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)

2012

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

Open to Public Inspection

A	For th	e 2012 calendar year, or tax year beginning JUL 1, 2012 and ending	JUN 30, 201	3
₿.	Check if applicat	C Name of organization UNITARIAN UNIVERSALIST SERVICE	D Employer ident	· · · · · · · · · · · · · · · · · · ·
	Addr	COMMITTEE INC		
	Name		04-	6186012
	nitia returi	Number and street (or P.O. box if mail is not delivered to street address) Room/s		
	Term ated Amer	689 MASSACHUSETTS AVENUE	(61	7)-868-6600
<u> </u>	lreturr ∏Appli		G Gross receipts \$	8,287,146.
L	ltion pend	CAMBRIDGE, MA 02139	H(a) is this a group	
		F Name and address of principal officer:WILLIAM F. SCHULZ	for affiliates?	Yes X No
		SAME AS C ABOVE	H(b) Are all affiliates i	
				a list. (see instructions)
*********		te: WWW.UUSC.ORG	H(c) Group exempt	
	art I	forganization: X Corporation	ear of formation: 1948	M State of legal domicile: MA
Activities & Governance	1	Briefly describe the organization's mission or most significant activities: SEE SCHE		
re T	2	Check this box if the organization discontinued its operations or disposed of r	nore than 25% of its net	1
်စ္တိ	3	Number of voting members of the governing body (Part VI, line 1a)	3	
90	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	·
ies	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	
Ü	6	Total number of volunteers (estimate if necessary)	<u>e</u>	2526
Act	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		a 49,458.
	d	Net unrelated business taxable income from Form 990-T, line 34		b 27,166.
			Prior Year	Current Year
9	8	Contributions and grants (Part VIII, line 1h)	7,535,549	
Revenue	9	Program service revenue (Part VIII, line 2g)	0	
Re	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	262,428	
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	248,611	
-	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	8,046,588	
	13	Grants and similar amounts paid (Part IX, column (A), lines 1·3)	1,242,603	
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	3,535,498	
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	62,329	
X		Total fundraising expenses (Part IX, column (D), line 25) 532,313.		
lehel	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	2,141,778	
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	6,982,208	
. 00	19	Revenue less expenses. Subtract line 18 from line 12	1,064,380	. 918,849.
Net Assets or Fund Balances			Beginning of Current Yea	
Sse	20	Total assets (Part X, line 16)	23,051,782	
et A	21	Total liabilities (Part X, line 26)	5,671,479	
		Net assets or fund balances. Subtract line 21 from line 20	17,380,303	. 19,242,961.
-	art II	Signature Block		
Und	er pen	alties of perjury, I declare that I have examined this return, including accompanying schedules and sta	atements, and to the best of	my knowledge and belief, it is
true	, corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer	parer has any knowledge.	1-1-
۵.		Signature of officer		4/3
Sig			Date	
Her	·e	MICHAEL ZOUZOUA, CHIEF FINANCIAL OFFICER Type or print name and title		
		Print/Type preparer's name Preparer's signature	Date Gneck	PTIN
Paid		CRAIG KLEIN	selt-empl	The state of the s
	parer	Firm's name LBIZ TOFIAS	Firm's EIN ⊳	26-3753134
Use	Only	Firm's address 500 BOYLSTON STREET		- CONTROL OF THE PARTY BANK AND THE PARTY BANK BANK BANK BANK BANK BANK BANK BANK
		BOSTON, MA 02116	Phone no.	617-761-0600
Ma	y the l	RS discuss this return with the preparer shown above? (see instructions)	***************************************	X Yes No

	990 (2012) COMMITTEE INC	04-6186012 Page 2
Par	t 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	
	PARTNERING WITH THOSE WHO CONFRONT UNJUST POWER STRUCTUF	RES 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 X No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as	measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to othe	rs, the total expenses, and
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 2,008,043. including grants of \$ 290,993.) (Revenue	
	HUMAN RIGHTS PROGRAMS - I. RIGHTS IN HUMANITARIAN CRISES	S: SEE SCHEDULE
	0.	
4b	(Code:) (Expenses \$ 1,075,030 · including grants of \$ 156,094 ·) (Revenue	es 56,421.)
	HUMAN RIGHTS PROGRAMS - II. ENVIRONMENTAL JUSTICE: SEE S	SCHEDULE O.
4c	(Code:) (Expenses \$ 1,087,701. Including grants of \$ 161,238.) (Revenue	ie\$ 12,762.)
	HUMAN RIGHTS PROGRAMS - III. ECONOMIC JUSTICE: SEE SCHEI	DULE O.

	Other program appliage /Describe in Schedule O.)	
4d	Other program services (Describe in Schedule O.) (Expenses \$ 1,395,610. including grants of \$ 137,820.) (Revenue \$	1
4e	(Expenses \$ 1,395,610 including grants of \$ 137,820 ·) (Revenue \$ Total program service expenses ► 5,566,384 ·	1
	TOTAL PLOS MICHAEL CAPATIONA F UT DV O T DV T 1	Form 990 (2012)
23200	12	romi 330 (2012)

12-10-12

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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	1	X	
2	is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u>X</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	- 0		- 14
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			-
	as applicable.			, ,
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<u>X</u>
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u>X</u>
ď	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
Y	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		37	
10-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	111	X	
123	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII		37	
h	Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year?	12a	X	
D	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
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	15	X	
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	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	ļ	**	
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	17	X	
18	1c and 8a? If "Yes," complete Schedule G, Part II	40	İ	v
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18	 	X
	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes, " complete Schedule H	20a	1	X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Form 990 (2012) COMMITTEE INC
Part IV Checklist of Required Schedules (con

1 (1)	Glieckist of Required Schedules (continued)			
0.0			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the		*7	
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			37
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		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		v	
	Schedule J	23	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		X	
	Schedule K. If "No", go to line 25	24a		v
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	04-		X
	any tax-exempt bonds?	240		X
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
258	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	05-		~
6.	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		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	OEL		X
06	Schedule L, Part I Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified	25b		1 22
26	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	20	 	<u> </u>
21	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	-		1 1 7
20	instructions for applicable filing thresholds, conditions, and exceptions):		l.	
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,		1	
Ŭ	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L., Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			1
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity		1	
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		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	37	ļ	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note, All Form 990 filers are required to complete Schedule O	38	X	
		T-	. വധവ	(2010)

Form 990 (2012)

Par	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V							
	Chock in Schooling O Contains a response to any question in this Fatt 4				Yes	No		
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	14		103	,,,,		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	*	0		N.	1		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming							
v	(gambling) winnings to prize winners?			1c	X			
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	46	9.				
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 instruction	s)				d d		
За	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	autho	rity over, a					
	financial account in a foreign country (such as a bank account, securities account, or other financial	accot	int)?	4a		X		
þ	If "Yes," enter the name of the foreign country:				54	į		
	See Instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial	Accol	ints.	: :				
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	action	7	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 t	he org	anization solicit					
	any contributions that were not tax deductible as charitable contributions?		************************	6a		X		
b	If "Yes," did the organization include with every solicitation an express statement that such contribu	tions (or gifts					
	were not tax deductible?			6b		1		
7	Organizations that may receive deductible contributions under section 170(c).							
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices	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 w	as re	quired					
	to file Form 8282?			7c		X		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d						
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	contra	ct?	7e	ļ	X		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont	ract?	***************************************	7f		X		
g	If the organization received a contribution of qualified intellectual property, did the organization file F	orm 8	899 as required?	7g		,		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	ation	file a Form 1098-C?	7h				
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.)id the	supporting	1	25/25/25	l k		
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings a	t any ti	me during the year?	8	<u> </u>	<u> </u>		
9	Sponsoring organizations maintaining donor advised funds.			1		¥. :		
а	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:	ſ	1					
а	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:	1	1		'			
а	Gross income from members or shareholders	11a		1	1	T.		
b	Gross income from other sources (Do not net amounts due or paid to other sources against							
	amounts due or received from them.)	110						
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	n.1041	13	12a	-			
þ		12b		100 a 2003				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			1.22		- :		
а	Is the organization licensed to issue qualified health plans in more than one state?	•••••		13a	12/55			
	Note. See the instructions for additional information the organization must report on Schedule O.				28 to 1 to 2	ļ.		
b	Enter the amount of reserves the organization is required to maintain by the states in which the	Į	1					
	organization is licensed to Issue qualified health plans	13b		-		3.		
C					 			
14a				14a		X		
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedu	ne U		14b		(2012		

COMMITTEE INC

04-6186012 Page 6

5 7

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.

C	Check if Schedule O contains a response to any question in this Part VI			X					
Sec	tion A. Governing Body and Management		v						
	Enter the number of voting members of the governing body at the end of the tax year 15		Yes	No_					
1a		1	Ī.						
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			1					
ł.	Enter the number of voting members included in line 1a, above, who are independent		3 14						
b	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	•		-					
2	officer, director, trustee, or key employee?	2		Х					
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	<u> </u>		22					
3	of officers, directors, or trustees, or key employees to a management company or other person?	3		X					
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X					
5									
6	Did the organization have members or stockholders?	5 6		X					
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			44					
1 61	more members of the governing body?	7a		Х					
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or								
	persons other than the governing body?	7b		Х					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		ė.	1					
а	The governing body?	8a	Х	- 4					
b	Each committee with authority to act on behalf of the governing body?	8b	X						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	0.0							
Ü	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	·							
***************************************		****************	Yes	No					
10a	Did the organization have local chapters, branches, or affiliates?	10a		X					
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			- 77					
-	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b							
11a	Ta Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?								
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990.								
12a		12a	X	. ":					
b		12b	X						
c									
	in Schedule O how this was done	12c	X						
13	Did the organization have a written whistleblower policy?	13	X						
14	Did the organization have a written document retention and destruction policy?	14	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?								
а	The organization's CEO, Executive Director, or top management official	15a	X						
b	Other officers or key employees of the organization	15b	X						
	if "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions),	18.1							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	12.3		j					
	taxable entity during the year?	16a		X					
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	P.		1					
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			1					
	exempt status with respect to such arrangements?	16b	<u>.</u>						
Sec	tion 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			,LA					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	availal	ole						
	for public inspection. Indicate how you made these available. Check all that apply.								
	Own website Another's website X Upon request Other (explain in Schedule O)								
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, ar	id fina	ncial						
	statements available to the public during the tax year.								
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who person of the person of the person of the person who person of the pe	tion:	▶						
	MICHAEL ZOUZOUA - (617)301-4318								
2320	UUSC, 689 MASSACHUSETTS AVENUE, CAMBRIDGE, MA 02139		000						
12-10		Forr	n 990	(2012)					

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.

(itst any hours for related organizations below line) 1	(A) Name and Title	Title (B) (C) Average hours per week (do not check mot box, unless person officer and a direct file.)		tion nore son i	than s bot	n an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other		
(1) CHARLES SPENCE		(list any hours for related organizations below	Individual frustee or director	Institutional frustee	Officer	Key employee	Highest compensated employee	Fgrmer	the organization	organizations	compensation
1.00 X	(1) CHARLES SPENCE	1.00									
VICE-CHAIR	CHAIR		X		X				0.	0.	<u>0</u> .
1.00 X	(2) DAVID MADAN	1.00	-								
SECRETARY	VICE-CHAIR		X		X				0.	0.	0.
(4) CHARLES SANDMEL	(3) LUCIA SANTINI FIELD	1.00									
TREASURER	SECRETARY		X		X		<u> </u>		0.	0.	. 0
The color of the	(4) CHARLES SANDMEL	1.00									
COARD MEMBER	TREASURER		X		X				0.	0.	0.
Todd Hess		1.00									
BOARD MEMBER	BOARD MEMBER		X					ļ	0.	0.	0.
The state of the	(6) TODD HESS	1.00	-						, , , , , , , , , , , , , , , , , , ,		
BOARD MEMBER			X	ļ			-		0.	0.	0.
BOARD MEMBER		1.00								_	
BOARD MEMBER		4	X				ļ		0.	0.	0,
SOURCE S	(8) EBE EMMONS	1.00	-						_		_
BOARD MEMBER	BOARD MEMBER		X			<u> </u>	<u> </u>		0.	0.	0.
1.00 NOY KING 1.00 Now KING 1.00 Now KING 1.00 Now KING Now	(9) PATRICIA FLYNN	1.00	1							_	_
BOARD MEMBER		4 00	X	ļ					0.	0.	0.
11 KAREN KELL HARTMAN	•	1.00							•		_
BOARD MEMBER		1 00	X				ļ		0.	0.	0.
(12) CONRAD PINNOCK 1.00 BOARD MEMBER X 0. 0. (13) KAREN SCHNEIDER 1.00 0. 0. BOARD MEMBER X 0. 0. (14) RAMA KUMANDURI 1.00 0. 0. BOARD MEMBER X 0. 0. (15) WENDY WILLIAMS 1.00 0. 0. BOARD MEMBER X 0. 0. (16) WILLIAM SCHULZ 30.00 X 179,954. 0. (17) CONSTANCE KANE 35.00 X 179,954. 0.		1.00	-								_
BOARD MEMBER		1 00	X	-			-		U.	0.	0,
1.00		1.00	1						•		
BOARD MEMBER X 0. 0. (14) RAMA KUMANDURI 1.00 0. 0. BOARD MEMBER X 0. 0. (15) WENDY WILLIAMS 1.00 0. 0. BOARD MEMBER X 0. 0. (16) WILLIAM SCHULZ 30.00 X 179,954. 0. 54,67 (17) CONSTANCE KANE 35.00 35.00 0. 54,67		1 00	X				 		U.	U.	0.
(14) RAMA KUMANDURI 1.00 BOARD MEMBER X (15) WENDY WILLIAMS 1.00 BOARD MEMBER X (16) WILLIAM SCHULZ 30.00 PRESIDENT & CEO X (17) CONSTANCE KANE 35.00 1.00 X 1.79,954. 0.54,67		1.00	٠,						0		2
BOARD MEMBER	***************************************	1 00	X	-	-		1		U.	U.	0.
(15) WENDY WILLIAMS BOARD MEMBER (16) WILLIAM SCHULZ PRESIDENT & CEO (17) CONSTANCE KANE 1.00 X 0. 0. 179,954. 0.54,67		1.00	77						^	_	. 0
BOARD MEMBER		1 00	<u> </u>		 		 	-	<u> </u>	<u> </u>	0.
(16) WILLIAM SCHULZ 30.00 X 179,954. 0. 54,67 (17) CONSTANCE KANE 35.00		1.00	-							^	•
PRESIDENT & CEO X 179,954. 0. 54,67 (17) CONSTANCE KANE 35.00		30 00			-	-	-	-	<u>U.</u>	U ·	0.
(17) CONSTANCE KANE 35.00		30.00	-		v				170 054	^	E / / / / /
		35.00		-	1		-	-	1/3,304.	<u> </u>	54,6/6.
VP & COO 114,783. 0. 31,72		35.00	1		X	1			114,783.	0.	31,726

