAMBRIDGE, MA 02139		H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)
F Name and address of principal officer: WILLIAM F. SCHULZ SAME AS C ABOVE			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.UUSC.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: 1948 M State of legal domicile: MA

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O		
	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	15
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	15
	5 Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	43
	6 Total number of volunteers (estimate if necessary)	6	2789
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	57,238.
b Net unrelated business taxable income from Form 990-T, line 34	7b	31,775.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	7,862,533.	5,007,967.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0.	0.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	437,754.	1,491,743.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	189,935.	249,664.
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	8,490,222.	6,749,374.
Expenses	14 Benefits paid to or for members (Part IX, column (A), line 4)	821,263.	1,391,316.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	2,969,604.	2,855,327.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 570,503.	99,955.	83,286.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	1,614,202.	1,819,493.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	5,505,024.	6,149,422.
Net Assets or Fund Balances	19 Revenue less expenses. Subtract line 18 from line 12	2,985,198.	599,952.
	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	21,865,327.	22,357,126.
	22 Net assets or fund balances. Subtract line 21 from line 20	5,676,690.	5,543,172.
		16,188,637.	16,813,954.

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	Date			
	MICHAEL ZOZOUA, CHIEF FINANCIAL OFFICER Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name CRAIG KLEIN	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	Firm's name ▶ CBIZ TOFIAS	Firm's EIN ▶			
	Firm's address ▶ 500 BOYLSTON STREET BOSTON, MA 02116	Phone no. 617-761-0600			

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 to any question in this Part III

☒ X

1 Briefly describe the organization's mission:

UUSC ADVANCES HUMAN RIGHTS AND SOCIAL JUSTICE AROUND THE WORLD,
PARTNERING WITH THOSE WHO CONFRONT UNJUST POWER STRUCTURES AND
MOBILIZING TO CHALLENGE OPPRESSIVE POLICIES.

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

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

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

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

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.

Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 2,210,048. including grants of \$ 973,655.) (Revenue \$)

HUMAN RIGHTS PROGRAMS - I. RIGHTS IN HUMANITARIAN CRISES: SEE SCHEDULE
O.

4b (Code:) (Expenses \$ 976,427. including grants of \$ 134,501.) (Revenue \$)

HUMAN RIGHTS PROGRAMS - II. ENVIRONMENTAL JUSTICE: SEE SCHEDULE O.

4c (Code:) (Expenses \$ 869,975. including grants of \$ 152,366.) (Revenue \$ 13,750.)

HUMAN RIGHTS PROGRAMS - III. ECONOMIC JUSTICE: SEE SCHEDULE O.

4d Other program services. (Describe in Schedule O.)

(Expenses \$ 1,268,793. including grants of \$ 130,795.) (Revenue \$ 192,426.)4e Total program service expenses 5,325,243.

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Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2 Is the organization required to complete Schedule B, Schedule of Contributors?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	<input type="checkbox"/>	<input type="checkbox"/>
6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	<input type="checkbox"/>	<input checked="" type="checkbox"/>
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	<input type="checkbox"/>	<input checked="" type="checkbox"/>
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	<input checked="" type="checkbox"/>	<input type="checkbox"/>
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	<input checked="" type="checkbox"/>	<input type="checkbox"/>
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	<input type="checkbox"/>	<input checked="" type="checkbox"/>
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	<input type="checkbox"/>	<input checked="" type="checkbox"/>
14a Did the organization maintain an office, employees, or agents outside of the United States?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	<input checked="" type="checkbox"/>	<input type="checkbox"/>
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	<input checked="" type="checkbox"/>	<input type="checkbox"/>
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	<input type="checkbox"/>	<input checked="" type="checkbox"/>
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	<input checked="" type="checkbox"/>	<input type="checkbox"/>
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	<input type="checkbox"/>	<input checked="" type="checkbox"/>
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	<input type="checkbox"/>	<input checked="" type="checkbox"/>
20a Did the organization operate one or more hospitals? If "Yes," complete Schedule H	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	<input type="checkbox"/>	<input type="checkbox"/>

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COMMITTEE INC**

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Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	X	
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		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? If "Yes," complete Schedule J		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? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	X	
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		X
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?		X
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		X
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part 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? If "Yes," complete Schedule L, Part I		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III		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? If "Yes," complete Schedule L, Part IV		X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		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? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	X	
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		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? If "Yes," complete Schedule R, Part I		X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1		X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)?		X
a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		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? If "Yes," complete Schedule R, Part VI		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	X	

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Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response to any question in this Part V ☐

		Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 6		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
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 43		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)	2b	X	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	
b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	X	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		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?	7e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9 Sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?	9a		
b Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12	10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders	11a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b		
c Enter the amount of reserves on hand	13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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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 to any question in this Part VI

☒**Section A. Governing Body and Management**

	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	15	
b Enter the number of voting members included in line 1a, above, who are independent	15	
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 Does the organization have members or stockholders?		X
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		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.)

	Yes	No
10a Does the organization have local chapters, branches, or affiliates?		X
b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	X	
b Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	X	
13 Does the organization have a written whistleblower policy?	X	
14 Does 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
b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken 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 **CA, CO, CT, DC, FL, GA, HI, IL, IN, KS, KY, LA**

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
☐ Own website ☐ Another's website ☒ Upon request

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

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **MICHAEL ZOZOUA - (617) 301-4318**
UUSC, 689 MASSACHUSETTS AVENUE, CAMBRIDGE, MA 02139

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COMMITTEE INC**

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

Check if Schedule O contains a response to any question 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 (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
JOHN GIBBONS CHAIR	1.00	X		X				0.	0.	0.
KATHY HALL VICE-CHAIR	1.00	X		X				0.	0.	0.
LUCIA SANTINI FIELD SECRETARY	1.00	X		X				0.	0.	0.
CHARLES SANDMEL TREASURER	1.00	X		X				0.	0.	0.
JOHN BUEHRENS BOARD MEMBER	1.00	X						0.	0.	0.
DAVID COLTON BOARD MEMBER	1.00	X						0.	0.	0.
MARTHA EASTER-WELLS BOARD MEMBER	1.00	X						0.	0.	0.
DAVID LYSY BOARD MEMBER	1.00	X						0.	0.	0.
DAVID MADAN BOARD MEMBER	1.00	X						0.	0.	0.
CONRAD PINNOCK BOARD MEMBER	1.00	X						0.	0.	0.
KAREN SCHNEIDER BOARD MEMBER	1.00	X						0.	0.	0.
SUSAN SCRIMSHAW BOARD MEMBER	1.00	X						0.	0.	0.
MIKE SHONSEY BOARD MEMBER	1.00	X						0.	0.	0.
CHARLES SPENCE BOARD MEMBER	1.00	X						0.	0.	0.
FELISA TIBBITTS BOARD MEMBER	1.00	X						0.	0.	0.
WILLIAM SCHULZ PRESIDENT & CEO	26.70			X				88,500.	0.	10,493.
CONSTANCE KANE VP & COO	40.00			X				114,365.	0.	11,020.

