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 private foundations)

▶ Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at *www.irs.gov/form990*.

OMB No. 1545-0047

2013

Open to Public Inspection

A For the 2013 calendar year, or tax year beginning JUL 1, 2013 and ending JUN 30, 2014

B Check if applicable: ☐ Address change ☐ Name change ☐ Initial return ☐ Terminated ☐ Amended return ☐ Application pending

C Name of organization
UNITARIAN UNIVERSALIST SERVICE COMMITTEE INC

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address) | Room/suite
689 MASSACHUSETTS AVENUE

City or town, state or province, country, and ZIP or foreign postal code
CAMBRIDGE, MA 02139

D Employer identification number
04-6186012

E Telephone number
(617)-868-6600

G Gross receipts $ 13,408,119.

F Name and address of principal officer: WILLIAM F. SCHULZ
SAME AS C ABOVE

H(a) Is this a group return for subordinates? ☐ Yes ☒ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list. (see instructions)

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW.UUSC.ORG

H(c) Group exemption number ▶

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 1948 **M** State of legal domicile: MA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3	Number of voting members of the governing body (Part VI, line 1a)	3	15
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	15
5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5	43
6	Total number of volunteers (estimate if necessary)	6	2508
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	22,854.
b	Net unrelated business taxable income from Form 990-T, line 34	7b	11,473.

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	7,167,089.	11,648,469.
	9	Program service revenue (Part VIII, line 2g)	0.	173,450.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	393,859.	609,668.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	250,512.	83,534.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	7,811,460.	12,515,121.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	718,545.	1,326,847.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	3,954,238.	3,931,452.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	179,502.	154,773.
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 753,340.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	2,040,326.	2,230,373.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	6,892,611.	7,643,445.
	19	Revenue less expenses. Subtract line 18 from line 12	918,849.	4,871,676.
			Beginning of Current Year	**End of Year**
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	24,582,654.	30,013,553.
	21	Total liabilities (Part X, line 26)	5,339,693.	4,961,164.
	22	Net assets or fund balances. Subtract line 21 from line 20	19,242,961.	25,052,389.

Part II Signature Block

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

Sign Here

▶ Signature of officer | Date

▶ MICHAEL ZOUZOUA, CHIEF FINANCIAL OFFICER
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
CRAIG KLEIN				P00734640

Firm's name ▶ CBIZ TOFIAS | Firm's EIN ▶ 26-3753134

Firm's address ▶ 500 BOYLSTON STREET
BOSTON, MA 02116 | Phone no. 617-761-0600

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:
UUSC ADVANCES HUMAN RIGHTS AND SOCIAL JUSTICE AROUND THE WORLD, PARTNERING WITH THOSE WHO CONFRONT UNJUST POWER STRUCTURES AND MOBILIZING TO CHALLENGE OPPRESSIVE POLICIES.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No
If "Yes," describe these new services on Schedule O.

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

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

4a (Code:) (Expenses $ 3,290,106. including grants of $ 866,232.) (Revenue $ 30,745.)
HUMAN RIGHTS PROGRAMS - I. RIGHTS IN HUMANITARIAN CRISES: SEE SCHEDULE O.

4b (Code:) (Expenses $ 1,020,496. including grants of $ 162,256.) (Revenue $ 29,935.)
HUMAN RIGHTS PROGRAMS - II. ENVIRONMENTAL JUSTICE: SEE SCHEDULE O.

4c (Code:) (Expenses $ 724,610. including grants of $ 49,824.) (Revenue $ 148,450.)
HUMAN RIGHTS PROGRAMS - III. UU COLLEGE OF SOCIAL JUSTICE: SEE SCHEDULE O.

4d Other program services (Describe in Schedule O.)
(Expenses $ 1,128,072. including grants of $ 248,535.) (Revenue $)

4e Total program service expenses ▶ 6,163,284.