232007 12-10-12

Form 990 (2012)

COMMITTEE INC

Part VII Section A. Officers, Directors, Tr	ustees, Key Em	ploy	ees.	, an	d Hi	ghe:	st C	ompensated Employe	es (continued)			
(A) Name and title	(B) Average hours per	(do	not c	(C Pos heck	C) ition more		eno	(D) (E) Reportable Reportable compensation compensation			Estir	F) nated unt of
	week (list any hours for related organizations below line)	tee or director			irecto	Highest compensated transfer and a second se	tee)	from the organization (W-2/1099-MISC)	ne organizations zation (W-2/1099-MIS		ot compe from organ and r	her ensation in the dization elated zations
(18) MICHAEL ZOUZOUA CFO	35.00			Х				105,322.		0.	32	,981.
(19) MAXINE NEIL DIRECTOR OF INSTITUTIONAL ADV.	35.00				}	X		111,654.		ο.	23	,359.
(20) ROSEMARY E. ATEMA	35.00											
DIRECTOR OF PROGRAMS (21) PAUL TWITCHELL, JR.	35.00					X		108,850.		0.	<u> </u>	,929.
DIRECTOR OF COMMUNICATIONS						X		103,899.		0.	15	,753.
					100							
1b Sub-total c Total from continuation sheets to Part								724,462.		0.	175	,424. 0.
d Total (add lines 1b and 1c) Total number of individuals (including bu	200000000000000000000000000000000000000					-		724,462.	0,000 of reportable	0.	175	,424.
compensation from the organization								,			iv	es No
3 Did the organization list any former office line 1a? If "Yes," complete Schedule J for				-	-			= :			3	
4 For any individual listed on line 1a, is the and related organizations greater than \$	sum of reportat	ole c	omp	ens	atio	n an	d of	ther compensation from	the organization		4	X
5 Did any person listed on line 1a receive	or accrue compe	nsa	tion	fron	n an	y un	rela				2 3	
rendered to the organization? If "Yes," c Section B. Independent Contractors	omplete Schedu	ie J	tor s	such	pei	son	2222	<u></u>	****************		5	X
Complete this table for your five highest the organization. Report compensation to										pens	ation fro	m
(A) Name and busine		f						(B) Description of		C	(C) Compens	ation
INTEGRATED DIRECT MARKE		50						FUNDRAISING				
CONNECTICUT AVE., NW, S PUBLIC INTEREST COMMUNI	TE. 200,	7	70	0				CONSULTING A FUNDRAISING	ND DIREC		255	<u>,863.</u>
LEESBURG PIKE, SUITE 30					Ή,	V	A	CONSULTING A	ND DIREC		104	,652.
	<u></u>										***************************************	·····
	M 1.4.1.1.4.1.4.1.4.1.4.1.4.1.4.1.4.1.4.1	***********	************									THE PARTIES AND ADDRESS OF THE PARTIES AND ADDRE
Total number of independent contractor \$100,000 of compensation from the org		not	limit	ed t	o th	ose	iste	d above) who received r	nore than			
\$100,000 or compensation from the org	ERISTA CRUSA I BA										Form 9	90 (2012)

Part VIII Statement of Revenue Check if Schedule O contains a response to any question in this Part VIII (D) Revenue excluded from tax under Related or Unrelated Total revenue exempt function business sections 512, 513, or 514 revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 99,147 1a b Membership dues 1b c Fundraising events 10 d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 117,067,942 9,266. S Noncash contributions included in lines 1a-1f; \$_ 167,089 h Total, Add lines 1a-1f. **Business Code** Program Service Revenue f All other program service revenue g Total, Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) 182,139. 182,139. Income from investment of tax-exempt bond proceeds 4 5 (i) Real (ii) Personal 519,067 6 a Gross rents b Less: rental expenses 317,544. c Rental income or (loss) 201,523. 127,065 49 ,458 25,000. d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities 314,366. assets other than inventory b Less: cost or other basis 102,646. and sales expenses 211,720. c Gain or (loss) 211,720 211. d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 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 b Less: direct expenses _____ b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns a 104,485. and allowances b Less: cost of goods sold 48,989 48,989 c Net income or (loss) from sales of inventory Business Code Miscellaneous Revenue 11 a d All other revenue e Total. Add lines 11a-11d 418,859. 49.458. ,811 Total revenue. See instructions. 232009 Form 990 (2012)

Form 990 (2012) COMMITTEE INC
Part IX Statement of Functional Expenses

Check if Schedule O contains a respons			***************************************	
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
Grants and other assistance to governments and	000 544	227 544		
organizations in the United States. See Part IV, line 21	227,544.	227,544.		
2 Grants and other assistance to individuals in			1	
the United States, See Part IV, line 22			1	-
3 Grants and other assistance to governments,		40		:
organizations, and individuals outside the United States, See Part IV, lines 15 and 16	491,001.	491,001.	4 1 4	
4 Benefits paid to or for members	471,001.	#JT,00T.		
5 Compensation of current officers, directors,				
trustees, and key employees	724,462.	542,025.	49,481.	132,956
6 Compensation not included above, to disqualified				
persons (as defined under section 4958(f)(1)) and	-A. Children	and the second s		
persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	2,423,669.	1,967,269.	437,727.	18,673
8 Pension plan accruals and contributions (include				
section 401(k) and 403(b) employer contributions)	222,903.	177,747.	34,545.	10,611
9 Other employee benefits	394,708.	314,748.	61,170.	18,790
10 Payroll taxes	188,496.	150,310.	29,212.	8,974
11 Fees for services (non-employees):				
a Management				
b Legal	16,188.		16,188.	
c Accounting	47,500.		47,500.	·
d Lobbying	75,068.	75,068.		
e Professional fundraising services. See Part IV, line 17	179,502.		THE CO	179,502
f Investment management fees		***************************************		
g Other. (If line 11g amount exceeds 10% of line 25,	200 050	000 505		<i>*</i> 000
column (A) amount, list line 11g expenses on Sch O.)	393,858	380,586.	6,384.	6,888
12 Advertising and promotion	28,866.	25,497.		3,369
13 Office expenses	05 305	10 000	F 006	1 200
14 Information technology	25,307.	18,023.	5,906.	1,378
15 Royalties	150 242	111 760	26 105	20 270
16 Occupancy	158,343.	111,769. 470,773.	26,195. 7,150.	20,379 20,473
17 Travel	498,396.	4/0,//3.	1,130.	20,413
18 Payments of travel or entertainment expenses				
for any federal, state, or local public officials	2,080.	2,080.		
19 Conferences, conventions, and meetings	68,472.	43,821.	13,696.	10,955
20 Interest	00,414.	40,041:	13,030.	10,933
21 Payments to affiliates 22 Depreciation, depletion, and amortization	163,607.	98,947.	39,923.	24,737
	27,507.	17,604.	5,502.	4,401
23 Insurance 24 Other expenses. Itemize expenses not covered	47,5076	2770048	5,504.	+1201
above. (List miscellaneous expenses in line 24e. If line)	. die			
24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)	-			
a PRINTING & PUBLICATIONS	243,765.	215,312.		28,453
b POSTAGE & SHIPPING	151,668.	130,545.	1,019.	20,104
c TELEPHONE	56,664.	43,249.	6,612.	6,803
d SUPPLIES	39,707.	31,034.	2,496.	6,177
e All other expenses	43,330.	31,432.	3,208.	8,690
25 Total functional expenses. Add lines 1 through 24e	6,892,611.	5,566,384.	793,914.	532,313
26 Joint costs. Complete this line only if the organization				
reported in column (B) joint costs from a combined				
educational campaign and fundraising solicitation.				
Check here X if following SOP 98-2 (ASC 958-720)	305,372.	<u>259,566.</u>	0.	45,806 Form 990 (2012

232010 12-10-12

Form 990 (2012)

Form 990 (2012)
Part X Balance Sheet

rai		Check if Schedule O contains a response to any question in this Part >	·	***************************************		
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		2,135,431.	1	2,930,268.
	2	Savings and temporary cash investments		774,803.	2	674,081.
	3	Pledges and grants receivable, net		2,775,114.	3	2,152,512.
	4	Accounts receivable, net		110,545.	4	138,930.
	5	Loans and other receivables from current and former officers, directors				
		trustees, key employees, and highest compensated employees. Comp				
		Part II of Schedule L		5		
	6	Loans and other receivables from other disqualified persons (as define		Parada Barana		4
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and con	ntributing	1.0		
		employers and sponsoring organizations of section 501(c)(9) voluntary			2	
		employees' beneficiary organizations (see instr). Complete Part II of So			6	
Assets	7	Notes and loans receivable, net			7	
188	8	Inventories for sale or use		***************************************	8	
-	9	Prepaid expenses and deferred charges		123,646.	9	168,450.
	10a	Land, buildings, and equipment: cost or other		194 4 1 1	-	3 4
		basis. Complete Part VI of Schedule D 10a 7,633	.431.			
	ь	Less: accumulated depreciation 10b 1,667			10c	5,965,750.
	11	Investments - publicly traded securities		······································	11	12,473,872.
	12	Investments - other securities. See Part IV, line 11			12	
	13	Investments - program-related. See Part IV, line 11			13	
	14	Intangible assets			14	}
	15	Other assets. See Part IV, line 11	78,644.	15	78,791.	
	16	Total assets. Add lines 1 through 15 (must equal line 34)		23,051,782.	16	24,582,654
	17	Accounts payable and accrued expenses	682,160.	17	832,103	
	18	Grants payable	002/200•	18	032/1031	
	19	Deferred revenue		***************************************	19	
	20	Tax-exempt bond liabilities			20	3,014,545.
មា	21	Escrow or custodial account liability. Complete Part IV of Schedule D		0,000,000	21	3/011/0101
itie.	22	Loans and other payables to current and former officers, directors, tru				1. 5
Liabilities		key employees, highest compensated employees, and disqualified pe				
Ξ.	1	Complete Part II of Schedule L			22	1 1 20 2
	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 (including federal income tax, payables to related third	************			
		parties, and other liabilities not included on lines 17-24). Complete Par	t X of			
		Schedule D		1,520,661.	25	1,118,045.
	26	Total liabilities. Add lines 17 through 25		5,671,479.	26	5,339,693.
		Organizations that follow SFAS 117 (ASC 958), check here	and			
တ		complete lines 27 through 29, and lines 33 and 34.		:		į.
920	27	Unrestricted net assets		8,893,295.	27	11,066,691.
<u>a</u>	28	Temporarily restricted net assets			28	4,553,184.
ei D	29	Permanently restricted net assets		3,621,886.	***************************************	3,623,086.
ä		Organizations that do not follow SFAS 117 (ASC 958), check here		N 3 15		
Net Assets or Fund Balances		and complete lines 30 through 34.	11 5 % H 11 5 % H 2	1		
S	30	Capital stock or trust principal, or current funds			30	1
55e	31	Paid-in or capital surplus, or land, building, or equipment fund			31	
¥.	32	Retained earnings, endowment, accumulated income, or other funds			32	
ž	33	Total net assets or fund balances				19,242,961.
	34	Total liabilities and net assets/fund balances				24,582,654.
						Form 990 (2012

Farm	990 (2012) COMMITTEE INC	04-6	T800T7	Pa	ge 12			
Par	t XI Reconciliation of Net Assets							
	Check if Schedule O contains a response to any question in this Part XI				X			
		,						
1	Total revenue (must equal Part VIII, column (A), line 12)	1	7,81	1,4	60.			
2	Total expenses (must equal Part IX, column (A), line 25)	2	6,89	2,6	11.			
3	Revenue less expenses. Subtract line 2 from line 1							
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	<u>17,38</u>	0,3	03.			
5	Net unrealized gains (losses) on investments	5	72	2,4	06.			
6	Donated services and use of facilities	6						
7	Investment expenses	7						
8	Prior period adjustments	8						
9	Other changes in net assets or fund balances (explain in Schedule O)	9	22	1,4	03.			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,							
,	column (B))	10	19,24	2,9	61.			
Pa	t 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: Cash X Accrual Other		_	. 5				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.	} .		M.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X			
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			1 2			
	separate basis, consolidated basis, or both:							
	Separate basis Consolidated basis Both consolidated and separate basis							
b	Were the organization's financial statements audited by an independent accountant?		2b	X	-			
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,	`					
	consolidated basis, or both:		1.1					
	X Separate basis Consolidated basis Both consolidated and separate basis				1.7			
c	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?		<u>2</u> c	X	-			
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch							
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	~	ļ	·				
	Act and OMB Circular A-133?		3a		X			
þ	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired audit	ì					
	ar guidite, avaloin why in Schodula A and describe any stans taken to undergo such audits		36		ŧ			

Form 990 (2012)

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

UNITARIAN UNIVERSALIST SERVICE

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury
Internal Revenue Service

Name of the organization

COMMITTEE INC 04-6186012 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv), (Complete Part II,) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi), (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2), (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. a Type I ___ Type II c Type III - Functionally integrated Type III - Non-functionally integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? g (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below. Yes No the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s). (iii) Type of organization (iv) Is the organization (v) Did you notify the (vi) Is the (i) Name of supported (ii) EIN (vii) Amount of monetary organization in col. in col. (i) listed in your (described on lines 1-9 organization in col. organization (i) organized in the support governing document? (i) of your support? above or IRC section U.S.? (see instructions)) Yes Yes No No

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

Schedule A (Form 990 or 990-EZ) 2012

232021 12-04-12 Schedule A (Form 990 or 990-EZ) 2012 COMMITTEE INC

04-6186012 Page 2

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.)