**UNITARIAN UNIVERSALIST SERVICE
COMMITTEE INC**

Form 990 (2010)

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
MICHAEL ZOUZOUA CFO	40.00			X				100,402.	0.	29,057.
MAXINE NEIL DIRECTOR OF INSTITUTIONAL ADVANCEMEN	40.00					X		112,081.	0.	22,644.
1b Sub-total								415,348.	0.	73,214.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								415,348.	0.	73,214.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **3**

- 3** Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual **3** **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 **4** **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 **5** **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. **NONE**

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

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

Form **990** (2010)

UNITARIAN UNIVERSALIST SERVICE
COMMITTEE INC

Form 990 (2010)

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Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1 a	Federated campaigns	1a	126,756.			
	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	4,881,211.			
	g	Noncash contributions included in lines 1a-1f: \$		3,000.			
	h	Total. Add lines 1a-1f		5,007,967.			
	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)		233,905.		233,905.	
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6 a	Gross Rents	(i) Real (ii) Personal				
	b	Less: rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss)		112,384.	55,146.	57,238.	
	7 a	Gross amount from sales of assets other than inventory	(i) Securities (ii) Other				
	b	Less: cost or other basis and sales expenses					
	c	Gain or (loss)					
	d	Net gain or (loss)		1,257,838.		1257838.	
	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	77,132.			
	b	Less: cost of goods sold	b	32,005.			
	c	Net income or (loss) from sales of inventory		45,127.	45,127.		
Miscellaneous Revenue			Business Code				
11 a	OTHER FEES	900099	92,153.	92,153.			
b							
c							
d	All other revenue						
e	Total. Add lines 11a-11d		92,153.				
12	Total revenue. See instructions.		6,749,374.	192,426.	57,238.	1491743.	

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Form 990 (2010)

UNITARIAN UNIVERSALIST SERVICE

Form 990 (2010)

COMMITTEE INC

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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) but are not required to complete columns (B), (C), and (D).

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 governments and organizations in the U.S. See Part IV, line 21	495,393.	495,393.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	895,923.	895,923.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	421,163.	366,411.	16,847.	37,905.
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	2,127,686.	2,053,575.	1,166.	72,945.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	152,283.	138,507.	252.	13,524.
9 Other employee benefits	5,592.	3,293.	1,277.	1,022.
10 Payroll taxes	148,603.	129,285.	5,944.	13,374.
11 Fees for services (non-employees):				
a Management				
b Legal	2,110.	1,100.	500.	510.
c Accounting	45,850.	22,008.	16,964.	6,878.
d Lobbying	12,680.	12,680.		
e Professional fundraising services. See Part IV, line 17	83,286.			83,286.
f Investment management fees				
g Other	197,455.	148,246.	18,834.	30,375.
12 Advertising and promotion	65,402.	49,153.	85.	16,164.
13 Office expenses	80,579.	13,873.	654.	66,052.
14 Information technology	22,476.	17,880.	2,331.	2,265.
15 Royalties				
16 Occupancy	137,322.	74,278.	30,849.	32,195.
17 Travel	386,384.	316,385.	4,735.	65,264.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	165,486.	79,433.	61,230.	24,823.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	257,867.	141,827.	64,467.	51,573.
23 Insurance	41,067.	23,237.	9,906.	7,924.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
a PRINTING & PUBLICATIONS	188,941.	172,777.	150.	16,014.
b POSTAGE & SHIPPING	94,583.	84,739.	705.	9,139.
c TELEPHONE	59,430.	37,154.	9,297.	12,979.
d SUPPLIES	31,152.	24,293.	2,419.	4,440.
e EQUIPMENT RENTAL & MAIN	30,709.	23,793.	5,064.	1,852.
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	6,149,422.	5,325,243.	253,676.	570,503.
26 Joint costs. Check here <input checked="" type="checkbox"/> if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	130,677.	111,075.	0.	19,602.

**UNITARIAN UNIVERSALIST SERVICE
COMMITTEE INC**

Form 990 (2010)

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Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	2,168,802.	1	2,807,092.
	2 Savings and temporary cash investments	4,233,838.	2	4,561,084.
	3 Pledges and grants receivable, net	1,720,960.	3	1,001,547.
	4 Accounts receivable, net	75,781.	4	110,561.
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 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 instructions)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	141,716.	9	91,174.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 6,843,053.		
	b Less: accumulated depreciation	10b 1,172,790.	10c	5,670,263.
	11 Investments - publicly traded securities	5,869,503.	11	8,036,428.
	12 Investments - other securities. See Part IV, line 11	6,576,320.	12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	1,078,407.	15	78,977.
16 Total assets. Add lines 1 through 15 (must equal line 34)	21,865,327.	16	22,357,126.	
Liabilities	17 Accounts payable and accrued expenses	538,797.	17	437,418.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities	3,262,985.	20	3,180,272.
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 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	375,000.	24	375,000.
	25 Other liabilities. Complete Part X of Schedule D	1,499,908.	25	1,550,482.
	26 Total liabilities. Add lines 17 through 25	5,676,690.	26	5,543,172.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	9,109,742.	27	9,677,537.
	28 Temporarily restricted net assets	3,493,108.	28	3,515,082.
	29 Permanently restricted net assets	3,585,787.	29	3,621,335.
	Organizations that do not follow SFAS 117, 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	16,188,637.	33	16,813,954.
	34 Total liabilities and net assets/fund balances	21,865,327.	34	22,357,126.

Form 990 (2010)

UNITARIAN UNIVERSALIST SERVICE

Form 990 (2010)

COMMITTEE INC

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Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	6,749,374.
2	Total expenses (must equal Part IX, column (A), line 25)	2	6,149,422.
3	Revenue less expenses. Subtract line 2 from line 1	3	599,952.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	16,188,637.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	25,365.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	16,813,954.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question 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
b Were the organization's financial statements audited by an independent accountant?	X	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
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 (2010)

UNITARIAN UNIVERSALIST SERVICE

Schedule A (Form 990 or 990-EZ) 2010 COMMITTEE INC

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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) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	5809950.	5650460.	4960691.	7862533.	5007967.	29291601.
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	5809950.	5650460.	4960691.	7862533.	5007967.	29291601.
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)						3362303.
6 Public support. Subtract line 5 from line 4.						25929298.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4	5809950.	5650460.	4960691.	7862533.	5007967.	29291601.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	259,107.	214,701.	198,695.	193,201.	233,905.	1099609.
9 Net income from unrelated business activities, whether or not the business is regularly carried on	14,121.	43,533.	14,094.	34,752.	57,238.	163,738.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						30554948.
12 Gross receipts from related activities, etc. (see instructions)					12	986,738.
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 2010 (line 6, column (f) divided by line 11, column (f))	14	84.86	%
15 Public support percentage from 2009 Schedule A, Part II, line 14	15	80.82	%
16a 33 1/3% support test - 2010. 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 - 2009. 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 - 2010. 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 IV 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 - 2009. 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 IV 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"/>			

Schedule A (Form 990 or 990-EZ) 2010

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

(Complete only if you checked the box on line 9 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) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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 IV.)						
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 2010 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2009 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2010. 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 - 2009. 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 ☐

Schedule B(Form 990, 990-EZ,
or 990-PF)Department of the Treasury
Internal Revenue Service**Schedule of Contributors**

▶ Attach to Form 990, 990-EZ, or 990-PF.