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 98-19? *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		X
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 endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *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	X	
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *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 other assistance to or for any foreign organization? *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 other assistance to or for foreign individuals? *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, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I*	17	X	
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		X
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		X
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or government 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 or other assistance to individuals in the United States on Part IX, 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 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 Schedule K. If "No", go to line 25a*	24a	X	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		X
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	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 Schedule L, Part I*	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, 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 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 instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	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		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	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
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *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		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	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 40			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		1c	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 43			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?		3a	X	
b	If "Yes," has it filed a Form 990-T for this year? *If "No," to line 3b, provide an explanation in Schedule O*		3b	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a		X
b	If "Yes," enter the name of the foreign country: ▶				
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b		
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?		7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h		
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		8		
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the organization make any taxable distributions under section 4966?		9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
10	**Section 501(c)(7) organizations.** Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note. See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*		14b		

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

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

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year. 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.	1a	15		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	15		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2			X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3			X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5			X
6	Did the organization have members or stockholders?	6			X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a			X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b			X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?	8a		X	
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 organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*	9			X

Section 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
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe 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?			
a	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).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶CA,CO,CT,DC,FL,GA,HI,IL,IN,KS,KY,LA

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

[ ] Own website [ ] Another's website [X] Upon request [ ] Other *(explain in Schedule O)*

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

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ▶

MICHAEL ZOUZOUA - (617)301-4318

UUSC, 689 MASSACHUSETTS AVENUE, CAMBRIDGE, MA 02139

SEE SCHEDULE O FOR FULL LIST OF STATES

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations.

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

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) LUCIA SANTINI FIELD CHAIR	1.00	X		X				0.	0.	0.
(2) JOHN BUEHRENS VICE-CHAIR	1.00	X		X				0.	0.	0.
(3) MARTHA EASTER-WELLS SECRETARY	1.00	X		X				0.	0.	0.
(4) CHARLES SANDMEL TREASURER	1.00	X		X				0.	0.	0.
(5) TODD HESS BOARD MEMBER	1.00	X						0.	0.	0.
(6) EBE EMMONS BOARD MEMBER	1.00	X						0.	0.	0.
(7) PATRICIA FLYNN BOARD MEMBER	1.00	X						0.	0.	0.
(8) ROY KING BOARD MEMBER	1.00	X						0.	0.	0.
(9) KAREN KELL HARTMAN BOARD MEMBER	1.00	X						0.	0.	0.
(10) DANAH FISHER BOARD MEMBER	1.00	X						0.	0.	0.
(11) CONRAD PINNOCK BOARD MEMBER	1.00	X						0.	0.	0.
(12) ZAYNAB NAWAZ BOARD MEMBER	1.00	X						0.	0.	0.
(13) KAREN SCHNEIDER BOARD MEMBER	1.00	X						0.	0.	0.
(14) RAMA KUMANDURI BOARD MEMBER	1.00	X						0.	0.	0.
(15) HOPE JOHNSON BOARD MEMBER	1.00	X						0.	0.	0.
(16) WILLIAM SCHULZ PRESIDENT & CEO	30.00			X				188,441.	0.	58,104.
(17) CONSTANCE KANE VP & COO	35.00			X				143,154.	0.	40,033.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(18) MICHAEL ZOUZOUA CFO	35.00			X				126,383.	0.	38,356.
(19) SUSHMA RAMAN VP & CHIEF PROGRAM OFFICER	35.00			X				13,304.	0.	1,018.
(20) MAXINE NEIL DIRECTOR OF INSTITUTIONAL ADV.	35.00					X		117,060.	0.	27,786.
(21) ROSEMARY E. ATEMA DIRECTOR OF PROGRAMS	35.00					X		110,606.	0.	17,155.
(22) PAUL TWITCHELL, JR. DIRECTOR OF COMMUNICATIONS	35.00					X		124,353.	0.	18,806.
(23) KATHLEEN MCTIGUE DIRECTOR OF UUCSJ	35.00					X		126,405.	0.	37,094.
(24) CASSANDRA RYAN ASS. DIR. MAJOR GIFTS/SP. INIT. CAMP	35.00					X		100,121.	0.	34,729.
1b Sub-total ▶								1,049,827.	0.	273,081.
c Total from continuation sheets to Part VII, Section A ▶								0.	0.	0.
d Total (add lines 1b and 1c) ▶								1,049,827.	0.	273,081.

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 9

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
INTEGRATED DIRECT MARKETING 1250 CONNECTICUT AVE., WASHINGTON, DC 20036	FUNDRAISING CONSULTING AND DIREC	107,024.