Sec	ction A. Public Support									
Cale	ndar year (or fiscal year beginning in) 📂	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total			
1	Gifts, grants, contributions, and						ĺ			
	membership fees received. (Do not									
	include any "unusual grants.")	4960691.	7862533.	5007967.	7535549.	7167089.	32533829.			
2	Tax revenues levied for the organ-									
	ization's benefit and either paid to					V				
	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	4960691.	7862533.	5007967.	7535549.	7167089.	32533829.			
5	The portion of total contributions	:	1	Service Servic						
4	by each person (other than a		ÿ.,	**	11.					
	governmental unit or publicly	20		4	Ŷ.					
	supported organization) included	,	1							
	on line 1 that exceeds 2% of the	30	Ŵ							
	amount shown on line 11,		Ę. Š.			1 4 4				
	column (f)			14			5962551.			
6	Public support. Subtract line 5 from line 4.	1 0's 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	35 / 24 - 44 - 4		i day		26571278.			
Se	ction B. Total Support									
Cale	endar year (or fiscal year beginning in) 📂	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total			
7	Amounts from line 4	4960691.	7862533.	5007967.	7535549.	7167089.	32533829.			
8	Gross income from interest,									
	dividends, payments received on					L. C.				
	securities loans, rents, royalties	and the same of th								
	and income from similar sources	198,695.	193,201.	233,905.	243,308.	245,005.	1114114.			
9	Net income from unrelated business									
	activities, whether or not the									
	business is regularly carried on	14,094.	34,752.	57,238.	74,154.	49,458.	229,696.			
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				1		33877639.			
12	Gross receipts from related activities	, etc. (see instruct	ions)		•••••	12	886,949.			
13	First five years. If the Form 990 is fo	r the organization'	s first, second, thi	rd, fourth, or fifth t	ax year as a sectio	on 501(c)(3)				
Distance A	organization, check this box and sto ction C. Computation of Pub	p here				***************************************	>			
Se	ction C. Computation of Pub	lic Support Pe	rcentage			<u> </u>				
14	Public support percentage for 2012 ((line 6, column (f) c	livided by line 11,	column (f))	.,,,,,	14	<u>78.43</u> %			
	Public support percentage from 201					15	<u>78.99 %</u>			
16	a 33 1/3% support test - 2012. If the						ht			
	stop here. The organization qualifies									
	b 33 1/3% support test - 2011. If the						, , , , , , , ,			
	and stop here. The organization qua									
17	17a 10% -facts-and-circumstances test - 2012. 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									
	b 10% -facts-and-circumstances tes		***							
	more, and if the organization meets t									
	organization meets the "facts-and-cir		=	-						
18	Private foundation. If the organization	on did not check a	box on line 13, 10	ba, 16b, 17a, or 17			ns ► 1			

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
gualify under the tests listed helow, places complete Part II.)

Calendar year (or fiscal year beginning in) 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 7 a Amounts included on lines 1, 2, and 3 received from the first paid to grant paid to	
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10a Gross income from interest, dividends, payments received on securities loans, rents, royalties	
dividends, payments received on securities loans, rents, royalties	. `
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.)	
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	hemone-d
15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f)) 15	%
16 Public support percentage from 2011 Schedule A, Part III, line 15	%
Section D. Computation of Investment Income Percentage	
	0/
	%
18 Investment income percentage from 2011 Schedule A, Part III, line 17	%
19a 33 1/3% support tests - 2012. 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	LI
b 33 1/3% support tests - 2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and	 1
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, Form 990-EZ, or Form 990-PF.

OMB No. 1545-0047

Name of the organization		Employer identification number						
	NITARIAN UNIVERSALIST SERVICE	04-6186012						
Organization type (check of	one):							
Filers of:	Section:							
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization							
	4947(a)(1) nonexempt charitable trust not treated as a private foundation							
527 political organization								
Form 990-PF	501(c)(3) exempt private foundation							
	4947(a)(1) nonexempt charitable trust treated as a private foundation							
	501(c)(3) taxable private foundation							
HAPPEN THE REAL PROPERTY OF THE PROPERTY OF TH								
, ,	is covered by the General Rule or a Special Rule. c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	lle. See instructions.						
General Rule								
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in molete Parts I and II.	oney or property) from any one						
Special Rules								
X 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, total 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 total 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 Part I, 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) (2012)

Name of organization

Employer identification number

UNITARIAN UNIVERSALIST SERVICE

04 6106010

COMMI'	PTEE INC	1 04-	-6186012
Part II	Noncash Property (see instructions). Use duplicate copies of Part II i	f additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
Summarian de la companya de la compa		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Name of org			Employer identification number				
COMMIT	RIAN UNIVERSALIST SERVI		04-6186012				
Part III	Exclusively religious, charitable, etc., indiv year. Complete columns (a) through (e) and the the total of exclusively religious, charitable, etc Use duplicate copies of Part III if additional	., contributions of \$1,000 or less for the t	(8), or (10) organizations that total more than \$1,000 for the				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
-		(e) Transfer of gift					
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee				
(a) No. from Part	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
and and a second		(a) Transfer of rith					
	Transferee's name, address, ar	(e) Transfer of gift and ZIP + 4	Relationship of transferor to transferee				
(a) No.							
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
	(e) Transfer of gift						
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
The state of the s		(e) Transfer of gift					
-	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee				
-							

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury

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.

Inspection

OMB No. 1545-0047

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.

	e organization answered "Yes," to Section 501(c)(4), (5), or (6) organizat		/ Tax), or Form 990-E	Z, Part V, line 350 (Prox	y tax), tnen
*******		AN UNIVERSALIST	SERVICE	En	ployer identification number
	COMMITT	EE INC			04-6186012
Pa	irt I-A Complete if the org	anization is exempt und	er section 501(c)	or is a section 527	organization.
2	Provide a description of the organiz Political expenditures Volunteer hours	·····		.,	
Pa	art I-B Complete if the org	anization is exempt und	er section 501(c)	(3).	
. 1	Enter the amount of any excise tax	incurred by the organization und	ier section 4955	<u> </u>	• \$
2	Enter the amount of any excise tax	incurred by organization manage	ers under section 4955	5	- \$
3	If the organization incurred a sectio	n 4955 tax, did it file Form 4720	for this year?		Yes No
	Was a correction made?				
	If "Yes," describe in Part IV.				
Pa	art I-C Complete if the org	janization is exempt und	ler section 501(c)	, except section 50	1(c)(3).
1	Enter the amount directly expended	by the filing organization for se	ction 527 exempt func	tion activities	\$
2	Enter the amount of the filing organ	ization's funds contributed to ot	her organizations for s	ection 527	
	exempt function activities	***************************************	******************************		* \$
3	Total exempt function expenditures	. Add lines 1 and 2. Enter here a	and on Form 1120-POL	mg	
	line 17b				
4	Did the filing organization file Form	1120-POL for this year?		***************************************	Yes No
5	Enter the names, addresses and en	nployer identification number (El	N) of all section 527 po	olitical organizations to w	hich the filing organization
	made payments. For each organiza	tion listed, enter the amount pai	d from the filing organi	ization's funds. Also ente	r the amount of political
E.	contributions received that were pr		, ,	•	arate segregated fund or a
	political action committee (PAC). If	additional space is needed, prov	vide information in Part	t IV.	
i i	(a) Name	(b) Address	(c) EIN	(d) Amount paid fror filing organization's funds. If none, enter	contributions received and

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

Schedule C (Form 990 or 990-EZ) 2012

LHA

Schedule C (Form 990 or 990-EZ) 2012	<u>COMMITTEE II</u>	4C		04-6	186012 Page 2
Part II-A Complete if the org		npt under sectioi	n 501(c)(3) and fil	ed Form 5768	
(election under sec	·····				
	tion belongs to an affili		Part IV each affiliated	group member's nam	e, address, EIN,
paramatan,	e of excess lobbying e				
B Check if the filing organiza	tion checked box A an	d "limited control" pro	visions apply.		
Limit	ts on Lobbying Expen	ditures		(a) Filing organization's	(b) Affiliated group totals
(The term "expend	ditures" means amour	nts paid or incurred.)		totals	iotais .
1a Total lobbying expenditures to influ	sonoo public opinion (o	race roote lobbying)		60,484.	
b Total lobbying expenditures to influ				14,584.	
c Total lobbying expenditures (add li				75,068.	
d Other exempt purpose expenditure		***************************************		6,285,230.	
e Total exempt purpose expenditure	*******************************			6,360,298.	
f Lobbying nontaxable amount. Enter				468,015.	
if the amount on line 1e, column (a) o		ying nontaxable amo		3	**
Not over \$500,000		he amount on line 1e.		45	
Over \$500,000 but not over \$1,000		0 plus 15% of the exc	ess over \$500,000.		
Over \$1,000,000 but not over \$1,5	*****	\$175,000 plus 10% of the excess over \$1,000,000.			,
Over \$1,500,000 but not over \$17,	000,000 \$225,000	\$225,000 plus 5% of the excess over \$1,500,000.			
Over \$17,000,000 \$1,000,000.					
				i	
g Grassroots nontaxable amount (en	ter 25% of line 1f)	**************************		117,004.	
h Subtract line 1g from line 1a. If zer	o or less, enter-0	******		0.	
F Subtract line 1f from line 1c. If zero	or less, enter-0	*************************	************************	0.	
j if there is an amount other than ze	ro on either line 1h or l	ine 1i, did the organiza	ation file Form 4720		
reporting section 4911 tax for this	year?		***************************************		Yes No
		raging Period Under			
	ations that made a se				
	lumns below. See the			age 4.)	
	Lobbying Expen	ditures During 4-Yea	ar Averaging Period		
Calendar year	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
(or fiscal year beginning in)	(11)	(2)	(0)	(4) 23 . 2	(0) / 0.0.
2a Lobbying nontaxable amount	389,020.	428,946.	467,034.	468.015.	1,753,015.
b Lobbying ceiling amount					
(150% of line 2a, column(e))				1	2,629,523.
c Total lobbying expenditures	6,000.	12,680.	14,894.	75,068.	108,642.
d Grassroots nontaxable amount	97,255.	107,237.	116,759.	117,004.	438,255.
e Grassroots celling amount	\$ 				
(150% of line 2d, column (e))	4	:			657,383.
		4 00=			
f Grassroots lobbying expenditures	2,000.	4,885.	7,300.	60,484.	74,669.

Schedule C (Form 990 or 990-EZ) 2012

Schedule C (Form 990 or 990-EZ) 2012 COMMITTEE INC 04-6186012 Page 3

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

For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(1	a)		(b)
of the lobbying activity.	Yes	No	An	nount
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers?			46 1:	: .
b Paid staff or management (include compensation in expenses reported on lines 1c through 1)? c Media advertisements?			·	11: ·
d Mailings to members, legislators, or the public?		1	 	
e Publications, or published or broadcast statements?	1		<u> </u>	
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?			 	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				· · · · · · · · · · · · · · · · · · ·
Other activities?	!			
j Total. Add lines 1c through 1i	21000	14		
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	· · · · <u> </u>		-	
b If "Yes," enter the amount of any tax incurred under section 4912	į.			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				*****
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		i ru-	M. M.	W W St
Part III-A Complete if the organization is exempt under section 501(c)(4), se	ction 501(c	1(5), or so	1	
501(c)(6).	01.00.100.10	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?		3	1	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answer answered "Yes." 1 Dues, assessments and similar amounts from members			i (1877-A, 1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of p expenses for which the section 527(f) tax was paid).				
a Current year		2a		
b Carryover from last year		2b		
c Total	***************	2c		
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due	s	3		
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the	e excess			
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying a	and political	1		
expenditure next year?		4		
5 Taxable amount of lobbying and political expenditures (see instructions)		5		
Part IV Supplemental Information		***************************************		
Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line	5; Part II-A (affi	liated group	o list); Part	II-A, line 2;
and Part II-B, line 1. Also, complete this part for any additional information.				
		****	·	
y'	***************************************			
	The state of the s			

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, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions.