OMB No. 1545-0047

2010

Name of the organization

UNITARIAN UNIVERSALIST SERVICE
COMMITTEE INC

Employer identification number

04-6186012

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☒ 501(c)(3) (enter number) organization☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.**Special Rules**☒ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. ▶ \$ _____**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**
▶ **See separate instructions.**

OMB No. 1545-0047

2010

**Open to Public
Inspection**

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

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

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

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

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35a (Proxy Tax), then

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

Name of organization **UNITARIAN UNIVERSALIST SERVICE** Employer identification number
COMMITTEE INC **04-6186012**

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

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.

2 Political expenditures ▶ \$

3 Volunteer hours

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

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

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

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

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV.

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

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

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

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

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

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

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

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

Schedule C (Form 990 or 990-EZ) 2010

LHA

UNITARIAN UNIVERSALIST SERVICE

Schedule C (Form 990 or 990-EZ) 2010

COMMITTEE INC

04-6186012 Page 2

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

- A Check ☐ if the filing organization belongs to an affiliated group.
- B Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)	4,885.													
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	7,795.													
c	Total lobbying expenditures (add lines 1a and 1b)	12,680.													
d	Other exempt purpose expenditures	5,566,239.													
e	Total exempt purpose expenditures (add lines 1c and 1d)	5,578,919.													
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	428,946.													
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g	Grassroots nontaxable amount (enter 25% of line 1f)	107,237.													
h	Subtract line 1g from line 1a. If zero or less, enter -0-	0.													
i	Subtract line 1f from line 1c. If zero or less, enter -0-	0.													
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a Lobbying nontaxable amount	465,125.	417,271.	389,020.	428,946.	1,700,362.
b Lobbying ceiling amount (150% of line 2a, column(e))					2,550,543.
c Total lobbying expenditures	25,500.	6,135.	6,000.	12,680.	50,315.
d Grassroots nontaxable amount	116,281.	104,318.	97,255.	107,237.	425,091.
e Grassroots ceiling amount (150% of line 2d, column (e))					637,637.
f Grassroots lobbying expenditures	4,500.	1,575.	2,000.	4,885.	12,960.

Schedule C (Form 990 or 990-EZ) 2010

04-6186012 Page 3

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2010

Open to Public
Inspection

Name of the organization **UNITARIAN UNIVERSALIST SERVICE
COMMITTEE INC**

Employer identification number
04-6186012

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input 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 type="checkbox"/> Yes	<input type="checkbox"/> No

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

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

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> 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 8/17/06, and not on a historic structure listed in the National Register	2d

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

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

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

☐ Yes ☐ No

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

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

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

☐ Yes ☐ No

9 In Part XIV, 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" to 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 XIV, 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) Revenues included in 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 Revenues included in Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

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

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

(check all that apply):

- a ☐ Public exhibition
- b ☐ Scholarly research
- c ☐ Preservation for future generations

- d ☐ Loan or exchange programs
- e ☐ Other _____

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

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" to 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 XIV and complete the following table:

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

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if the organization answered "Yes" to 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	9,669,685.	8,171,903.	11,327,288.		
b Contributions	1,398,918.	1,634,105.	631,492.		
c Net investment earnings, gains, and losses	1,767,922.	1,309,539.	-2,417,739.		
d Grants or scholarships					
e Other expenditures for facilities and programs	2,065,435.	1,395,809.	1,308,814.		
f Administrative expenses	51,858.	50,053.	60,324.		
g End of year balance	10,719,232.	9,669,685.	8,171,903.		

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment ☒ 62.10 %
- b Permanent endowment ☒ 33.78 %
- c Term endowment ☒ 4.12 %

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

(i) unrelated organizations

(ii) related organizations

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

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

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

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		970,000.		970,000.
b Buildings		5,266,143.	701,699.	4,564,444.
c Leasehold improvements				
d Equipment		564,586.	471,091.	93,495.
e Other		42,324.		42,324.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				5,670,263.

Schedule D (Form 990) 2010

UNITARIAN UNIVERSALIST SERVICE

Schedule D (Form 990) 2010

COMMITTEE INC

04-6186012 Page 3

Part VII Investments - Other Securities. 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)		
(I)		

Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		

Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	

Total. (Column (b) must equal Form 990, Part X, col (B) line 15.) ▶

Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Amount
(1) Federal income taxes	
(2) GIFT ANNUITIES PAYABLE	1,269,370.
(3) LIABILITIES UNDER TRUST AGREEMENT	73,816.
(4) POOLED INCOME DEFERRED REVENUE	207,296.
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	

Total. (Column (b) must equal Form 990, Part X, col (B) line 25.) ▶ 1,550,482.

2. FIN 48 (ASC 740) Footnote. In Part XIV, 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).

032053
12-20-10

Schedule D (Form 990) 2010

UNITARIAN UNIVERSALIST SERVICE

Schedule D (Form 990) 2010

COMMITTEE INC

04-6186012 Page 4

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	6,749,374.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	6,149,422.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	599,952.
4	Net unrealized gains (losses) on investments	4	192,057.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	-166,692.
9	Total adjustments (net). Add lines 4 through 8	9	25,365.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	625,317.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	7,134,063.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	192,057.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	192,632.
e	Add lines 2a through 2d	2e	384,689.
3	Subtract line 2e from line 1	3	6,749,374.
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 XIV.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	6,749,374.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	6,508,746.
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 XIV.)	2d	359,324.
e	Add lines 2a through 2d	2e	359,324.
3	Subtract line 2e from line 1	3	6,149,422.
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 XIV.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	6,149,422.

Part XIV Supplemental Information

Complete this part to 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, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X, LINE 2: UUSC ACCOUNTS FOR THE EFFECT OF ANY UNCERTAIN TAX

POSITIONS BASED ON A "MORE LIKELY THAN NOT" THRESHOLD TO THE RECOGNITION OF THE TAX POSITIONS BEING SUSTAINED BASED ON THE TECHNICAL MERITS OF THE POSITION UNDER SCRUTINY BY THE APPLICABLE TAXING AUTHORITY. IF A TAX POSITION OR POSITIONS ARE DEEMED TO RESULT IN UNCERTAINTIES OF THOSE POSITIONS, THE UNRECOGNIZED TAX BENEFIT IS ESTIMATED BASED ON A "CUMULATIVE PROBABILITY ASSESSMENT" THAT AGGREGATES THE ESTIMATED TAX LIABILITY FOR ALL UNCERTAIN TAX POSITIONS. UUSC HAS IDENTIFIED ITS TAX

Part XIV Supplemental Information (continued)

STATUS AS A TAX EXEMPT ENTITY AS A TAX POSITION; HOWEVER, UUSC HAS DETERMINED THAT SUCH TAX POSITION DOES NOT RESULT IN AN UNCERTAINTY REQUIRING RECOGNITION. UUSC IS NOT CURRENTLY UNDER EXAMINATION BY ANY TAXING JURISDICTION. UUSC'S FEDERAL AND STATE INCOME TAX RETURNS ARE GENERALLY OPEN FOR EXAMINATION FOR THREE YEARS FOLLOWING THE DATE FILED.

PART XI, LINE 8 - OTHER ADJUSTMENTS:

CHANGE IN VALUE OF SPLIT-INTEREST GIFTS -166,692.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

RENTAL EXPENSE 192,632.

PART XIII, LINE 2D - OTHER ADJUSTMENTS:

RENTAL EXPENSE 192,632.

CHANGE IN VALUE OF SPLIT-INTEREST GIFTS 166,692.

TOTAL TO SCHEDULE D, PART XIII, LINE 2D 359,324.