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶ 1

Part VIII Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a	69,202.				
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	11,579,267.				
	g Noncash contributions included in lines 1a-1f $ 3,883.						
	h Total. Add lines 1a-1f ▶			11,648,469.			
Program Service Revenue			Business Code				
	2 a PARTICIPANT FEES LEARNING TRIPS		624200	173,450.	173,450.		
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f ▶			173,450.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶			222,583.			222,583.
	4 Income from investment of tax-exempt bond proceeds ▶						
	5 Royalties ▶						
		(i) Real	(ii) Personal				
	6 a Gross rents	382,197.					
	b Less: rental expenses	337,901.					
	c Rental income or (loss)	44,296.					
	d Net rental income or (loss) ▶			44,296.	3,558.	22,854.	25,000.
	7 a Gross amount from sales of assets other than inventory	(i) Securities 874,879.	(ii) Other				
	b Less: cost or other basis and sales expenses	492,418.	-4,624.				
	c Gain or (loss)	382,461.	4,624.				
	d Net gain or (loss) ▶			387,085.			387,085.
	8 a Gross income from fundraising events (not including $ _____ of contributions reported on line 1c). See Part IV, line 18	a					
	b Less: direct expenses	b					
	c Net income or (loss) from fundraising events ▶						
	9 a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities ▶						
	10 a Gross sales of inventory, less returns and allowances	a	106,541.				
	b Less: cost of goods sold	b	67,303.				
	c Net income or (loss) from sales of inventory ▶			39,238.	39,238.		
	Miscellaneous Revenue		Business Code				
	11 a						
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d ▶						
	12 Total revenue. See instructions. ▶			12,515,121.	209,130.	22,854.	634,668.

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	433,130.	433,130.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	893,717.	893,717.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	782,360.	569,161.	116,939.	96,260.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	2,314,487.	1,824,745.	260,807.	228,935.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	243,174.	187,912.	31,242.	24,020.
9 Other employee benefits	385,634.	297,174.	69,670.	18,790.
10 Payroll taxes	205,797.	159,029.	26,440.	20,328.
11 Fees for services (non-employees):				
a Management				
b Legal	12,000.		12,000.	
c Accounting	54,500.		54,500.	
d Lobbying	371,818.	371,818.		
e Professional fundraising services. See Part IV, line 17	154,773.			154,773.
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	228,860.	161,410.	67,450.	
12 Advertising and promotion	17,780.	10,080.		7,700.
13 Office expenses				
14 Information technology	22,534.	18,710.	3,824.	
15 Royalties				
16 Occupancy	176,328.	124,965.	24,783.	26,580.
17 Travel	514,301.	463,070.	1,944.	49,287.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	76,309.	60,212.	8,942.	7,155.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	171,331.	101,378.	38,544.	31,409.
23 Insurance	31,015.	22,255.	5,852.	2,908.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a PRINTING & PUBLICATIONS	314,732.	263,003.	156.	51,573.
b POSTAGE & SHIPPING	173,091.	149,340.	182.	23,569.
c TELEPHONE	36,675.	28,362.	1,863.	6,450.
d SUPPLIES	29,099.	23,813.	1,683.	3,603.
e All other expenses				
25 **Total functional expenses.** Add lines 1 through 24e	7,643,445.	6,163,284.	726,821.	753,340.
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)	380,789.	323,671.	0.	57,118.

Part X Balance Sheet

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

			(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing	973,727.	1	1,083,982.
	2	Savings and temporary cash investments	2,630,622.	2	4,574,653.
	3	Pledges and grants receivable, net	2,152,512.	3	4,817,081.
	4	Accounts receivable, net	138,930.	4	204,959.
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	168,450.	9	214,358.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a 7,474,439.			
	b	Less: accumulated depreciation — 10b 1,542,513.	5,965,750.	10c	5,931,926.
	11	Investments - publicly traded securities	7,893,022.	11	8,820,431.
	12	Investments - other securities. See Part IV, line 11	4,580,850.	12	4,247,237.
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	78,791.	15	118,926.
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	24,582,654.	16	30,013,553.
Liabilities	17	Accounts payable and accrued expenses	832,103.	17	637,985.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities	3,014,545.	20	2,932,639.
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties	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 Part X of Schedule D	1,118,045.	25	1,015,540.
	26	**Total liabilities.** Add lines 17 through 25	5,339,693.	26	4,961,164.
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ [X] and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	11,066,691.	27	13,129,794.
	28	Temporarily restricted net assets	4,553,184.	28	8,195,077.
	29	Permanently restricted net assets	3,623,086.	29	3,727,518.
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	19,242,961.	33	25,052,389.
	34	Total liabilities and net assets/fund balances	24,582,654.	34	30,013,553.