2012
Open to Public Inspection

Name of the organization

UNITARIAN UNIVERSALIST SERVICE

Employer identification number

Par	t I Organizations Maintaining Donor Advised Fu	inds or Other Similar Funds or	Accounts Complete if the
1 641	organization answered "Yes" to Form 990, Part IV, line 6.	mad di dina di mana i ando di	Accounted Complete in the
	organization answered resitor only 990, Partir, line of	(a) Donor advised funds	(b) Funds and other accounts
4	Total number at and of user	(a) solis dallas idilas	(b) rando and onjoi adodante
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3		*****	
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writin	-	,
_	are the organization's property, subject to the organization's exclu-		
6	Did the organization inform all grantees, donors, and donor advisor	- ·	· ·
	for charitable purposes and not for the benefit of the donor or dor	•	
Par	impermissible private benefit?		
			v, ine /.
1	Purpose(s) of conservation easements held by the organization (c		
	Preservation of land for public use (e.g., recreation or educa	Processor Landson Company of the Com	
	Protection of natural habitat	Preservation of a certified	historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified of	onservation contribution in the form of a	conservation easement on the last
	day of the tax year.		4
			Held at the End of the Tax Year
	Total number of conservation easements		
b	Total acreage restricted by conservation easements		
С	Number of conservation easements on a certified historic structure		
d	Number of conservation easements included in (c) acquired after		
	listed in the National Register		
3	Number of conservation easements modified, transferred, release	d, extinguished, or terminated by the org	anization during the tax
	year -		
4	Number of states where property subject to conservation easeme	***************************************	
5	Does the organization have a written policy regarding the periodic	-	<u></u>
	violations, and enforcement of the conservation easements it hold		
6	Staff and volunteer hours devoted to monitoring, inspecting, and		
7	Amount of expenses incurred in monitoring, inspecting, and enfor		
8	Does each conservation easement reported on line 2(d) above sa		
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation e		
	include, if applicable, the text of the footnote to the organization's	s financial statements that describes the	organization's accounting for
10-	conservation easements. d III ☐ Organizations Maintaining Collections of Ar	t Wistoriaal Transuras or Othe	r Similar Accete
ra	Complete if the organization answered "Yes" to Form 990,		i Sinniai Assets.
		"""	
па	If the organization elected, as permitted under SFAS 116 (ASC 9)	**	
	historical treasures, or other similar assets held for public exhibiti		or public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describes		d bandanaa ahaash waxii a nakanda birkada ah
b	If the organization elected, as permitted under SFAS 116 (ASC 98	•	
	treasures, or other similar assets held for public exhibition, education and the second secon	mon, or research in furtherance of public	service, provide the following amounts
	relating to these items:		b • •
	(i) Revenues included in Form 990, Part VIII, line 1		
_	(ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasur		
2	-		ii, piovide
	the following amounts required to be reported under SFAS 116 (a	, -	► •
a	Revenues included in Form 990, Part VIII, line 1		
b	Assets included in Form 990, Part X		····

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, $^{232051}_{12\cdot10\cdot12}$

Schedule D (Form 990) 2012

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets; continued	Sched	dule D (Form 990) 2012 COMMITTE	E INC				04-6	186012 Page 2
3 using the organization's acquietton, accession, and other records, check any of the following that are a significant use of its collection items (check aft that apply): a				, Historical Tre	asures, or	Other \$		
Context all that apply :	3							
b Scholarly research Preservation for future generations Provides description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. During the year, did the organization solicit or receive donations of art, historical treasures, or other smallar assets to be sold to grade funds rather than to be maintained as pan of the organization collection? Yes No Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part XV, line 9, or reported an amount to Form 990, Part X X. Is 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part XY. Yes No 1b Yes Yes No 1b Yes Yes No 1b Yes Yes No 1c Seginning balance d Additions during the year 1c Ending balance 1d Yes No 1d Yes					-			
C Peaservation for furure generations 4 Provide a description of the organization collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets	i. a	Public exhibition	d	Loan or exch	nange program	ns		
C Peaservation for furure generations 4 Provide a description of the organization collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets	b	Scholarly research	е	Other				
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 answered "Yes" to Form \$90, Part IV, line \$0, or reported an amount on Form \$90, Part X, line \$21. A list he organization an aspent, trustee, custodian or other intermediary for contributions or other assets not included on Form \$90, Part X? A list he organization and aspent, trustee, custodian or other intermediary for contributions or other assets not included on Form \$90, Part X? A list be organization and the part XIII and complete the following table: A list be organization and the part XIII and complete the following table:	c	Preservation for future generations						
to be sold to alse funds rather than to be maintained as part of the organization's collection?	4	Provide a description of the organization's col	lections and explain	how they further th	ne organization	n's exemp	t purpose in Pa	art XIII.
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? Ves	5	During the year, did the organization solicit or	receive donations of	art, historical treas	sures, or other	similar as	sets	
Teported an amount on Form 990, Part X, line 21. Yes No		to be sold to raise funds rather than to be mai	ntained as part of th	e organization's co	llection?			Yes No
1a Beginning of year balance 9,740,564, 10,719,232, 9,659,685, 8,171,903, 11,308,814, 6 Administrative expenses 10,498,219, 1,243,580, 2,055,435, 1,395,809, 1,308,814, 6 Administrative expenses 5,5,136, 54,068, 51,858, 50,053, 66,324, 2 Provide the estimated percentages in line 2,008, 20,008, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20	Par	t IV Escrow and Custodial Arrang	ements. Complet	e if the organizatior	n answered "Y	es" to For	m 990, Part IV	, line 9, or
on Form 990, Part X7 of Yes, explain the arrangement in Part XIII and complete the following table: Amount c. Seginning balance d. ddditions during the year e. Distributions during the year d. Ending balance d. Distributions during the year back. d. Distributions during the year d. Distributions during the year d. Distributions during the year d. Distribution		reported an amount on Form 990, Part	X, line 21.		,,	***		
b If "Yes," explain the arrangement in Part XIII and complete the following table: Amount	1a	Is the organization an agent, trustee, custodia	n or other intermedia	ary for contribution:	s or other ass	ets not inc	luded	
C Seginning balance 1 C		on Form 990, Part X?			********		<u> </u>	Yes No
C Beginning balance 1e 1d	b	If "Yes," explain the arrangement in Part XIII a	nd complete the folio	owing table:				
d Additions during the year								Amount
c Distributions during the year f Ending balance 2 Did the organization include an amount on Form 990, Part X, line 21? 2 Did the organization include an amount on Form 990, Part X, line 21? 3 Did the organization include an amount on Form 990, Part X, line 21? 4 Describe in Part XIII. Check here if the explanation has been provided in Part XIII. 4 Describe in Part XIII. Check here if the explanation has been provided in Part XIII. 5 Porm 990, Part X, line 21? 6 (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back be Contributions (d) Three years back (e) Four years back be Contributions (e) 7, 740, 564, 10, 719, 232, 9, 669, 685, 8, 171, 903, 11, 327, 288, 678, 115, 330, 707, 1, 398, 918, 1, 634, 195, 631, 492, c Net investment earnings, gains, and losses 1, 215, 342, -11, 727, 1, 767, 922, 1, 309, 539, -2, 417, 739, 678, 197, 197, 197, 197, 197, 197, 197, 197	c	Beginning balance					1c	
F Ending balance 10 the organization include an amount on Form 990, Part X, line 21? Yes No If Yes, 'explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII Part XII 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 (d) Three years	d	Additions during the year					1d	
2a Did the organization include an amount on Form 990, Part X, line 21? Part V: Endowment Funds. Complete if the explanation has been provided in Part XIII. Part V: Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance 9,740,564, 10,719,232, 9,669,685, 8,171,903, 11,327,285, b Contributions 678,115, 330,707, 1,398,918, 1,634,105, 631,492, c Net investment earnings, gains, and losses 1,215,342, -11,727, 1,767,922, 1,309,539, -2,417,739, d Grants or scholarships 1,078,219, 1,243,580, 2,065,435, 1,395,809, 1,308,814, f Administrative expensions 56,136, 54,068, 51,858, 50,053, 60,324, g End of year balance 10,499,666, 9,740,564, 10,719,232, 9,669,685, 8,171,903, 2 Provide the estimated percentage of the current year end balance (line 1g, column (al) held as: Board designated or quasi-endowment ▶ 61,11 % b Permanent endowment ▶ 34,51 % c Temporarily restricted endowment ▶ 4,38 % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations by: (ii) unrelated organizations Describe in Part XIII the intended uses of the organization sendowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Describe in Part XIII the intended uses of the organization sendowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Describe in Part XIII the intended uses of the organization sendowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. C Leasehold improvements d Equipment See Form 990, Part X, line 10. See Form 990, Part X, line 10. See Form 990, Part X, line 10. See See See See See See See See See Se	е	Distributions during the year	.,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		1e	
Part V: Endowment Funds. Complete if the explanation has been provided in Part XIII Part V: Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance 9,740,564, 10,719,232, 9,669,685, 8,171,903, 11,327,288, b Contributions 678,115, 330,707, 1,398,918, 1,634,105, 631,492, c Net investment earnings, gains, and losses 1,215,342, -11,727, 1,767,922, 1,309,539, -2,417,739, d Grants or scholarships 0 Other expenditures for facilities and programs 1,078,219, 1,243,580, 2,065,435, 1,395,809, 1,308,814, f Administrative expenses 56,136, 54,068, 51,858, 50,053, 60,324, g End of year balance 10,499,656, 9,740,564, 10,719,232, 9,669,685, 8,171,903, 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment 61,11, % b Permanent endowment 4.38, % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations 3a(i) X 3a(ii) X 3a(ii	f	Ending balance			******************		1f	
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 (d) Three years back (d) Fact years (d) Three years back (d) Fact years back (d) Fact years back (d) Fact years back (d) Fact years (d) Three years (d) Th	2a	Did the organization include an amount on Fo	rm 990, Part X, line 2	21?				Yes No
1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back b Contributions 9,740,564, 10,719,232, 9,669,685, 8,171,903 11,327,288, 1237,288, 1634,105, 631,492, 1339,918, 1,634,105, 631,492, 1237,288, 1237,288, 1237,288, 1237,288, 1237,288, 1237,288, 1237,288, 1237,288, 1237,289, 1243,580, 2,065,435, 1,395,809, 1,308,514, 144, 1447,189, 1237,289, 1237,289, 1237,289, 1237,289, 1237,289, 1237,289, 1237,289, 1243,580, 2,065,435, 1,395,809, 1,308,514, 144, 1447,289, 1247,289, 1243,580, 2,065,435, 1,395,809, 1,308,514, 144, 1447,289, 1243,580, 2,065,435, 1,395,809, 1,308,514, 144, 1447,289, 1243,580, 2,065,435, 1,395,809, 1,308,514, 144, 1447,289, 1243,580, 2,065,435, 1,395,809, 1,308,514, 144, 1447,189, 1243,580, 2,065,435, 1,395,809, 1,308,514, 144, 1447,189, 1243,580, 2,065,435, 1,395,809, 1,308,514, 144, 1447,189, 1243,580, 2,065,435, 1,395,809, 1,308,514, 144, 1447,189, 1243,580, 2,065,435, 1,395,809, 1,308,514, 144, 1447,189, 1243,580, 2,065,435, 1,395,809, 1,308,514, 144, 1447,189, 1447,	b							
1a Beginning of year balance 9,740,564, 10,719,232, 9,669,685, 8,171,903, 11,327,288, b Contributions 678,115, 330,707, 1,398,918, 1,634,105, 631,492, c Net investment earnings, gains, and losses 1,215,342, -11,727, 1,767,922, 1,309,539, -2,417,739, d Grants or scholarships d Grants or scholarships 0 Other expenditures for facilities and programs 1,078,219, 1,243,580, 2,065,435, 1,395,809, 1,308,814, 6 Administrative expenses 56,136, 54,068, 51,858, 50,053, 60,324, g End of year balance 2 Provide the estimated percentage of the current year end balance (fine 1g, column (a)) held as: a Board designated or quasi-endowment ▶ 61.11 % b Permanent endowment № 34.51 % Temporarily restricted endowment ▶ 4.38 % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: Yes No. 3a(i) X (i) unrelated organizations 3a(i) X b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 3a(ii) X 4 Describe in Part XIII the intended uses of the organization's endowment funds. (b) Cost or other basis (other) depreciation (c) Accumulated depreciation (d) Book value depreciation 1a Land 970,000. 970,000. 970,000. 970,000. 970,000. 970,000. 970,000. 970,000. 970,000. 970,000. 970,000	Par	t V Endowment Funds. Complete if	the organization ans	wered "Yes" to For	rm 990, Part I	/, line 10.		
b Contributions 678 115 330 707 1 398 918 1 634 105 631 492 c Net investment earnings, gains, and losses 1 215 342 1 -11,727 1 767,922 1 209 539 2 -2 417,739 d Grants or scholarships 2 1 215 342 1 -11,727 1 767,922 1 209 539 2 -2 417,739 2 d Grants or scholarships 2 1 078 219 1 243 580 2 065 435 1 395 809 1 308 814 1 6 Administrative expenses 56,136 54 068 51 888 50 053 60 324 2 Provide the estimated percentage of the current year end balance (fine 1g, column (a)) held as: a Board designated or quasi-endowment ▶ 61.11 % b Permanent endowment ▶ 34.51 % c Temporarily restricted endowment ▶ 4.38 % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations ii) related organizations iii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) b Buildings 5 3.39 9, 911 1 1, 088, 001 4, 311, 910 c Leasehold improvements d Equipment 6 666, 820 579, 680 87, 140 c 596, 700 1	7.	-	(a) Current year	(b) Prior year	(c) Two years	back (d)	Three years bac	k (e) Four years back
c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs	1a	Beginning of year balance	9,740,564.	10,719,232.	9,669	685.	8,171,903	11,327,288,
d Grants or scholarships e Other expenditures for facilities and programs 1 078 219, 1 243 580, 2 065 435, 1 395 809, 1 308 814, f Administrative expenses 56 136, 54 068, 51 858, 50 053, 60 324, g End of year balance 10 499 666, 9 740 564, 10 719 232, 9 669 685, 8 171 903, Provide the estimated percentage of the current year end balance (fine 1g, column (a)) held as: a Board designated or quasi-endowment ▶ 61.11 % b Permanent endowment ▶ 34.51	þ	Contributions	678,115.	330,707.	1,398	918,	1,634,105	631,492.
e Other expenditures for facilities and programs 1,078,219, 1,243,580, 2,065,435, 1,395,809, 1,308,814, f. Administrative expenses 5,6,136, 54,068, 51,858, 50,053, 60,324, g. End of year balance 10,499,666, 9,740,564, 10,719,232, 9,669,685, 8,171,903, 2. Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quast-endowment ▶ 61,11 % b Permanent endowment ▶ 34.51 % c Temporarily restricted endowment ▶ 4,38 % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X. line 10. Description of property (a) Cost or other basis (investment) basis (investment) basis (other) c Leasehold improvements d Equipment 666,820,579,680,87,140, e Other 596,700,59	·c	Net investment earnings, gains, and losses	1,215,342,	-11,727,	1,767	,922,	1,309,539	-2,417,739,
and programs 1,078,219, 1,243,580, 2,065,435, 1,395,809, 1,308,814, f Administrative expenses 56,136, 54,068, 51,858, 50,053, 60,324, g End of year balance 10,499,666, 9,740,564, 10,719,232, 9,669,685, 8,171,903, Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ 61.11 % b Permanent endowment ▶ 34.51 % c Temporarily restricted endowment ▶ 4.38 % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations 3a(i) X (ii) related organizations 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) basis (other) depreciation 1a Land 970,000. 970,000. 970,000. b Buildings 5,399,911. 1,088,001. 4,311,910. c Leasehold improvements 666,820. 579,680. 87,140. 900.	d	Grants or scholarships						-
f Administrative expenses 56,136, 54,068, 51,858, 50,053, 60,324, g End of year balance 10,499,666, 9,740,564, 10,719,232, 9,669,685, 8,171,903, Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ 61.11 % b Permanent endowment ▶ 34.51 % c Temporarily restricted endowment ▶ 4.38 % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations 3a(i) X 3a(ii) X X 3a(iii) X X 3a(iii) X X 3a(iii) X X X X X X X X X	е	Other expenditures for facilities						
g End of year balance 10, 499, 666, 9,740,564, 10,719,232, 9,669,685, 8,171,903. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ 61.11 % b Permanent endowment ▶ 34.51 % c Temporarily restricted endowment ▶ 4.38 % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations 3ai(i) X (ii) related organizations 3ai(i) X (iii) related organizations 3ai(ii) X (iii) 3ai(ii) 3ai(ii		and programs	1,078,219,	1,243,580.	2,065	435.	1,395,809	1,308,814.
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ 61.11 % b Permanent endowment ▶ 34.51 % c Temporarily restricted endowment ▶ 4.38 % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations 3a(ii) X b if "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) depreciation 1a Land 970,000. 970,000. b Buildings 5,399,911. 1,088,001. 4,311,910. c Leasehold improvements 666,820. 579,680. 87,140. e Other 596,700. 596,700.	f	Administrative expenses	56,136,	54,068.	51	,858.	50,053	60,324,
a Board designated or quasi-endowment ▶ 34.51 % c Temporarily restricted endowment ▶ 4.38 % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations 3a(ii) X (ii) related organizations 3a(ii) X b if "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) basis (other) depreciation 1a Land 970,000 970	9	End of year balance	10,499,666.	9,740,564.	10,719	,232.	9,669,685	8,171,903.
b Permanent endowment ▶ 34.51	2	Provide the estimated percentage of the curre		(line 1g, column (a	a)) held as:			
Temporarily restricted endowment ▶ 4.38 % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations 5 If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) basis (other) 1a Land 970,000. 5 970,000. 4 970,000. 5 970,000. 6 Equipment 6 66,820. 5 79,680. 8 7,140. 6 Other 5 96,700.	а	- · · · · · · · · · · · · · · · · · · ·		_%				
The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations 5 If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) 1a Land 970,000. 5 Jecumulated depreciation 1b Buildings 5 Jecumulated depreciation 1c Land 970,000. 5 Jecumulated depreciation 1c Land 970,000. 1c Leasehold improvements d Equipment 666,820. 579,680. 87,140. e Other	b							
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 (iii) related organizations (iiii) related organizations (iiii) related organizations (iiiii) x x x x x x x x x x x x x x x x x	C	Temporarily restricted endowment	<u>1.38</u> %					
by: Yes No (i) unrelated organizations 3a(i) X (ii) related organizations 3a(ii) X (ii) related organizations 3a(ii) X (ii) related organizations (iii) x x (iii) x x (iii) x x x x x x x x		-						
(i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) basis (investment) 1a Land 970,000. 5 970,000. 5 970,000. C Leasehold improvements d Equipment 666,820. 579,680. 87,140. e Other	За	Are there endowment funds not in the posses	ssion of the organiza	tion that are held a	nd administer	ed for the	organization	
(ii) related organizations 3a(ii) X b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 3b 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land 970,000. 970,000. 970,000. b Buildings 5,399,911. 1,088,001. 4,311,910. c Leasehold improvements 666,820. 579,680. 87,140. e Other 596,700. 596,700.								
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land 970,000. Buildings 5,399,911. 1,088,001. 4,311,910. c Leasehold improvements d Equipment e Other 596,700. 596,700.		(i) unrelated organizations						
A Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value depreciation (e) Buildings (f) Building								
Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value depreciation 1a Land 970,000. 970,000. 970,000. 4,311,910. b Buildings 5,399,911. 1,088,001. 4,311,910. c Leasehold improvements d Equipment 666,820. 579,680. 87,140. e Other 596,700. 596,700. 596,700.	b				*! *** ! ** ! * * * * * * * * * * * * *			3b
Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation 970,000.							······································	
basis (investment) basis (other) depreciation 1a Land 970,000. 970,000. b Buildings 5,399,911. 1,088,001. 4,311,910. c Leasehold improvements 666,820. 579,680. 87,140. e Other 596,700. 596,700.	Pai							
b Buildings 5,399,911. 1,088,001. 4,311,910. c Leasehold improvements d Equipment 666,820. 579,680. 87,140. e Other 596,700. 596,700.		Description of property			1		1	(d) Book value
b Buildings 5,399,911. 1,088,001. 4,311,910. c Leasehold improvements 666,820. 579,680. 87,140. e Other 596,700. 596,700.	1a	Land .		97	0,000.			970.000.
c Leasehold improvements 666,820. 579,680. 87,140. e Other 596,700. 596,700.						1,08	88,001.	
d Equipment 666,820. 579,680. 87,140. e Other 596,700. 596,700.								
e Other 596,700. 596,700.			1	6.6	6,820.	57	79,680.	87,140.
	Tota			X, column (B), line	10(c).)		>	