SCHEDULE F
(Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

- ▶ Complete if the organization answered "Yes" to Form 990,
Part IV, line 14b, 15, or 16.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2010

Open to Public
Inspection

Name of the organization

**UNITARIAN UNIVERSALIST SERVICE
COMMITTEE INC**

Employer identification number

04-6186012

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

1 For grantmakers. 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 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
CENTRAL AMERICA AND THE CARIBBEAN	0	0	GRANTS TO RECIPIENTS LOCATED IN THE REGION		415,820.
EAST ASIA AND THR PACIFIC	0	0	GRANTS TO RECIPIENTS LOCATED IN THE REGION		57,075.
NORTH AMERICA	0	0	GRANTS TO RECIPIENTS LOCATED IN THE REGION		5,000.
SOUTH AMERICA	0	0	GRANTS TO RECIPIENTS LOCATED IN THE REGION		37,000.
SOUTH ASIA	0	0	GRANTS TO RECIPIENTS LOCATED IN THE REGION		167,624.
SUB-SAHARAN AFRICA	0	0	GRANTS TO RECIPIENTS LOCATED IN THE REGION		195,904.
3 a Sub-total	0	0			878,423.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	0	0			878,423.

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

Schedule F (Form 990) 2010

UNITARIAN UNIVERSALIST SERVICE
COMMITTEE INC

04-6186012

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 ☐

Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARRIBEAN	HUMANITARIAN ASSISTANCE	415,820.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	HUMANITARIAN ASSISTANCE	57,075.	WIRE TRANSFER	0.		
		NORTH AMERICA	HUMANITARIAN ASSISTANCE	5,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	HUMANITARIAN ASSISTANCE	37,000.	WIRE TRANSFER	0.		
		SOUTH ASIA	HUMANITARIAN ASSISTANCE	167,624.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	HUMANITARIAN ASSISTANCE	195,904.	WIRE TRANSFER	0.		

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

31

3 Enter total number of other organizations or entities

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

[illegible]

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926) ☐ Yes ☒ No
- 2 Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A) ☐ Yes ☒ No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see Instructions for Form 5471) ☐ Yes ☒ No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621) ☐ Yes ☒ No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see Instructions for Form 8865) ☐ Yes ☒ No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713) ☐ Yes ☒ No

Schedule F (Form 990) 2010

Part V Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable.

Also complete this part to provide any additional information.

SCHEDULE F, PART I, LINE 2: ACTIVITIES FOR EACH GRANT ARE OUTLINED IN THE PROPOSAL FORM AND ARE MUTUALLY AGREED UPON BY UUSC AND THE PARTNER ORGANIZATION. THE GOALS OF THE PROJECT MUST BE IN LINE WITH UUSC'S MISSION AND VISION AND THE PARTNER ORGANIZATION MUST COMPLY WITH DEPARTMENT OF TREASURY REGULATIONS.

ONCE THE GRANT IS AWARDED, THE PROGRESS OF GOALS AND ACTIVITIES IS MONITORED USING A RESULTS BASED MONITORING AND EVALUATION SYSTEM THAT INCLUDES THE FOLLOWING METHODS: METRICS SYSTEMS, WHOLE MEASURE RATING SCALE, COMPLEX ADAPTIVE SYSTEMS, SYSTEMS THINKING, OBSERVATION AND ETHNOGRAPHIC STORY LINES. THESE METHODS ARE IMPLEMENTED THROUGH A VARIETY OF WAYS SUCH AS SITE VISITS, REGULAR PHONE CALLS, FOCUS GROUP MEETINGS, WRITTEN REPORTS, AND FINANCIAL REPORTS.

A WRITTEN MIDTERM REPORT IS REQUESTED AS WELL AS A FINANCIAL REPORT. UPON COMPLETION OF THE PROJECT, A FINAL WRITTEN NARRATIVE AND FINANCIAL REPORT IS REQUESTED THAT ANALYZES THE SUCCESS AND CHALLENGES OF THE PROJECT BASED ON THE GOALS AND ACTIVITIES OUTLINED IN THE PROPOSAL.

Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047

2010

Open To Public Inspection

Employer identification number
04-6186012

Part I

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

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

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

- 2 a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☒ Yes ☐ No

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

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
SHARE GROUP - PO BOX 55183, BOSTON, MA 02205	PHONE		X	131,353.	44,507.	86,846.
PHONEFUNDS - 6601 BLAKE ST., EL CENRRITO, CA 94530	PHONE		X	87,009.	14,393.	72,616.
PUBLIC INTEREST COMMUNICATIONS - 7700	PHONE		X	53,261.	23,477.	29,784.
Total				271,623.	82,377.	189,246.

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

MN, RI, HI, OK, FL, CO, WI, DC, AK, AR, AL, UT, WV, MA, PA, SC, CA, IN, NC, NH, NY, OH, OR, VA, WA
CT, ME, GA, IL, KS, KY, MD, MI, NJ, NM, TN, AZ, LA, MO

UNITARIAN UNIVERSALIST SERVICE

Schedule G (Form 990 or 990-EZ) 2010

COMMITTEE INC

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		(event type)	(event type)	(total number)	
Revenue	1 Gross receipts				
	2 Less: Charitable contributions				
	3 Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d)				()
	11 Net income summary. Combine line 3, column (d), and line 10				

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

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
Direct Expenses	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				()
	8 Net gaming income summary. Combine line 1, column d, and line 7				

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

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

b If "No," explain: _____

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

b If "Yes," explain: _____

UNITARIAN UNIVERSALIST SERVICE

Schedule G (Form 990 or 990-EZ) 2010

COMMITTEE INC

04-6186012 Page 3

- 11 Does the organization operate gaming activities with nonmembers? ☐ Yes ☐ No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No
- 13 Indicate the percentage of gaming activity operated in:
- | | | |
|-------------------------------|-----|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ► _____

Address ► _____

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

- b If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____
- c If "Yes," enter name and address of the third party:

Name ► _____

Address ► _____

- 16 Gaming manager information:

Name ► _____

Gaming manager compensation ► \$ _____

Description of services provided ► _____

☐ Director/officer☐ Employee☐ Independent contractor

- 17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ _____

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

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: PUBLIC INTEREST COMMUNICATIONS

(I) ADDRESS OF FUNDRAISER:

7700 LEESBURG PIKE, SUITE 301, FALLS CHURCH, VA 22043

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" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

OMB No. 1545-0047

2010

**Open to Public
Inspection**

Name of the organization **UNITARIAN UNIVERSALIST SERVICE**

Employer identification number

COMMITTEE INC

04-6186012

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 Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed ▶ ☐