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	12,515,121.
2	Total expenses (must equal Part IX, column (A), line 25)	2	7,643,445.
3	Revenue less expenses. Subtract line 2 from line 1	3	4,871,676.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	19,242,961.
5	Net unrealized gains (losses) on investments	5	1,002,244.
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	-64,492.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	25,052,389.

Part XII Financial Statements and Reporting

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

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

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990.*

OMB No. 1545-0047
2013
Open to Public Inspection

Name of the organization UNITARIAN UNIVERSALIST SERVICE COMMITTEE INC

Employer identification number 04-6186012

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

1 [ ] A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
2 [ ] A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)
3 [ ] A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
4 [ ] A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
5 [ ] An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
6 [ ] A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
7 [X] An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
8 [ ] A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
9 [ ] An 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).**
11 [ ] 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 b [ ] Type II c [ ] Type III - Functionally integrated d [ ] Type III - Non-functionally integrated
e [ ] 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).
f 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 [ ]
g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, 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)		

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document? Yes	No	(v) Did you notify the organization in col. (i) of your support? Yes	No	(vi) Is the organization in col. (i) organized in the U.S.? Yes	No	(vii) Amount of monetary support
Total									

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

Schedule A (Form 990 or 990-EZ) 2013

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09-25-13

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	7862533.	5007967.	7535549.	7167089.	11648469.	39221607.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3	7862533.	5007967.	7535549.	7167089.	11648469.	39221607.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						6254934.
6 **Public support.** Subtract line 5 from line 4						32966673.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4	7862533.	5007967.	7535549.	7167089.	11648469.	39221607.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	193,201.	233,905.	243,308.	207,139.	247,583.	1125136.
9 Net income from unrelated business activities, whether or not the business is regularly carried on	34,752.	57,238.	74,154.	49,458.	22,854.	238,456.
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						40585199.

12 Gross receipts from related activities, etc. (see instructions) 12 872,288.

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) 14 81.23 %

15 Public support percentage from 2012 Schedule A, Part II, line 14 15 78.43 %

16a **33 1/3% support test - 2013.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ [X]

b **33 1/3% support test - 2012.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

17a **10% -facts-and-circumstances test - 2013.** 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 test - 2012.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ ☐

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support** (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 **Total support.** (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2013** (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from **2012** Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2013.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support tests - 2012.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

Part IV **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (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.
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at *www.irs.gov/form990*.

OMB No. 1545-0047

2013

Name of the organization
UNITARIAN UNIVERSALIST SERVICE COMMITTEE INC

Employer identification number
04-6186012

Organization type (check one):

Filers of:	**Section:**
Form 990 or 990-EZ	[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

Check if your organization is covered by the **General Rule** or a **Special Rule.**
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

[ ] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, $5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

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 its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization: UNITARIAN UNIVERSALIST SERVICE COMMITTEE INC

Employer identification number: 04-6186012

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

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

(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
		$	

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

Name of organization: UNITARIAN UNIVERSALIST SERVICE COMMITTEE INC

Employer identification number: 04-6186012

Part III *Exclusively* **religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than $1,000 for the year.** Complete columns **(a)** through **(e) and** the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **$1,000 or less** for the year. (Enter this information once.) ▶ $

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.
▶ See separate instructions. ▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990*.

OMB No. 1545-0047

2013

Open to Public Inspection

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

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

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

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

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

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

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

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

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
2 Political expenditures ▶ $
3 Volunteer hours

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

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ $
2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ $
3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No
4a Was a correction made? ☐ Yes ☐ No
b If "Yes," describe in Part IV.

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

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ $
2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ $
3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ $
4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No
5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

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

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

Schedule C (Form 990 or 990-EZ) 2013

332041
11-06-13

08251107 756948 34366.001 2013.04030 UNITARIAN UNIVERSALIST SERV 34366_11

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

A Check ▶ ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check ▶ ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)	72,287.	
b Total lobbying expenditures to influence a legislative body (direct lobbying)	311,918.	
c Total lobbying expenditures (add lines 1a and 1b)	384,205.	
d Other exempt purpose expenditures	6,505,900.	
e Total exempt purpose expenditures (add lines 1c and 1d)	6,890,105.	
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.	494,505.	
g Grassroots nontaxable amount (enter 25% of line 1f)	123,626.	
h Subtract line 1g from line 1a. If zero or less, enter -0-	0.	
i Subtract line 1f from line 1c. If zero or less, enter -0-	0.	