Schedule D (Form 990) 2012

Schedule D (Form 990) 2012

2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's

liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

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

1,118,045.

Schedule D (Form 990) 2012						
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return						
1	Total revenue, gains, and other support per audited financial statements			1	9,072,813.	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains on investments	2a	722,406.			
b	and the second s	2b				
c						
d			538,947.			
e				2e	1,261,353.	
3	Subtract line 2e from line 1			3	7,811,460.	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
, a	and the second s	4a				
. b	Other (Describe in Part XIII.)	4b		1		
С	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	7,811,460.	
	rt XII Reconciliation of Expenses per Audited Financial Stateme	ents V	Vith Expenses per	Retu		
1	Total expenses and losses per audited financial statements			1	7,210,155.	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
 a		2a				
b	- · · · · · · · · · · · · · · · · · · ·			1		
				-		
d	* · · · ** · · · · · · · · · · · · · ·		317,544.	1		
-				7	317,544.	
	Add lines 2a through 2d			2e	6,892,611.	
3	Subtract line 2e from line 1		***************************************	3	0,032,011.	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1.	1			
a	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
b				-	^	
С	***************************************			4c	0.	
5				5	6,892,611.	
	rt XIII Supplemental Information					
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part II				2b; Part V, line 4; Part	
	ne 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to		•			
PA	RT X, LINE 2: UUSC ACCOUNTS FOR THE EFFECT	OF	ANY UNCERTAI	I I	AX	
PO	SITIONS BASED ON A "MORE LIKELY THAN NOT" '	THRE	SHOLD TO THE	RE	COGNITION	
			the state of the s			
OF	THE TAX POSITIONS BEING SUSTAINED BASED OF	TH V	E TECHNICAL	MER	ITS OF THE	
PO	SITION UNDER SCRUTINY BY THE APPLICABLE TA	XING	AUTHORITY.	IF	A TAX	
			10 Mg			
PO	SITION OR POSITIONS ARE DEEMED TO RESULT I	N UN	CERTAINTIES	OF	THOSE	
PO	SITIONS, THE UNRECOGNIZED TAX BENEFIT IS E	STIM	ATED BASED (N A	k	
וו כי	UMULATIVE PROBABILITY ASSESSMENT" THAT AGG	RECIA	יייסת שעיי פתיי	ፐልፕልሞ	יבּוֹז יים צ	
LI	ABILITY FOR ALL UNCERTAIN TAX POSITIONS. U	<u>USC</u>	HAS IDENTIF		ITS TAX	

Part XIII Supplemental Information (continued)	
STATUS AS A TAX EXEMPT ENTITY AND ITS DETERMINATION OF WHICH IN	COME IS
RELATED AND UNRELATED AS ITS ONLY SIGNIFICANT TAX POSITIONS AND) HAS
DETERMINED THAT SUCH TAX POSITIONS DO NOT RESULT IN UNCERTAINTY	REQUIRING
RECOGNITION. UUSC IS NOT CURRENTLY UNDER EXAMINATION BY ANY TAX	ING
JURISDICTION. UUSC'S FEDERAL AND STATE INCOME TAX RETURNS ARE G	ENERALLY
OPEN FOR EXAMINATION FOR THREE YEARS AFTER THE DATE OF FILING,	INCLUDING
EXTENSIONS.	
PART XI, LINE 2D - OTHER ADJUSTMENTS:	
RENTAL EXPENSE	317,544.
CHANGE IN VALUE OF SPLIT-INTEREST GIFTS	221,403.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	538,947.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
RENTAL EXPENSE	317,544.
	P-1
	orversorial and a second secon
	

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

OMB No. 1545-0047

Department of the Treasury

➤ Attach to Form 990. ➤ See separate instructions.