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ENVIRONMENTAL JUSTICE COALITION FOR WATER - 309 ALAMEDA BLVD. - WEST SACRAMENTO, CA 95691	20-2539559	501(C)(3)	6,425.	0.			IMPROVE ACCESS TO SAFE, AFFORDABLE DRINKING WATER FOR LOW INCOME CONSUMERS IN CALIFORNIA.
AIC/HAMSA 1718 M ST., NW #243 WASHINGTON, DC 20036	06-1163452	501(C)(3)	30,000.	0.			PROMOTING CIVIL LIBERTIES IN THE MIDDLE EAST
NORTHWEST ARKANSAS WORKERS' JUSTICE CENTER - 2200 W. SUNSET #B-4 - SPRINGDALE, AZ 72762	20-3709967	501(C)(3)	20,000.	0.			DEVELOP COMMUNITY ALLIANCES AND SUPPORT AND TRAIN WOMEN WORKERS IN NORTHWEST ARKANSAS
MASSACHUSETTS GLOBAL ACTION 33 HARRISON AVE., 4TH FLOOR BOSTON, MA 02111	04-3454144	501(C)(3)	17,500.	0.			IMPROVE ACCESS TO SAFE, AFFORDABLE DRINKING WATER FOR LOW INCOME CONSUMERS IN BOSTON.
LET JUSTICE ROLL 1550 S. INDIANA AVE. CHICAGO, IL 60605	26-2888798	501(C)(3)	10,000.	0.			CAMPAIGN AND IMPLEMENT "SOUTHERN CRESCENT" STATE STRATEGY FOR LIVING WAGE ORGANIZING
SOUTHERN ALTERNATIVES AGRICULTURAL COOPERATIVE - P.O. BOX 426 - LESLIE, GA 31764	27-0106848	N/A	10,000.	0.			BUILDING CAPACITY OF A RURAL SOUTHERN PECAN CO-OP

2 Enter total number of section 501(c)(3) and government organizations **19.**

3 Enter total number of other organizations **1.**

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

Schedule I (Form 990) (2010)

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

UNITARIAN UNIVERSALIST SERVICE

Schedule I (Form 990)

COMMITTEE INC

04-6186012

Page 1

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
MILITARY FAMILIES SPEAK OUT P.O BOX 300549 JAMAICA PLAIN, MA 02130	20-3795056	501(C)(3)	8,500.	0.			AMPLIFY THE VOICES OF MILITARY FAMILIES
UU LEGISLATIVE MINISTRY CA 717 K STREET, SUITE 514 SACRAMENTO, CA 95814	87-0694546	501(C)(3)	16,000.	0.			IMPROVE ACCESS TO SAFE, AFFORDABLE DRINKING WATER FOR LOW INCOME CONSUMERS IN CALIFORNIA
RESTAURANT OPPORTUNITIES CENTER - UNITED (ROC-UNITED) - 350 7TH AVENUE, SUITE 1504 - NEW YORK, NY 10001	01-0939141	501(C)(3)	12,000.	0.			BUILD INTERNATIONAL POWER FOR FEMALE WORKERS, PARTICULARLY MIGRANT WOMEN AND WOMEN OF COLOR,
NATIONAL RELIGIOUS CAMPAIGN AGAINST TORTURE - 316 F ST., NE - WASHINGTON, DC 20002	26-1545982	501(C)(3)	10,000.	0.			PUBLIC EDUCATION AND LEGISLATIVE ADVOCACY
STITCH 1525 NEWTON ST., NW WASHINGTON, DC 20010	36-4275984	501(C)(3)	20,000.	0.			TRAIN WOMEN WORKERS IN CENTRAL AMERICA THOROUGH LABOR SCHOOLS AND REGIONAL MEETINGS.
TORTURE ABOLITION & SURVIVOR SUPPORT - 4121 HAREWOOD ROAD, NE, STE. B - WASHINGTON, DC 20017	30-0060696	501(C)(3)	20,000.	0.			INTERNATIONAL COMMUNITIES OF HEALING FOR TRUTH AND JUSTICE & EDUCATION AND ACCOUNTABILITY PROJECT
IRAQ VETERANS AGAINST THE WAR 64 FULTON ST., RM 430 NEW YORK, NY 10038	35-2314550	501(C)(3)	13,000.	0.			BUILDING CAPACITY FOR FIELD ORGANIZING PROGRAM FOCUSED ON MOBILIZING AGAINST POLICIES THAT
ACUPUNTURISTS WITHOUT BORDERS 909 VIRGINIA ST., NE, SUITE 211 ALBUQUERQUE, NM 87407	54-2190889	501(C)(3)	20,000.	0.			TRAINING HAITIAN HEALTH CARE PROVIDERS TO USE ACUPUNCTURE FOR TRAUMA TREATMENT POST EARTHQUAKE
AMERICAN FRIENDS SERVICE COMMITTEE 1501 CHERRY STREET PHILADELPHIA, PA 19102	23-1352010	501(C)(3)	7,596.	0.			SUPPORTING PALESTINIAN YOUTH TO USE LOCAL RESOURCES TO HELP REPAIR HOUSES DAMAGED BY THE

LHA

Schedule I (Form 990)

UNITARIAN UNIVERSALIST SERVICE

Schedule I (Form 990)

COMMITTEE INC

04-6186012

Page 1

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
BARAKAT, INC. 552 MASSACHUSETTS AVE., SUITE 215 CAMBRIDGE, MA 02139	04-3493675	501(C)(3)	41,754.	0.			TRAINING BARAKAT AND GOVERNMENT TEACHERS ON INCORPORATING HUMAN RIGHTS STATUTES INTO
BEYOND BORDERS P.O. BOX 2132 NORRISTOWN, PA 19404	23-2713126	501(C)(3)	141,286.	0.			ORGANIZING AND TRAINING CHILD PROTECTION COMMITTEES IN CAMPS IN HAITI POST EARTHQUAKE TO
INSTITUTE FOR POLICY STUDIES 1112 16TH ST., NW, SUITE 600 WASHINGTON, DC 20036	52-0788947	501(C)(3)	25,000.	0.			PROVIDE SUPPORT AROUND POLICY, MEDIA AND ADVOCACY WORK FOR GRASSROOTS GROUPS IN
OASIS INSTITUTE FOUNDATION 20295 NW 2ND AVE., SUITE 217-A MIAMI GARDENS, FL 33169	35-2379268	501(C)(3)	47,779.	0.			ESTABLISH CAMP OASIS I AS A PILOT PROJECT TO HOUSE, EDUCATE AND CARE FOR 40 GIRLS ORPHANED BY THE
TRAUMA RESOURCE INSTITUTE 270 LOMA ENTRADA SANTA FE, NM 87501	20-2420669	501(C)(3)	18,553.	0.			TRAUMA RESILIENCY FOR HAITI EARTHQUAKE SURVIVORS & RELIEF WORKERS

LHA

Schedule I (Form 990)

UNITARIAN UNIVERSALIST SERVICE

COMMITTEE INC

Schedule I (Form 990) (2010)

04-6186012

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Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to 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 non-cash assistance

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

SCHEDULE I, PART I, LINE 2: EACH GRANT HAS A TERM LIMIT. AT THE END OF THE TERM, A FULL NARRATIVE AND FINANCIAL REPORT IS REQUESTED THAT DOCUMENTS HOW THE FUNDS WERE USED. MONITORING AND EVALUATION OF THE PROJECT IS ONGOING THROUGHOUT THE TERM OF THE GRANT.

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT:

RESTAURANT OPPORTUNITIES CENTER - UNITED (ROC-UNITED)

(H) PURPOSE OF GRANT OR ASSISTANCE: BUILD INTERNATIONAL POWER FOR FEMALE

UNITARIAN UNIVERSALIST SERVICE
COMMITTEE INC

Schedule I (Form 990) 2010

04-6186012 Page 2

Part IV Supplemental Information

WORKERS, PARTICULARLY MIGRANT WOMEN AND WOMEN OF COLOR, IN THE
TRANSNATIONAL RESTAURANT INDUSTRY.