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over $500,000	20% of the amount on line 1e.
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000.
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000.
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000.
Over $17,000,000	$1,000,000.

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ Yes ☐ No

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

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a Lobbying nontaxable amount	428,946.	467,034.	468,015.	494,505.	1,858,500.
b Lobbying ceiling amount (150% of line 2a, column(e))					2,787,750.
c Total lobbying expenditures	12,680.	14,894.	75,068.	384,205.	486,847.
d Grassroots nontaxable amount	107,237.	116,759.	117,004.	123,626.	464,626.
e Grassroots ceiling amount (150% of line 2d, column (e))					696,939.
f Grassroots lobbying expenditures	4,885.	7,300.	60,484.	72,287.	144,956.

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 of the lobbying activity.	(a) Yes	(a) No	(b) Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total. Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A **Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

		Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1		
2 Did the organization make only in-house lobbying expenditures of $2,000 or less?	2		
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	3		

Part III-B **Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."**

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures **(do not include amounts of political expenses for which the section 527(f) tax was paid).**		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV **Supplemental Information**

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, line 2; and Part II-B, line 1. Also, complete this part for any additional information.

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
▶ Information about Schedule D (Form 990) and its instructions is at *www.irs.gov/form990.*

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization: UNITARIAN UNIVERSALIST SERVICE COMMITTEE INC

Employer identification number: 04-6186012

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II Conservation Easements.

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

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

☐ Preservation of land for public use (e.g., recreation or education)
☐ Preservation of an historically important land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ Preservation of open space

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

			Held at the End of the Tax Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

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

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

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

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

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

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

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

(i) Revenues included in Form 990, Part VIII, line 1 ▶ $ _____

(ii) Assets included in Form 990, Part X ▶ $ _____

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

a Revenues included in Form 990, Part VIII, line 1 ▶ $ _____

b Assets included in Form 990, Part X ▶ $ _____

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

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

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

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

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

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

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

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

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

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

b If "Yes," explain the arrangement in Part XIII. Check here 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.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	10,499,666.	9,740,564.	10,719,232.	9,669,685.	8,171,903.
b Contributions	975,621.	678,115.	330,707.	1,398,918.	1,634,105.
c Net investment earnings, gains, and losses	1,669,719.	1,215,342.	-11,727.	1,767,922.	1,309,539.
d Grants or scholarships					
e Other expenditures for facilities and programs	1,799,825.	1,078,219.	1,243,580.	2,065,435.	1,395,809.
f Administrative expenses	63,863.	56,136.	54,068.	51,858.	50,053.
g End of year balance	11,281,318.	10,499,666.	9,740,564.	10,719,232.	9,669,685.

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

a Board designated or quasi-endowment ▶ 62.73 %
b Permanent endowment ▶ 33.04 %
c Temporarily restricted endowment ▶ 4.23 %

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

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		970,000.		970,000.
b Buildings		5,940,986.	1,296,854.	4,644,132.
c Leasehold improvements				
d Equipment		563,453.	245,659.	317,794.
e Other				
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				5,931,926.

Part VII Investments - Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) GOVERNMENT ISSUED		
(B) SECURITIES	2,701,642.	END-OF-YEAR MARKET VALUE
(C) CORPORATE BONDS	977,527.	END-OF-YEAR MARKET VALUE
(D) ASSETS RELATED TO POOLED		
(E) FUNDS	568,068.	END-OF-YEAR MARKET VALUE
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶	4,247,237.	

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) GIFT ANNUITIES PAYABLE	829,660.
(3) LIABILITIES UNDER TRUST AGREEMENT	56,718.
(4) POOLED INCOME DEFERRED REVENUE	129,162.
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 25.)* ▶	1,015,540.

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

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

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

1	Total revenue, gains, and other support per audited financial statements			1	13,790,774.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains on investments	2a	1,002,244.		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	273,409.		
e	Add lines 2a through 2d			2e	1,275,653.
3	Subtract line 2e from line 1			3	12,515,121.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c. *(This must equal Form 990, Part I, line 12.)*			5	12,515,121.