Open to Public

(Merral Revenue Service					1	in - ties
Name of the organization UNITARIAN UNIVE	מאז דפתו	CEDUITOE			Employer idem	ification number
COMMITTEE INC	VOWITOI	ORKATCE			04-61860	12
	mation on A	ctivities Out	tside the United States. Comple	te if the organ		
to Form 990, Parl				non ino organ		
		maintain record	ds to substantiate the amount of its gra	ants and other	r assistance.	
-	-		the selection criteria used to award the		Paranto.	Yes No
	Ů			~		
2 For grantmakers. Desc	ribe in Part V the	organization's	procedures for monitoring the use of its	grants and c	ther assistance ou	ıtside the
United States.						
Activities per Region. (Tr	ne following Part	I, line 3 table ca	n be duplicated if additional space is r	eeded.)		
(a) Region	(b) Number of	(c) Number of employees,	(d) Activities conducted in region		ivity listed in (d)	(f) Total
•	offices	agents, and	(by type) (e.g., fundraising, program services, investments, grants to		gram service,	expenditures for and
	in the region	independent contractors	recipients located in the region)		e specific type ce(s) in region	investments
		in region	recipients located in the region?	01 361 41		in region
•						
CENTRAL AMERICA AND			GRANTS TO RECIPIENTS			
THE CARIBBEAN	0	.0_	LOCATED IN THE REGION			168,885.
Y.						-
THE PERSON NAMED OF THE PERSON NAMED IN COLUMN			ODANIES ES DISSENTA			
EAST ASIA AND THE	0	0	GRANTS TO RECIPIENTS LOCATED IN THE REGION			33,700.
PACIFIC	<u> </u>	<u> </u>	DOCATED IN THE REGION			33,700,
MIDDLE EAST AND			GRANTS TO RECIPIENTS			
NORTH AFRICA	. 0	0	LOCATED IN THE REGION			19,661.
					·	
			GRANTS TO RECIPIENTS			
NORTH AMERICA		0	LOCATED IN THE REGION			8,000.
1			GRANTS TO RECIPIENTS			
SOUTH AMERICA	0	0	LOCATED IN THE REGION			41,000.
				[
				AT CALL		
COLUMN CARLES CARA A DESTROY			GRANTS TO RECIPIENTS LOCATED IN THE REGION	C ALCOHOLOGY TO THE CONTROL OF THE C		210 755
SUB-SAHARAN AFRICA		00	LOCATED IN THE REGION			219,755,
				The same of the sa		
•						
				ļ		
3 a Sub-total		00	**	<u> </u>		491,001.
b Total from continuation					70 - 1 20 - 1 20 - 1	
sheets to Part I		0	· · · · · · · · · · · · · · · · · · ·			
c Totals (add lines 3a			\$1.5 \$1.5			

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

Schedule F (Form 990) 2012

Page 2

INC

COMMITTEE Schedule F (Form 990) 2012

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 ecipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

04-6186012

(i) Method of valuation (book, FMV, appraisal, other) 24 (h) Description of non-cash assistance (g) Amount of 0 0 ċ ं 0 0 assistance non-cash Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by cash disbursement (f) Manner of 7,500, WIRE TRANSFER WIRE TRANSFER 40,000, WIRE TRANSFER 21,360 WIRE TRANSFER 9,780, WIRE TRANSFER 8,800 WIRE TRANSFER 7.354. MIRE TRANSFER 7,114.WIRE TRANSFER of cash grant 60,977, (e) Amount (d) Purpose of HUMANITARIAN HUMANITARIAN HUMANITARIAN HUMANITARIAN IUMANITARIAN TUMANITARIAN HUMANITARIAN HUMANITARIAN ASSISTANCE AND THE CARIBBEAN ASSISTANCE ASSISTANCE AND THE CARIBBEAN ASSISTANCE AND THE CARIBBEAN AND THE CARIBBEAN SENTRAL AMERICA TENTRAL AMERICA CENTRAL AMERICA CENTRAL AMERICA ENTRAL AMERICA ENTRAL AMERICA PENTRAL AMERICA ENTRAL AMERICA (c) Region (b) IRS code section and EIN (if applicable) (a) Name of organization

the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

Enter total number of other organizations or entitles

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Schedule F (Form 990) 2012

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INC COMMITTEE

(i) Method of valuation (book, FMV, appraisal, other) Page 2 (h) Description of non-cash assistance Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1) (g) Amount of non-cash assistance 0 0 ୍ଦ o Ö o 04-6186012 cash disbursement 10,000, WIRE TRANSFER (f) Manner of 23,200, WIRE TRANSFER 19 661 WIRE TRANSFER 8,000 WIRE TRANSFER WIRE TRANSFER 10,500, WIRE TRANSFER 000 9 of cash grant (e) Amount (d) Purpose of grant SAST ASIA AND THE HUMANITARIAN TUMANITARIAN SAST ASIA AND THE HUMANITARIAN HUMANITARIAN HUMANITARIAN HUMANITARIAN ASSISTANCE ASSISTANCE SSISTANCE ASSISTANCE SSISTANCE ASSISTANCE MIDDLE EAST AND (c) Region NORTH AMERICA SOUTH AMERICA SOUTH AMERICA TORTH AFRICA ACIFIC PACIFIC (b) IRS code section and EIN (if applicable) (a) Name of organization Schedule F (Form 990) Part

o

15,000 WIRE TRANSFER

TUMANITARIAN

ASSISTANCE

SOUTH AMERICA

10,000 WIRE TRANSFER

HUMANITARIAN

ASSISTANCE

SOUTH AMERICA

26 068 WIRE TRANSFER

HUMANITARIAN

SUB-SAHARAN

AFRICA

ASSISTANCE

232182 05-01-12

SERVICE	
UNIVERSALIST	INC
UNITARIAN	COMMITTEE

Schedule F (Form 990)	COMMITTEE		UNIVERSALIST SERVICE INC		04-6186012	36012		Page 2
Part II Continuation c	of Grants and Other	Assistance to Organiz	Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States, (Schedule F (Form 990), Part II, line	United States.	(Schedule F (Form 9	30), Part II, line 1)		-
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)
		GUB-SAHARAN AFRICA	HUMANITARIAN ASSISTANCE	28 200.	28 200, WIRE TRANSFER	0		
	:	SUB-SAHARAN AFRICA	HUMANITARIAN ASSISTANCE	28 000	28 000, WIRE TRANSFER	0		
			HUMANITARIAN ASSISTANCE	27,587,	WIRE TRANSFER	*0		
		SUB-SAHARAN AFRICA	HUMANITARIAN ASSISTANCE	26, 125,	26 125, WIRE TRANSFER	0		
		SUB-SAHARAN AFRICA	HUMANITARIAN ASSISTANCE	25,000,	WIRE TRANSFER	0		
	P	SUB-SAHARAN AFRICA	HUMANITARIAN ASSISTANCE	20,000,	20,000, WIRE TRANSFER	0		
	18	SUB-SAHARAN AFRICA	HUMANITARIAN ASSISTANCE	35,975,	35,975. WIRE TRANSFER	Û		
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UNITARIAN UNIVERSALIST SERVICE TRITTARIAN TENTOMMITTEE INC

04-6186012

Schedule F (Form 990) 2012

Page 3

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AND MAINTAINAINA

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.

(h) Method of valuation (book, FMV, appraisal, other) (g) Description of non-cash assistance (f) Amount of non-cash assistance (e) Manner of cash disbursement (c) Number of (d) Amount of recipients cash grant (b) Region (a) Type of grant or assistance

Schedule F (Form 990) 2012

Schedu	lle F (Form 990) 2012 COMMITTEE INC	<u>04-6186012</u>	Page 4
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	X No
	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	X 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	X 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, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Yes	X 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	X 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	X No

Schedule F (Form 990) 2012

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); 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.
SCHEDULE F, PART II, LINE 2:
THE NUMBER OF GRANTEES LISTED ON PART II, LINE 2 REPRESENTS THE NUMBER
OF RECIPIENT ORGANIZATIONS, NOT THE NUMBER OF GRANTS MADE.

SCHEDULE G

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

lies , lines 17, 18, or 19.

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.

Open To Public Inspection

OMB No. 1545-0047

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions. Name of the organization UNITARIAN UNIVERSALIST SERVICE Employer identification number COMMITTEE INC 04-6186012 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990 EZ filers are not Part I required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply, X Mail solicitations e X Solicitation of non-government grants X Internet and email solicitations ____ Solicitation of government grants X Phone solicitations g X Special fundraising events X In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? X 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. (v) Amount paid (iii) Did (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (iii) Activity to (or retained by) have custody or entity (fundraiser) fundraiser from activity ar control of organization contributions? listed in col. (i) INTEGRATED DIRECT MARKETING -Yes No 1250 CONNECTICUT AVE. NW DONOR MARKETING 1,460,761 104,320 1 356 441. PUBLIC INTEREST COMMUNICATIONS - 7700 PHONE SOLICITATION 208.761 75,182 133 579. 1,669,522, 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

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

SEE PART IV FOR CONTINUATIONS

Schedule G (Form 990 or 990-EZ) 2012

232081 01-07-13

or rundraising event contributions and dros		EZ, lines 1 and 6b. List e	IV, line 18, or reported revents with gross receip	
	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through
				col. (c))
	(event type)	(event type)	(total number)	
Pross receipts				
Contributions				
ess: Contributions				
Bross income (line 1 minus line 2)				
Cash prizes				
, , ,				
loncash prizes		1		AAAAAA AAAAA AAAAA AAAAA AAAAA AAAAA AAAA
Rent/facility costs				
ood and beverages				
Intertainment				***
Other direct expenses				,
Direct expense summary. Add lines 4 through				1
Net income summary. Combine line 3, column Gaming. Complete if the organization a	Inswered "Yes" to Forn	n 990, Part IV, line 19, or i	eported more than	
\$15,000 on Form 990-EZ, line 6a.			,	
	(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (ad
	(a) Dirigo	bingo/progressive bingo	(c) Other garming	col. (a) through col. (
Gross revenue				
Dash prizes				
24311 p11263				
Noncash prizes				
Rent/facility costs	Annual Control of the		4-1-	
Other direct expenses	Yes %	Yes %	Yes %	h 1 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
/olunteer labor	No No	No No	No No	
	Learness 2 V V	The second secon	1100	
Direct expense summary. Add lines 2 through	5 in column (d)	(*************************		(
				-
	, column d, and line 7			
Net gaming income summary. Combine line 1				
r the state(s) in which the organization operat				Vac I
or the state(s) in which the organization operate organization licensed to operate gaming ac	tivities in each of these	states?		Yes 🔲
or the state(s) in which the organization operate organization licensed to operate gaming ac	tivities in each of these	states?		Yes I
or the state(s) in which the organization operate organization licensed to operate gaming ac	tivities in each of these	states?		Yes 1
or the state(s) in which the organization operate organization licensed to operate gaming actor," explain:	tivities in each of these	e states?		
or the state(s) in which the organization operate organization licensed to operate gaming actor," explain:	tivities in each of these	e states?	year?	
r the state(s) e organizatio o," explain:	on licensed to operate gaming ac		on licensed to operate gaming activities in each of these states?	on licensed to operate gaming activities in each of these states?

	r 990-EZ) 2012 COMMITTEE INC 0	4-618	6012	Page 3
11 Does the organization	on operate gaming activities with nonmembers?		Yes	No
12 Is the organization a	a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed			
to administer charita	able gaming?		Yes	No
13 Indicate the percent	tage of gaming activity operated in:			
a The organization's f	acility	15	la	%
b An outside facility		18	ь	%
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	on have a contract with a third party from whom the organization receives gaming revenue?	<u> </u>	Yes	No
b If "Yes," enter the a	mount of gaming revenue received by the organization 🕨 \$ and the amoun	t		
	retained by the third party > \$			
c If "Yes," enter name	e and address of the third party:			
Name >			······································	
Address >				
16 Gaming manager int	formation.			
16 Gaming manager inf	rormation;			
Name >				
Name P				
Gamina manager ca	ompensation 🕨 \$			
adding manager of	in periodicin ()			
Description of service	ces provided 🕨			
,	ces provided >	***************************************		

Director/offic	per Employee Independent contractor			
17 Mandatory distribut	ions:			
a Is the organization r	required under state law to make charitable distributions from the gaming proceeds to			
retain the state gam	ning license?		Yes	☐ No
b Enter the amount of	f distributions required under state law to be distributed to other exempt organizations or spent in t	he		
organization's own e	exempt activities during the tax year 🕨 \$			
Part IV Suppleme	intal Information. Complete this part to provide the explanations required by Part I, line 2b, column	ns (iii) and	(v), and	Part III,
	, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional inform			
SCHEDULE G, I	PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAI	SERS:		
/ T \				
(I) NAME OF I	FUNDRAISER: INTEGRATED DIRECT MARKETING	·		
יד א איז מיני מיני א				
(I) ADDRESS (OF FUNDRAISER:	A		***************
1250 CONNECT	ICUT AVE. NW, STE. 200, WASHINGTON, DC 20036			
TADO COMMECT.	ICUT AVE. NW, STE. 200, WASHINGTON, DC 20036			
(I) NAME OF I	FUNDRAISER: PUBLIC INTEREST COMMUNICATIONS			
<u> </u>	TOTAL			
(I) ADDRESS (OF FUNDRAISER:			
7700 LEESBURG				
232083 01-07-13	Cabadula A	/C 00	0.000	E71 0040

SCHEDULE (Form 990)

OMB No. 1545-0047

Open to Public

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Employer identification number Inspection Attach to Form 990. Name of the organization UNITARIAN UNIVERSALIST SERVICE Department of the Treasury Internal Revenue Service