NAME OF ORGANIZATION OR GOVERNMENT: IRAQ VETERANS AGAINST THE WAR

(H) PURPOSE OF GRANT OR ASSISTANCE: BUILDING CAPACITY FOR FIELD
ORGANIZING PROGRAM FOCUSED ON MOBILIZING AGAINST POLICIES THAT RELY ON
RE-DEPLOYING TRAUMATIZED SERVICE MEMBERS

NAME OF ORGANIZATION OR GOVERNMENT: AMERICAN FRIENDS SERVICE COMMITTEE

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORTING PALESTINIAN YOUTH TO USE
LOCAL RESOURCES TO HELP REPAIR HOUSES DAMAGED BY THE CONFLICT IN GAZA

NAME OF ORGANIZATION OR GOVERNMENT: BARAKAT, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: TRAINING BARAKAT AND GOVERNMENT
TEACHERS ON INCORPORATING HUMAN RIGHTS STATUTES INTO CURRICULUM AND HUMAN
RIGHTS CURRICULUM DEVELOPMENT

NAME OF ORGANIZATION OR GOVERNMENT: BEYOND BORDERS

(H) PURPOSE OF GRANT OR ASSISTANCE: ORGANIZING AND TRAINING CHILD
PROTECTION COMMITTEES IN CAMPS IN HAITI POST EARTHQUAKE TO INTERVENE FOR
CHILD SAFETY

NAME OF ORGANIZATION OR GOVERNMENT: INSTITUTE FOR POLICY STUDIES

(H) PURPOSE OF GRANT OR ASSISTANCE: PROVIDE SUPPORT AROUND POLICY, MEDIA
AND ADVOCACY WORK FOR GRASSROOTS GROUPS IN HAITI AFTER THE EARTHQUAKE.

NAME OF ORGANIZATION OR GOVERNMENT: OASIS INSTITUTE FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: ESTABLISH CAMP OASIS I AS A PILOT

Schedule I (Form 990) 2010

UNITARIAN UNIVERSALIST SERVICE
COMMITTEE INC

Schedule I (Form 990) 2010

04-6186012 Page 2

Part IV Supplemental Information

PROJECT TO HOUSE, EDUCATE AND CARE FOR 40 GIRLS ORPHANED BY THE
EARTHQUAKE

Supplemental Information on Tax-Exempt Bonds

▶ **Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part V.**
▶ **Attach to Form 990.** ▶ **See separate instructions.**

OMB No. 1545-0047

2010
Open to Public
Inspection

Name of the organization
**UNITARIAN UNIVERSALIST SERVICE
COMMITTEE INC**

Employer identification number
04-6186012

Part I Bond Issues

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pooled financing	
						Yes	No	Yes	No	Yes	No
MASS. DEVELOPMENT A FINANCE AGENCY	04-3431814	NONEAVAIL	05/17/07	3,500,000.	PURCHASE OF OFFICE BUILDING		X		X		X
B											
C											
D											

Part II Proceeds

	A	B	C	D
1 Amount of bonds retired				
2 Amount of bonds legally defeased				
3 Total proceeds of issue	3,500,000.			
4 Gross proceeds in reserve funds				
5 Capitalized interest from proceeds				
6 Proceeds in refunding escrows				
7 Issuance costs from proceeds	47,000.			
8 Credit enhancement from proceeds				
9 Working capital expenditures from proceeds				
10 Capital expenditures from proceeds	3,543,000.			
11 Other spent proceeds				
12 Other unspent proceeds				
13 Year of substantial completion	2009			
	Yes	No	Yes	No
14 Were the bonds issued as part of a current refunding issue?		X		
15 Were the bonds issued as part of an advance refunding issue?		X		
16 Has the final allocation of proceeds been made?	X			
17 Does the organization maintain adequate books and records to support the final allocation of proceeds?	X			

Part III Private Business Use

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X						
2 Are there any lease arrangements that may result in private business use of bond-financed property?	X							

UNITARIAN UNIVERSALIST SERVICE

COMMITTEE INC

Schedule K (Form 990) 2010

04-6186012

Page 2

Part III Private Business Use (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts that may result in private business use of bond-financed property?		X						
b Are there any research agreements that may result in private business use of bond-financed property?		X						
c Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		%		%		%		%
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government		%		%		%		%
6 Total of lines 4 and 5		%		%		%		%
7 Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	X							

Part IV Arbitrage

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		X						
2 Is the bond issue a variable rate issue?		X						
3a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X						
b Name of provider								
c Term of hedge								
d Was the hedge superintergrated?								
e Was the hedge terminated?								
4a Were gross proceeds invested in a GIC?		X						
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
5 Were any gross proceeds invested beyond an available temporary period?		X						
6 Did the bond issue qualify for an exception to rebate?		X						

Part V Supplemental Information. Complete this part to provide additional information for responses to questions on Schedule K.

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

► **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**
► **Attach to Form 990.**

OMB No. 1545-0047

2010

Open to Public Inspection

Name of the organization **UNITARIAN UNIVERSALIST SERVICE COMMITTEE INC**

Employer identification number
04-6186012

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				
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 ► (<u>PHOTOGRAPHS</u>)	X	1	3,000.	FMV
26 Other ► ()				
27 Other ► ()				
28 Other ► ()				

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

29

0

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

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

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

b If "Yes," describe in Part II.

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

	Yes	No
30a		X
31	X	
32a	X	
33		

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

Schedule M (Form 990) (2010)

UNITARIAN UNIVERSALIST SERVICE

Schedule M (Form 990) (2010) COMMITTEE INC

04-6186012

Page 2

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33.
Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B): THE NUMBER IN PART I, COLUMN B
REPRESENTS THE NUMBER OF CONTRIBUTIONS.

SCHEDULE M, LINE 32B: THE ORGANIZATION USES SMITHBARNEY BROKERAGE
SERVICES TO PROCESS AND SELL SECURITIES CONTRIBUTED TO THE
ORGANIZATION. STOCK CONTRIBUTIONS ARE SOLD UPON RECEIPT.

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.

OMB No. 1545-0047

2010

Open to Public
Inspection

Name of the organization

UNITARIAN UNIVERSALIST SERVICE
COMMITTEE INC

Employer identification number
04-6186012

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

UUSC ADVANCES HUMAN RIGHTS AND SOCIAL JUSTICE AROUND THE WORLD,
PARTNERING WITH THOSE WHO CONFRONT UNJUST POWER STRUCTURES AND
MOBILIZING TO CHALLENGE OPPRESSIVE POLICIES.