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

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

1	Total expenses and losses per audited financial statements			1	7,981,346.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	337,901.		
e	Add lines 2a through 2d			2e	337,901.
3	Subtract line 2e from line 1			3	7,643,445.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines 4a and 4b			4c	0.
5	Total expenses. Add lines 3 and 4c. *(This must equal Form 990, Part I, line 18.)*			5	7,643,445.

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X, LINE 2:

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

Part XIII Supplemental Information *(continued)*

UNDER EXAMINATION BY ANY TAXING JURISDICTION. UUSC'S FEDERAL AND STATE INCOME TAX RETURNS ARE GENERALLY OPEN FOR EXAMINATION FOR THREE YEARS AFTER THE DATE OF FILING, INCLUDING EXTENSIONS.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

RENTAL EXPENSE	337,901.
CHANGE IN VALUE OF SPLIT-INTEREST GIFTS	-64,492.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	273,409.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

RENTAL EXPENSE	337,901.

SCHEDULE F (Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

▶ Attach to Form 990. ▶ See separate instructions.

▶ Information about Schedule F (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization
UNITARIAN UNIVERSALIST SERVICE COMMITTEE INC

Employer identification number
04-6186012

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

1 **For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ..... [X] Yes [ ] No

2 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

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

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
CENTRAL AMERICA AND THE CARIBBEAN	0	0	GRANTS TO RECIPIENTS LOCATED IN THE REGION		301,885.
EAST ASIA AND THE PACIFIC	0	0	GRANTS TO RECIPIENTS LOCATED IN THE REGION		179,235.
SOUTH ASIA	0	0	GRANTS TO RECIPIENTS LOCATED IN THE REGION		48,797.
NORTH AMERICA	0	0	GRANTS TO RECIPIENTS LOCATED IN THE REGION		6,000.
SOUTH AMERICA	0	0	GRANTS TO RECIPIENTS LOCATED IN THE REGION		43,000.
SUB-SAHARAN AFRICA	0	0	GRANTS TO RECIPIENTS LOCATED IN THE REGION		312,800.
3 a Sub-total	0	0			893,717.
b Total from continuation sheets to Part I	0	0			0.
c **Totals** (add lines 3a and 3b)	0	0			893,717.

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

Schedule F (Form 990) 2013

332071
10-03-13

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	HUMANITARIAN ASSISTANCE	6,095.	WIRE TRANSFER	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	HUMANITARIAN ASSISTANCE	8,000.	WIRE TRANSFER	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	HUMANITARIAN ASSISTANCE	9,000.	WIRE TRANSFER	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	HUMANITARIAN ASSISTANCE	9,620.	WIRE TRANSFER	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	HUMANITARIAN ASSISTANCE	10,830.	WIRE TRANSFER	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	HUMANITARIAN ASSISTANCE	254,810.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	HUMANITARIAN ASSISTANCE	7,030.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	HUMANITARIAN ASSISTANCE	16,987.	WIRE TRANSFER	0.		

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶ 26

3 Enter total number of other organizations or entities ▶ 0

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), 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)
		EAST ASIA AND THE PACIFIC	HUMANITARIAN ASSISTANCE	37,005.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	HUMANITARIAN ASSISTANCE	22,616.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	HUMANITARIAN ASSISTANCE	32,163.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	HUMANITARIAN ASSISTANCE	27,825.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	HUMANITARIAN ASSISTANCE	26,609.	WIRE TRANSFER	0.		
		SOUTH AMERICA	HUMANITARIAN ASSISTANCE	10,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	HUMANITARIAN ASSISTANCE	7,500.	WIRE TRANSFER	0.		
		SOUTH AMERICA	HUMANITARIAN ASSISTANCE	15,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	HUMANITARIAN ASSISTANCE	10,500.	WIRE TRANSFER	0.		

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), 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)
		EAST ASIA AND THE PACIFIC	HUMANITARIAN ASSISTANCE	36,297.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	HUMANITARIAN ASSISTANCE	12,500.	WIRE TRANSFER	0.		
		NORTH AMERICA	HUMANITARIAN ASSISTANCE	8,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	HUMANITARIAN ASSISTANCE	28,070.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	HUMANITARIAN ASSISTANCE	20,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	HUMANITARIAN ASSISTANCE	25,030.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	HUMANITARIAN ASSISTANCE	12,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	HUMANITARIAN ASSISTANCE	25,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	HUMANITARIAN ASSISTANCE	200,000.	WIRE TRANSFER	0.		