COMMITTEE	INC						04-6186012
Part I General Information on Grants and Assistance	nd Assistance	Month Annual Control of the Control				and the second s	
1 Does the organization maintain records to substantiate the amount	o substantiate the	s amount of the grants	or assistance, the	grantees' eligibility	for the grants or ass	of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	Proposator to a second
criteria used to award the grants or assistance?	tance?						X Yes No
2 Describe in Part IV the organization's procedures for monitoring the	cedures for moni	toring the use of grant	use of grant funds in the United States.	States,			
artII	Sovernments an	d Organizations in the	United States, C	omplete if the orga	nization answered ")	res" to Form 990, Part	IV, line 21, for any
recipient that received more than \$5,000. Part II can be duplicated if additional space is needed	5,000. Part II can	be duplicated if additi	onal space is need	led.	The second secon		
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AA PARIS	100		The state of the s	The state of the s			SUPPORT UULM CA TO
UII LEGISLATIVE MINISTRY CA							MOBILIZE UUS TO HELP WIN
717 K STREET SUITE 514							A HUMAN RIGHT TO WATER
- 77	87-0694546	501(C)(3)	12,200.	0			LEGISLATIVE VICTORY IN CA
COMMINITY WATER CENTER							SUPPORT A LEGISLATIVE
311 W MITRRAY AVENUE							VICTORY IN CA ON THE
WICKETA A 03001	80-0267674	501(C)(3)	15,400.	0			HUMAN RIGHT TO WATER
VISABLA, CA JAZAL							IDENTIFY ORGANIZATION
BILL OF RICHTS DEFENSE COMMITTEE						•	WORKING TO PROVIDE
S ROTHOR ST SHITTE A							SUPPORT FOR SURVIVORS IN
NORTHEAMPTON MA 01060	27-0042821	501(C)(3)	27,000.	0		-	THEIR HEALING PROCESS
NOIN MARKET TORY - THE COMMENTS		1					
HORDERLINKS							
COO O COM NATIONALIA							
mircon az 84701	86~0760505	501(C)(3.)	15,295,	0			CSJ BORDER LINKS PROGRAM
		1					RESEARCH AND EDUCATIONAL
FOOD CHAIN WORKERS ALLIANCE							MATERIALS ON POULTRY
1730 W. OLYMPIC BLVD. #300							INDUSTRY/FOOD CHAIN
THE STATE OF THE S	90-0728464	501(C)(3)	10 500.	0		-	WORKERS
LOS CAVOLLISTO, CIL COLO			ALL MANAGEMENT OF THE PROPERTY		A TOTAL CONTRACTOR OF THE PARTY		
LET JUSTICE ROLL				DA PURAMA			LIVING WAGE CAMPAIGNS AND
1550 S. INDIANA AVE.							LIVING WAGE EMPLOYER
CHICAGO, IL 60605	26-2888798	501(C)(3)	14,000.	0.	delist from property of dissimum delivers and there is not the second		PROJECT
	nd government or	ganizations listed in th	e line 1 table				•
	listed in the line	1 table					<u></u>
A For Paperwork Redu	see the Instruct	Ĭ,					Schedule I (Form 990) (2012)
SEE PART IV FOR COLUMN	IV FOR CO		SCRIPTION	SQ.			
232101 12-18-12			38				

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SERVICE	
UNIVERSALIST	CZ
UNITARIAN L	COMMITTEE

Schedule I (Form 990) COMMITTEE INC Part III Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	TNC TNC Assistance to Go	vernments and Organia	nizations in the Un	nited States (Sche	odule I (Form 990), Pa		04-6186012 Page 1
(a) Name and address of organization or government	(b) EiN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MASSASCHUSETTS GLOBAL, ACTION (MGA) 33 HARRISON AVE., 4TH FLOOR BOSTON, MA 02111	04~3454144	501(C)(3)	25,000.	0		·	BOSTON HRW POLICY AND LOCAL UTILITY ADVOCACY
NORTHWEST ARKANSAS WORKERS' JUSTICE CENTER (NWAWJC) - 2200 W. SUNSET #B-4 - SPRINGDALE, AZ 72762	20-3709967	501(C)(3)	27,500.	0			EMPOWERING WORKER LEADERS TO ORGANIZE FOR BETTER WAGES AND SAFER WORKPLACES
2	01-0939141	501(C)(3)	20,000.	0			TRANSNATIONAL WOMEN RESTÂURANT WORKERS' PROJECT
SOUTHERN ALTERNATIVES AGRICULTURAL COOPERATIVE (SAAC) - P.O. BOX 426 - LESLIE, GA 31764	27-0106848	N/A	5,000.	0			BUILDING CAPACITY OF A RURAL SOUTHERN PECAN CO-OP
TASSC INTERNATIONAL 4121 HAREWOOD ROAD NE, SUITE B WASHINGION, DC 20017	30~0000~08	501(C)(3)	43,180.	0		-	BUILD AND ORGANIZE A STRATECY FOR A COALITION OF ORGANIZATIONS WORKING ON US ACCOUNTABILITY FOR
UU UNITED NATIONS OFFICE 777 UNITED NATION PLAZA 7G NEW YORK, NY 10017	04-2103733	501(C)(3)	19,142.				CSJ SPRING SEMINAR
					The state of the s		Schedule I (Form 990)

UNITARIAN UNIVERSALIST SERVICE FINITALDIAN FIL

04-6186012 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. Schedule I (Form 990) (2012) Part III

Page 2

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G. Edu

(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, Part III, column (b), and any other additional information.	de the information	required in Part I,	line 2, Part III, colum	(b), and any other additional inf	ormation.
SCHEDULE I, PART I, LINE 2: EACH GRANT HAS A TERM A FIII. NARRATIVE AND FINANCIAL REPORT	RANT HAS	A TERM LIMIT. F IS REOUESTED	1	THAT DOCUMENTS HOW	
THE FUNDS WERE USED. MONITORING AND	D EVALUATION	ION	E PROJECT	IS ONGOING	
THROUGHOUT THE TERM OF THE GRANT.					
WARACTER TO THE TAXABLE WARACT					And the Annual A

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: TASSC INTERNATIONAL

(H) PURPOSE OF GRANT OR ASSISTANCE: BUILD AND ORGANIZE A STRATEGY FOR A

TORTURE COALITION OF ORGANIZATIONS WORKING ON US ACCOUNTABILITY FOR

232102 12-18-12

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Schedule I (Form 990) (2012)

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" to Form 990,

Part IV, line 23.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Attach to Form 990. See separate instructions. UNITARIAN UNIVERSALIST SERVICE

COMMITTEE INC

Employer identification number 04-6186012

Pa	rt I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,		. 3	-
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			- 1
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			-
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,			
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		Ĺ
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee X Written employment contract			:
	Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
	Design the case of the second line of the Control of the second to the other than the other			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filling			
_	organization or a related organization:	4-		37
ä	Receive a severance payment or change-of-control payment? Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4a 4b		X
n	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
U	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	40		- 21
	The feet to any of three Ha of the persons and provide the applicable attraction cash notifier and the			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
a	The organization?	5a		X
	Any related organization?	5b		X
	If "Yes" to line 5a or 5b, describe in Part III.	;		
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation		1	
	contingent on the net earnings of:			
a	The organization?	6a		X
b	Any related organization?	6b		X
	If "Yes" to line 6a or 6b, describe in Part III.	71/96 57/40		
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2012

COMMITTEE INC

Schedule J (Form 990) 2012

04-6186012

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11.

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

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

CHARLES TO A CONTROL OF THE CONTROL		(B) Breakdown of W	W-2 and/or 1099-MISC compensation	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	beneirs	(7) (0)(8)	reported as deferred in prior Form 990
T 1111 O T 1 T T T T T T T T T T T T T T	6	179 954	0.	0	39,848	14,828.	234,630.	0
(1) WILLIAM SCHOLZ PRESIDENT & CEO		••• 1	• 0	0	0	* 0	0	0
	(E) (S							**************************************
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	(III)		The survey of the second secon	Adda ad Assessment Property Co.	A THE PARTY OF THE	A CALL PROPERTY OF THE PARTY OF		NOTE OF THE PARTY
	8					The state of the s	And the state of t	
and the second s						in the control of the	Schedu	Schedule J (Form 990) 2012

(g) Defeased (h) On behalf (i) Pooled Schedule K (Form 990) 2012 Yes No financing Employer identification number × OMB No. 1545-0047 2012 Open to Public ž ĝ Inspection 04-6186012 Yes No × of issuer Yes Yes 2 × Yes Š ĝ 3,500,000.OFFICE BUILDING O (f) Description of purpose Ö Yes Yes Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI. PURCHASE OF Ŷ See separate instructions. No 8 Supplemental Information on Tax-Exempt Bonds Yes Yes (e) Issue price 500,000. 47,000. 3,453,000 × M × S N Š 2009 05/17/07 ⋖ (d) Date issued 3 Yes Yes 43 × **>**4 M Year of substantial completion UNITARIAN UNIVERSALIST SERVICE 04-3431814NONEAVAIL 282121 12-17-12 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. (c) CUSIP# Does the organization maintain adequate books and records to support the final allocation of proceeds? Are there any lease arrangements that may result in private business use of Was the organization a partner in a partnership, or a member of an LLC, Attach to Form 990. (b) Issuer EIN Were the bonds issued as part of an advance refunding issue? Were the bonds issued as part of a current refunding issue? which owned property financed by tax-exempt bonds? COMMITTEE INC Has the final allocation of proceeds been made? Working capital expenditures from proceeds Credit enhancement from proceeds Capital expenditures from proceeds Capitalized interest from proceeds Amount of bonds legally defeased Gross proceeds in reserve funds MASS. DEVELOPMENT Proceeds in refunding escrows Issuance costs from proceeds (a) Issuer name Part III Private Business Use A FINANCE AGENCY Amount of bonds retired Other unspent proceeds bond-financed property? Total proceeds of issue Other spent proceeds Name of the organization **Bond Issues** Proceeds Department of the Treasury Internal Revenue Service SCHEDULEK (Form 990) Part II Part 4 ß 9 **!** ¢ 9 - 4 1 Ω ပ ۵ ψ, 2 ಛ 5 9

UNITARIAN UNIVERSALIST SERVICE

COMMITTEE INC

Schedule K (Form 990) 2012

Page 2

04-6186012

ŝ å Yes Yes % % % % 2 ŝ O O Yes Yes % % % % ŝ S Yes Yes % % % % ₽× ŝ 000 00 00. × × × × × Yes Yes × × counsel to review any management or service contracts relating to the financed property? Are there any research agreements that may result in private business use of bond-financed property? A b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside Enter the percentage of financed property used in a private business use as a result of governmental person other than a 501(c)(3) organization since the bonds were issued? b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed Has there been a sale or disposition of any of the bond-financed property to a nonc If "Yes" to line Ba, was any remedial action taken pursuant to Regulations sections ******************************** Has the organization established written procedures to ensure that all nonqualified entities other than a section 501(c)(3) organization or a state or local government If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate bonds of the issue are remediated in accordance with the requirements under counsel to review any research agreements relating to the financed property? Enter the percentage of financed property used in a private business use by unrelated trade or business activity carried on by your organization, another 3a Are there any management or service contracts that may result in private Does the bond issue meet the private security or payment test? section 501(c)(3) organization, or a state or local government Regulations sections 1.141-12 and 1.145-27 business use of bond-financed property? If "No" to line 1, did the following apply? Part III Private Business Use (Continued) Has the issuer filed Form 8038-T? computation was performed Total of lines 4 and 5 1.141-12 and 1.145-2? b Exception to rebate? a Rebate not due yet? No rebate due? Part IV Arbitrage 83 O ĸ 4 9

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Schedule K (Form 990) 2012

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Has the organization or the governmental issuer entered into a qualified

Is the bond issue a variable rate issue?

b Name of provider

d Was the hedge superintegrated?

Term of hedge

e Was the hedge terminated?

hedge with respect to the bond issue?

4a

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UNITARIAN UNIVERSALIST SERVICE COMMITTEE INC

Page 3 04-6186012 Part IV. Arbitrage (Continued) Schedule K (Form 990) 2012

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	Yes	No	Yes	No	Yes	No	Yes	No
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		×						
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c Term of GIC		ALLEA						
ulatory safe harbor for establishing the fair								
6 Were any gross proceeds invested beyond an available temporary period?		×						
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	Yes	No	Yes	No	Yes	N	Yes	No
Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable requilations?	×							
Part VI Supplemental Information, Complete this part to provide additional information for responses to questions on Schedule K (see instructions).	esponses to	questions on	Schedule K (see instructio	ns).			
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(Form 990 or 990-EZ)

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.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

UNITARIAN UNIVERSALIST SERVICE

Attach to Form 990 or 990-EZ.