FORM 990, PART III, LINE 4A:

RIGHTS IN HUMANITARIAN CRISES - IN BOTH DISASTERS AND CONFLICTS, UUSC
AND ITS LOCAL GRASSROOTS PARTNERS SUPPORT POPULATIONS WHOSE RACE,
CLASS, GENDER AND RELIGION MARGINALIZE THEM FROM ACCESSING MAINSTREAM
AID. OUR SEED GRANTS FUND INNOVATIVE PROJECTS BUILDING ON LOCAL
CAPACITY THAT OTHER ORGANIZATIONS CAN LEARN FROM, ADAPT AND BUILD UPON.
IN FY11, UUSC RESPONDED TO DISASTERS AND CONFLICTS IN PAKISTAN, HAITI,
GAZA, UGANDA, MYANMAR, DARFUR, AND KENYA. IN HAITI, WE HAVE TRAINED
OVER 300 HAITIANS IN CHILD PROTECTION INTERVENTION, ALTERNATIVE METHODS
FOR TRAUMA RESILIENCY, AND IMPROVED LIVELIHOODS AND SUPPORTED THE
IMPLEMENTATION OF THESE ACTIVITIES. WE HAVE EXPANDED OPPORTUNITIES FOR
HUNDREDS OF YOUNG PEOPLE IN HAITI AND GAZA TO DEVELOP THEIR POTENTIAL,
POSITIVELY CONTRIBUTE TO THEIR COMMUNITIES, AND AVOID SLAVERY AND
ABUSE.

UUSC HELPED OVER 2,000 WOMEN IN PAKISTAN, HAITI, AND KENYA REBUILD AND
INCREASE THEIR LIVELIHOODS AFTER CONFLICT AND DISASTER, AND RECOGNIZE
AND EXERCISE THEIR RIGHTS TO DIGNITY, RESPECT, AND VOICE. WITH UUSC
SUPPORT, OVER 20,000 PEOPLE IN NORTHERN UGANDA HAVE RETURNED HOME AFTER
WAR AND USED THEIR CULTURE AS A RESOURCE TO ESTABLISH PEACEFUL
COMMUNITIES. OVER 50,000 VILLAGERS IN A WAR AFFECTED AREA OF MYANMAR

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ARE PARTICIPATING IN COMMUNITY-LED REVOLVING LOAN FUNDS THAT ARE
ENGINES FOR BUILDING COLLECTIVE STRENGTH THROUGH EDUCATION, HEALTH, AND
LIVELIHOOD EFFORTS.

FORM 990, PART III, LINE 4B:

ENVIRONMENTAL JUSTICE - UUSC WORKS TO ESTABLISH THE HUMAN RIGHT TO
WATER AND SANITATION IN LAW, POLICY, AND FACT THROUGH GOOD MODELS AND
NEW LAW. ACCESS TO CLEAN, SAFE, AND AFFORDABLE WATER IS A FUNDAMENTAL
HUMAN RIGHT ESSENTIAL TO HEALTH, THE ENVIRONMENT, AND THE ECONOMY
GLOBALLY, NATIONALLY AND LOCALLY. THIS YEAR UUSC PROVIDED SUPPORT FOR
12 PARTNERS IN AFRICA, THE AMERICAS AND ASIA. IN KENYA, RESIDENTS
RESTORED WATERSHEDS IN THE RAIN FOREST AND PROVIDED LIVELIHOODS AND
FOOD FOR 10,000 SCHOOL CHILDREN AND 300 WOMEN-LED HOUSEHOLDS IN 30
COMMUNITIES. IN MEXICO RESIDENTS WON THE FIRST "AMPARO" ON THE HUMAN
RIGHT TO WATER IN MEXICAN FEDERAL COURTS TO BRING WATER TO A 100
FAMILIES IN AN EXCLUDED COMMUNITY IN MORELOS AND SET LEGAL PRECEDENT.
UUSC ORGANIZED HEARINGS OF RESIDENTS IN CA, MA, MD, AND WASHINGTON,
D.C. WHO TESTIFIED FOR THE UN INDEPENDENT EXPERT ON THE HUMAN RIGHT TO
WATER AND SANITATION, DOCUMENTING THE CONDITIONS OF NEGLECT OF THE
HOMELESS, URBAN AND RURAL COMMUNITIES AND DISCRIMINATORY IMPACTS OF
WATER SHUT OFFS. UUSC PROVIDED TECHNICAL ASSISTANCE TO PEPSICO TO ADOPT
A HUMAN RIGHT TO WATER POLICY AND BEGIN AN IMPACT ASSESSMENT IN FIVE OF
ITS OPERATIONS WORLDWIDE.

FORM 990, PART III, LINE 4C:

ECONOMIC JUSTICE - UUSC SUPPORTS GROUPS IN THE UNITED STATES AND

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OVERSEAS THAT STRENGTHEN THE CAPACITY OF MARGINALIZED, INFORMAL-ECONOMY WORKERS TO ACHIEVE JUST WORKING CONDITIONS THROUGH STRUCTURAL CHANGE AND FAIR TRADE. THIS YEAR, OUR PARTNERS WORKING TO COMBAT CHILD LABOR IN KENYA, THE ROCK WOMEN GROUP AND MUUNGANO, TRAINED MORE THAN 450 YOUTH AT-RISK IN SUSTAINABLE MICROENTERPRISES, ENABLING THE YOUTH TO AVOID DANGEROUS FORMS OF EMPLOYMENT LIKE PROSTITUTION. UUSC'S PARTNER THE KENYA NATIONAL ALLIANCE OF STREET VENDORS AND INFORMAL TRADERS (KENASVIT) ADVOCATED FOR NATIONAL LEGISLATION TO BOOST LABOR PROTECTIONS IN THE INFORMAL SECTOR, CONDUCTED LEADERSHIP FORUMS FOR WOMEN AND DISABLED STREET VENDORS, AND EXPANDED FROM 6,000 TO 9,200 MEMBERS. ALSO, UUSC SUPPORTED OUR PARTNER STITCH TO IMPLEMENT A LEADERSHIP AND ORGANIZING CURRICULUM WITH 4,000 MARGINALIZED WOMEN WORKERS IN THE UNITED STATES AND CENTRAL AMERICA, WHICH LED TO THE FORMATION OF WOMEN'S COMMITTEES AND ELECTION OF WOMEN TO KEY LEADERSHIP POSITIONS IN THEIR UNIONS AND ORGANIZATIONS. WE ALSO WORKED WITH PARTNERS IN THE UNITED STATES TO STRENGTHEN PROGRAMS THAT ADDRESS WAGE THEFT, OCCUPATIONAL SAFETY, AND DISCRIMINATION AGAINST WOMEN AND IMMIGRANT WORKERS IN THE POULTRY-PROCESSING, CONSTRUCTION, AND RESTAURANT INDUSTRIES, AND SUPPORTED SOUTHERN ALTERNATIVES AGRICULTURAL CO-OPERATIVE, A PECAN CO-OP RUN BY RURAL AFRICAN-AMERICAN WOMEN, TO STRENGTHEN ITS BUSINESS PRACTICES AND REACH NEW MARKETS FOR ITS PRODUCTS.