Employer identification number 04-6186012

COMMITTEE INC DESCRIPTION OF ORGANIZATION MISSION: FORM 990, PART I, LINE 1, 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, OR RELIGION MARGINALIZE THEM FROM ACCESSING MAINSTREAM AID. SEED GRANTS FROM UUSC FUND INNOVATIVE PROJECTS BUILDING ON LOCAL CAPACITY THAT OTHER ORGANIZATIONS CAN LEARN FROM, ADAPT, AND BUILD UPON. IN FY13, UUSC RESPONDED TO DISASTERS AND CONFLICTS IN HAITI, JAPAN, AND PUNTLAND. UUSC ALSO CONTINUED TO WORK IN NEGLECTED CONFLICTS IN UGANDA, MYANMAR, DARFUR, AND KENYA. IN HAITI, THE 65 HAITIAN TRAINERS IN TRAUMA RESILIENCY HAVE NOW FORMED TRAINING GROUPS THAT ARE ABLE TO EDUCATE OVER 700 PEOPLE ON TRAUMA RESILIENCY. UUSC PARTNER GEAD, WAS GIVEN SUPPORT TO EXTEND THE TIRE GARDEN APPROPRIATE TECHNOLOGY TO PORT AU PRINCE, ENABLING URBAN SURVIVORS OF THE EARTHOUAKE TO GROW FOOD. IN TOTAL, FOUR ECO-VILLAGES, SUSTAINABLE AGRICULTURAL COMMUNITIES FOR EARTHQUAKE SURVIVORS HAVE BEEN BUILT IN THE CENTRAL PLATEAU. WITH UUSC FUNDS, 50 VULNERABLE YOUTH, SURVIVORS OF THE EARTHOUAKE HAVE BEEN TRAINED IN VIABLE LIVELIHOODS AND HAVE EARNED INCOME AS PLUMBERS, CARPENTERS, TAILORS AND COOKS. IN KENYA, UUSC LAUNCHED AN INTERFAITH PROVINCE WIDE PEACE BUILDING PROGRAM TARGETING

,000 RESIDENTS OF KAGAMEGA THAT WAS A MAJOR FACTOR TO THE LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2012)

PEACEFUL PRESIDENTIAL ELECTIONS IN THAT AREA IN STARK CONTRAST TO THE 2007-2008 PRESIDENTIAL ELECTIONS. IN PUNTLAND, UUSC PROVIDED SAFE SCHOOLING AND HOUSING IN A GIRLS HOSTEL TO 100 GIRLS FROM MINORITY ETHNIC GROUPS, DISPLACED BY THE VIOLENCE AND FAMINE, PROTECTING THEM FROM EARLY MARRIAGE AND SEXUAL ABUSE. THE UUSC SUPPORTED CORE TRAINING GROUP OF IMAMS AND WOMEN LEADERS EDUCATED YOUTH IN HALF OF THE HIGH SCHOOLS IN NYALA DARFUR TO USE ISLAMIC VALUES TO PROTECT WOMEN FROM DOMESTIC AND GENDER-BASED VIOLENCE IMPACTING OVER 7,000 STUDENTS. IN JAPAN, UUSC LAUNCED A DYNAMIC DOMESTIC VIOLENCE HOTLINE FOR NON-JAPANESE SPEAKING IMMIGRANT WOMEN IN THE TSUNAMI AFFECTED AREA WHO HAVE BEEN MARGINALIZED BECAUSE OF LANGUAGE. THE HOTLINE SPECIFICALLY TARGETS FILIPINA, SOUTH AMERICANS, ZAINICHI KOREANS, ZAINICHI IMMIGRANTS, CHINESE, VIETNAMESE, AND THAI WOMEN. DURING THE FIRST YEAR THE HOTLINE AIMS TO REACH 10,000 WOMEN EITHER DIRECT OR INDIRECTLY. THROUGH THE HOTLINE, THEY ARE CONNECTED WITH SERVICES AND SUPPORT. WITH UUSC SUPPORTED TRAINING, 50 VILLAGES AND 20,000 VILLAGERS IN NORTHERN UGANDA HAVE MODELED SUCCESSFUL RESOLUTION OF THE LAND CONFLICTS TEARING OTHER COMMUNITIES APART, DRAMATICALLY REDUCED THE LEVEL OF DOMESTIC VIOLENCE AND ARE TRAINING NEARBY VILLAGES IN THESE KEY SKILLS AT THEIR OWN REQUEST. UUSC BEGAN A PEACE BUILDING PROGRAM BETWEEN MUSLIMS AND BUDDHISTS IN MYANMAR IN BOTH YANGON AND MANDALAY TO HALT THE DEADLY VIOLENCE BETWEEN THOSE TWO RELIGIOUS COMMUNITIES.

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 SUPPORTING MODELS

FOR IMPLEMENTATION, THE DEVELOPMENT OF NEW LAW, AS WELL AS EFFORTS TO

Employer identification number 04-6186012

ADDRESS VIOLATIONS OF THESE HUMAN RIGHTS AT THE LOCAL LEVEL. ACCESS TO

SAFE, SUFFICIENT AND AFFORDABLE WATER IS A FUNDAMENTAL HUMAN RIGHT

ESSENTIAL TO HEALTH AND THE ENVIRONMENT. THE LEGACY OF NEGLECT OF

MARGINALIZED COMMUNITIES RESULTS IN LACK OF BASIC NEEDS BEING MET,

VULNERABLE POPULATIONS SUCH AS CHILDREN AND THE ELDERLY NOT HAVING

ACCESS, AND EXISTING DRINKING WATER SOURCES BEING CONTAMINATED
RENDERING THEM UNFIT FOR HUMAN CONSUMPTION. THIS YEAR UUSC PROVIDED

SUPPORT FOR 12 PARTNERS IN AFRICA, THE AMERICAS, AND ASIA. FOR EXAMPLE,

THE SUPPORT HELPED CIVIL-SOCIETY ORGANIZATIONS TO IMPLEMENT NEW STATE

WATER POLICY IN CALIFORNIA POTENTIALLY AFFECTING 11 MILLION PEOPLE,

MONITOR AND REACH AGREEMENT TO REMEDIATE MINING IMPACTS ON DRINKING

WATER IN GUATEMALA AFFECTING 41 COMMUNITIES, SUPPORTED SUCCESSFUL HUMAN

RIGHTS CASES IN MEXICO, DEVELOP A HUMAN RIGHT TO WATER IN THE NATIONAL

CONSTITUTIONAL PROCESS IN TANZANIA, AND CONSTITUTIONAL IMPLEMENTATION

IN BOLIVIA AND ECUADOR.

FORM 990, PART III, LINE 4C:

ECONOMIC JUSTICE - UUSC SUPPORTS GROUPS IN THE UNITED STATES AND

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, WORKED WITH 50 YOUTH AT RISK, AS WELL

AS WITH OTHER HEADS-OF-HOUSEHOLDS, TO DO CONSISTENT TRAINING AND

DEVELOPMENT TO PREVENT CHILD LABOR AND ENCOURAGE CHILDREN TO CONTINUE

PURSUING EDUCATION. UUSC'S PARTNER THE KENYA NATIONAL ALLIANCE OF

STREET VENDORS AND INFORMAL TRADERS PLAYED A MAJOR ROLE IN THE DECEMBER

2012 PASSAGE OF THE MICRO AND SMALL ENTERPRISES (MSE) BILL, ITS

232212 01-04-13

Employer identification number 04-6186012

MATIONAL CHAIRMAN SIMON SANGALE OLE NASIEKU WAS APPOINTED BY THE

MINISTER OF LABOR TO HELP REPRESENT KENYA'S 13 MILLION INFORMAL TRADERS

ON THE MSE AUTHORITY BOARD FOR A PERIOD OF THREE YEARS. UUSC 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 RESTAURANT INDUSTRIES. WITH UUSC'S

SUPPORT, THE RESTAURANT OPPORTUNITIES CENTERS UNITED CONTINUED THEIR

WORK WITH WOMEN RESTAURANT WORKERS AND IS CURRENTLY DEVISING A PLAN TO

ADDRESS THE ISSUE OF ACCESSIBLE AFFORDABLE CHILDCARE BY RESTAURANT

WORKERS IN PARTNERSHIP WITH THE NATIONAL DOMESTIC WORKERS ALLIANCE.

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 SUPPORTING CITIZEN ENGAGEMENT AND BUILDING MOVEMENTS. UUSC SUPPORTED FIVE PARTNERS IN THE UNITED STATES AND NORTH AFRICA. IN EGYPT, UUSC SUPPORTED A LOCAL HUMAN RIGHTS ORGANIZATION TO DEVELOP A TRANSITIONAL JUSTICE PROJECT TO ADDRESS ENTRENCHED CULTURAL, POLITICAL, AND SOCIAL CONFLICT. UUSC ALSO PARTNERED WITH HUMAN RIGHTS ACTIVISTS TO SUPPORT THE CREATION OF ONLINE WEB PORTAL AS A RESOURCE FOR HUMAN RIGHTS AND CIVIL LIBERTIES ACTIVISTS IN THE MIDDLE EAST AND NORTH AFRICA. DOMESTICALLY, UUSC SUPPORTED TWO REGIONAL GATHERINGS OF 35 ACTIVISTS WHO CAME TOGETHER TO SHARE STRATEGIES FOR PREVENTING CIVIL LIBERTIES ABUSES AT THE LOCAL LEVEL AND WORK TOGETHER ACROSS DIFFERENCE ON CAMPAIGNS SUCH AS DETENTION CENTERS, DRONES AND POLICE ACCOUNTABILITY. UUSC BROUGHT TOGETHER ACTIVISTS AND KEY INFLUENCERS INCLUDING OVER 190

Schedule O (Form 990 or 990-EZ) (2012)

232212 01-04-13

Employer identification number 04-6186012

FAITH LEADERS TO PRESSURE MEMBERS OF THE SENATE SELECT COMMITTEE ON INTELLIGENCE TO MAKE THE REPORT ON THE US GOVERNMENT'S USE OF TORTURE PUBLIC THROUGH COORDINATED GRASSROOTS ACTION. IN SAN ANTONIO, TX AND TUSCON, AZ, UUSC SUPPORTED GATHERINGS OF SURVIVORS OF TORTURE AND COMMUNITY ALLIES TO CREATE COMMUNITIES OF HEALING AT THE LOCAL LEVEL AND DEVELOP PRIORITIES FOR A NATIONAL ADVOCACY STRATEGY AROUND THE SURVIVORS OF TORTURE IN IMMIGRATION DETENTION. EXPENSES \$ 701,463. INCLUDING GRANTS OF \$ 98,283. REVENUE \$ 0.

COLLEGE OF SOCIAL JUSTICE - THE MISSION OF THE COLLEGE IS TO BUILD THE CAPACITY OF UNITARIAN UNIVERSALISTS AND OTHERS TO CATALYZE JUSTICE THROUGH SERVICE LEARNING JOURNEYS AND OTHER HANDS-ON JUSTICE EDUCATION PROGRAMS THAT ARE GROUNDED IN PERSONAL SPIRITUAL PRACTICE AND UNITARIAN UNIVERSALIST PRINCIPLES. PROGRAMS WELCOME ACTIVISTS OF ANY AGE WITH A SPECIAL EMPHASIS ON ENCOURAGING YOUTH, YOUNG ADULTS, SEMINARIANS AND RELIGIOUS PROFESSIONALS TO MAKE SOCIAL JUSTICE WORK PART OF THEIR IDENTITY AND CALLING. THE COLLEGE CONDUCTED 11 SERVICE-LEARNING TRIPS IN FISCAL 2013, WITH A TOTAL OF 140 PARTICIPANTS. THESE INCLUDED SIX TRIPS TO HAITI TO WORK WITH THE PAPAYE PEASANT'S MOVEMENT (MPP), IN CONSTRUCTING FOUR ECO-VILLAGES THAT COMBINE EARTHQUAKE RESISTANT HOMES AND SUSTAINABLE COMMUNITY FARMING FOR EARTHQUAKE SURVIVORS. JOURNEYS WERE TO INDIA WITH THE UUA'S HOLDEEN INDIA PROGRAM (VISITING PARTNER VIDHAYAK SANSAD); TO GUATEMALA WITH THE SIENNA PROJECT, AND TO MEXICO WITH BORDERLINKS. THE COLLEGE ALSO LED ONE YOUTH JUSTICE TRAINING FOR HIGH SCHOOL AGE YOUTH (IN BOSTON) AND A YOUTH CIVIL RIGHTS PILGRIMAGE, INTRODUCING YOUTH TO THE KEY SITES, FIGURES AND EVENTS OF THE AMERICAN CIVIL RIGHTS MOVEMENT, REACHING A COMBINED TOTAL OF 33 FOR COLLEGE-AGE YOUNG ADULTS, THE COLLEGE INITIATED NINE SUMMER

Schedule O (Form 990 or 990-EZ) (2012)

232212 01-04-13

Name of the organization UNITARIAN UNIVERSALIST SERVICE Employer identification number COMMITTEE INC 04-6186012 INTERNSHIPS, LOCATED IN CAMBRIDGE, ROXBURY, NEW ORLEANS, LONDON AND KENYA. FOR NEXT YEAR, THE COLLEGE PLANS TO EXPAND ITS INTERNSHIPS AND YOUTH JUSTICE PROGRAMS AND, IN CONJUNCTION WITH PARTNER ORGANIZATIONS, WILL BE ADDING NEW SERVICE-LEARNING PROGRAMS TO CHICAGO (WORKER JUSTICE) AND CALIFORNIA (THE HUMAN RIGHT TO WATER), AND CONTINUING PROGRAMS TO HAITI, INDIA AND MEXICO. THE COLLEGE IS STRUCTURED AS A PROGRAM UNIT OF THE UUSC, JOINTLY GOVERNED BY THE UUA AND UUSC FOR THE BENEFIT OF BOTH ORGANIZATIONS UNDER THE TERMS OF A JOINT OPERATING AGREEMENT. EXPENSES \$ 694,147. INCLUDING GRANTS OF \$ 39,537. REVENUE \$ 0. FORM 990, PART IV, LINE 28C: UUSC'S INVESTMENTS ARE MANAGED BY A FIRM ASSOCIATED WITH A TRUSTEE. FEES FOR SUCH SERVICES WERE \$30,333 FOR THE YEAR ENDED JUNE 30, 2013. THE BOARD BELIEVES THIS TRANSACTION IS FAVORABLE TO UUSC, AND SUCH ARRANGEMENT HAS BEEN REVIEWED AND APPROVED BY THE REMAINING TRUSTEES. 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

232212 01-04-13

Schedule O (Form 990 or 990-EZ) (2012)

CONFLICTED INDIVIDUAL IS PROHIBITED FROM VOTING OR MAKING ANY DECISIONS

RELATED TO THE MATTER.

FORM 990, PART VI, SECTION B, LINE 15: THE COMPENSATION OF THE

PRESIDENT/CEO IS DETERMINED BY THE EXECUTIVE COMMITTEE OF 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

APA,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 9, CHANGES IN NET ASSETS:

232212 01-04-13 Schedule O (Form 990 or 990-EZ) (2012)

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