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

CIVIL LIBERTIES - UUSC WORKS TO ENSURE PROTECTION FROM UNLAWFUL GOVERNMENT INTRUSION AND SUPPORT FOR EQUAL PARTICIPATION IN OPEN DEMOCRATIC PROCESSES REGARDLESS OF RACE, CLASS, GENDER, OR RELIGION BY

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SUPPORTING CITIZEN ENGAGEMENT. UUSC SUPPORTED ITS CIVIL LIBERTIES PARTNERS IN THE US, THE MIDDLE EAST, AND NORTH AFRICA. IN WASHINGTON DC, OVER 50 SURVIVORS OF TORTURE WERE BROUGHT TOGETHER TO TRAIN ON HEALING TECHNIQUES, ASYLUM/IMMIGRATION PROCESSES, PUBLIC ADVOCACY, GOAL SETTING, AND PUBLIC SPEAKING AS A WAY TO REGAIN THEIR VOICES AND PROVIDE SUPPORT TO ONE ANOTHER. IN SEATTLE, 120 LOCAL AREA RESIDENTS OF BOTH THE UNITARIAN UNIVERSALIST AND MUSLIM FAITH BACKGROUNDS WERE EDUCATED VIA THE BUILDING BRIDGES PROGRAM ON RACIAL AND RELIGIOUS PROFILING ISSUES FACING THE MUSLIM COMMUNITY IN THE US AS A RESULT OF POST 9/11 ACTIVITIES AND DEVELOPED CONCRETE ACTION PLANS FOR PROVIDING CIVIL LIBERTIES PROTECTIONS AT THE LOCAL LEVEL. IN EGYPT, UUSC SUPPORTED THE DEVELOPMENT OF AN EFFECTIVE CAMPAIGN FOR EDUCATING CITIZENS ON CIVIC PROCESSES, VOTING RIGHTS, AND ELECTION PARTICIPATION. THE CAMPAIGN HAS SUCCESSFULLY TRAINED OVER 10,000 CITIZENS IN PREPARATION FOR THE UPCOMING ELECTIONS.

EXPENSES \$ 598,695. INCLUDING GRANTS OF \$ 118,795. REVENUE \$ 55,146.

COLLEGE OF SOCIAL JUSTICE - THIS YEAR THE UUSC INITIATED THE COLLEGE AS A NEW PROGRAM AREA SPECIFICALLY FOCUSED ON DEVELOPING THE CAPACITY OF UNITARIAN UNIVERSALISTS AND OTHERS TO CATALYZE JUSTICE. PROGRAMS INCLUDED A CIVIL RIGHTS JOURNEY THROUGH THE AMERICAN SOUTH, A JOINT SERVICE-LEARNING TRIP TO VISIT UUSC PARTNERS AND UNITARIAN UNIVERSALIST CONGREGATIONS IN UGANDA, AND THE LAUNCH OF OUR JOINT UUSC-UUA HAITI VOLUNTEER PROGRAM. OUR THREE SERVICE-LEARNING DELEGATIONS TO HAITI INCLUDED 32 INSTITUTIONAL LEADERS, MEDICAL VOLUNTEERS, SEMINARIANS, YOUTH AND YOUNG ADULTS WHO CARED FOR 350 WOMEN AND CHILDREN AT TWO CLINICS IN PORT-AU-PRINCE AND AT CAMP OASIS, A SHELTER FOR ORPHANED GIRLS. OUR VOLUNTEERS ALSO HELPED LAUNCH THE BUILDING OF AN ECO-VILLAGE

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IN HAITI'S CENTRAL PLATEAU WITH UUSC'S PARTNER, THE PAPAYE PEASANTS
MOVEMENT (MPP). COMPRISED OF HOMES AND FARMING PLOTS FOR 10 FAMILIES,
THE VILLAGE MODELS SUSTAINABLE HOUSING AND FARMING PRACTICES THAT ALLOW
FOR THE SUCCESSFUL RESETTLEMENT OF FAMILIES DISPLACED BY THE
EARTHQUAKE. FOLLOWING UUSC'S LEAD, OTHER NGO'S HAVE COMMITTED TO BUILD
40 ADDITIONAL HOMES. COLLEGE STAFF ALSO HOSTED 243 YOUTH AND ADVISORS
FROM 22 UU CONGREGATIONS WHO CAME TO OUR CAMBRIDGE HEADQUARTERS TO
LEARN FIRST-HAND ABOUT UUSC'S WORK ADVANCING HUMAN RIGHTS.
EXPENSES \$ 670,098. INCLUDING GRANTS OF \$ 12,000. REVENUE \$ 137,280.

FORM 990, PART VI, SECTION B, LINE 11: THE DRAFT OF THE FORM 990 IS
DISCUSSED AND REVIEWED WITH THE AUDIT COMMITTEE OF THE BOARD OF TRUSTEES
FOR THEIR COMMENTS, INPUT AND APPROVAL. ALL THE MEMBERS OF THE GOVERNING
BODY RECEIVE EITHER A HARD COPY OR AN ELECTRONIC COPY OF THE FORM 990
BEFORE IT IS FILED.

FORM 990, PART VI, SECTION B, LINE 12C: UUSC REGULARLY AND CONSISTENTLY
MONITORS AND ENFORCES COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY WHICH
COVERS ALL STAFF AND THE BOARD OF TRUSTEES. IN DOING SO, ALL DECISIONS
(FINANCIAL OR NON-FINANCIAL) ARE SCRUTINIZED TO ENSURE THAT THEY ARE NOT
SELF-SERVING WITH RESPECT TO UUSC PERSONNEL OR MEMBERS OF THE BOARD OF
TRUSTEES. HUMAN RESOURCES DECIDES IF A CONFLICT OF INTEREST EXISTS FOR UUSC
PERSONNEL AND ELEVATES THE MATTER TO THE PRESIDENT/CEO OR THE PRESIDENT OF
THE BOARD OF TRUSTEES AS APPROPRIATE. THE BOARD COMPLETES A CONFLICT OF
INTEREST FORM ANNUALLY WHICH IS THEN SHARED WITH THE FULL BOARD. ANY
CONFLICTED INDIVIDUAL IS PROHIBITED FROM VOTING OR MAKING ANY DECISIONS
RELATED TO THE MATTER.

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FORM 990, PART VI, SECTION B, LINE 15: THE COMPENSATION OF THE
PRESIDENT/CEO IS DETERMINED BY THE EXECUTIVE COMMITTEE OF THE THE BOARD OF
TRUSTEES, ALL OF WHOM ARE INDEPENDENT OF THE PRESIDENT/CEO. THE
COMPENSATION IS DETERMINED BY REFERENCE TO COMPARABILITY DATA. THE
PRESIDENT/CEO'S COMPENSATION IS REVIEWED AND POTENTIALLY ADJUSTED ANNUALLY
UPON BOARD APPROVAL. THE ORGANIZATION MAINTAINS CONTEMPORANEOUS
DOCUMENTATION OF THE DELIBERATION AND DECISION. COMPENSATION FOR OTHER
OFFICERS IS DETERMINED BY THE PRESIDENT/CEO. SUCH COMPENSATION IS SIMILARLY
DETERMINED BY REFERENCE TO COMPARABILITY DATA.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:
CA, CO, CT, DC, FL, GA, HI, IL, IN, KS, KY, LA, ME, MD, MA, MI, MN, NH, NJ, NM, NY, NC, OH, OK, OR
PA, RI, SC, TN, UT, VA, WA, WV, WI, AL, AZ, AK, AR

FORM 990, PART VI, SECTION C, LINE 19: UUSC MAKES ITS GOVERNING DOCUMENTS,
CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE
PUBLIC BY PUBLISHING THEM ON ITS WEBSITE. ADDITIONALLY, THE FORM 990 AND
FINANCIAL STATEMENTS ARE AVAILABLE THROUGH THE MASSACHUSETTS ATTORNEY
GENERAL'S WEBSITE.

FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

NET UNREALIZED GAINS ON INVESTMENTS:	192,057.
CHANGE IN VALUE OF SPLIT-INTEREST GIFTS	-166,692.
TOTAL TO FORM 990, PART XI, LINE 5	25,365.