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.
Part III can be duplicated if additional space is needed.

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

Part IV Foreign Forms

1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* ☐ Yes ☒ No

2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)* ☐ Yes ☒ No

3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)* ☐ Yes ☒ No

4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* ☐ Yes ☒ No

5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)* ☐ Yes ☒ No

6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report. (see Instructions for Form 5713)* ☐ Yes ☒ No

Part V **Supplemental Information**

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.

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)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

▶ **Attach to Form 990 or Form 990-EZ.**

▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form 990.*

OMB No. 1545-0047

2013

Open To Public Inspection

Name of the organization: UNITARIAN UNIVERSALIST SERVICE COMMITTEE INC

Employer identification number: 04-6186012

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

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

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

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

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions? Yes	No	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
INTEGRATED DIRECT MARKETING - 1250 CONNECTICUT AVE. NW.	DONOR MARKETING		X	1,652,624.	92,747.	1,559,877.
PUBLIC INTEREST COMMUNICATIONS - 7700	PHONE SOLICITATION		X	165,145.	62,026.	103,119.
Total ▶				1,817,769.	154,773.	1,662,996.

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

Schedule G (Form 990 or 990-EZ) 2013

SEE PART IV FOR CONTINUATIONS

932081
09-12-13

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

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

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

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	
	7 Direct expense summary. Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d) ▶				

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

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

b If "No," explain: _____

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

b If "Yes," explain: _____

11 Does the organization operate gaming activities with nonmembers? ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No

13 Indicate the percentage of gaming activity operated in:

a The organization's facility 13a %

b An outside facility 13b %

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶

Address ▶

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

b If "Yes," enter the amount of gaming revenue received by the organization ▶ $ _____ and the amount of gaming revenue retained by the third party ▶ $ _____

c If "Yes," enter name and address of the third party:

Name ▶

Address ▶

16 Gaming manager information:

Name ▶

Gaming manager compensation ▶ $ _____

Description of services provided ▶

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $

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

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

(I) NAME OF FUNDRAISER: INTEGRATED DIRECT MARKETING

(I) ADDRESS OF FUNDRAISER:

1250 CONNECTICUT AVE. NW, STE. 200, WASHINGTON, DC 20036

(I) NAME OF FUNDRAISER: PUBLIC INTEREST COMMUNICATIONS

(I) ADDRESS OF FUNDRAISER:
7700 LEESBURG PIKE, SUITE 301, FALLS CHURCH, VA 22043

SCHEDULE I (Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization: UNITARIAN UNIVERSALIST SERVICE COMMITTEE INC

Employer identification number: 04-6186012

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [X] Yes [ ] No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BEYOND BORDERS P.O. BOX 2132 NORRISTOWN, PA 19404	23-2713126	501(C)(3)	5,000.	0.			TO BUILD THE CAPACITY OF ITS STAFF TO BE MORE EFFECTIVE IN RUNNING A GROWING GRASSROOTS
BOSTON COLLEGE 140 COMMONWEALTH AVE. CHESTNUT HILL, MA 02467 3807	04-2103545	501(C)(3)	10,000.	0.			TO SUPPORT RESEARCH WITH AFFECTED POPULATIONS AND THE IMPACTS OF WATER SHUT OFFS WITH A FOCUS ON
BILL OF RIGHTS DEFENCE COMMITTEE 8 BRIDGE STREET, SUITE A NORTHHAMPTON, MA 01060	27-0042821	501(C)(4)	17,000.	0.			SUPPORTING LOCAL GRASSROOTS COALITION, COORDINATING ORGANIZING CAMPAIGNS AROUND
BOSTON MOBILIZATION 30 BOW ST. CAMBRIDGE, MA 02138	04-3550663	501(C)(3)	5,500.	0.			TO SUPPORT THE CONTINUED ENGAGEMENT TO RAISE THE MINIMUM WAGE
FOOD CHAIN WORKERS ALLIANCE 1730 W. OLYMPIC BLVD., #300 LOS ANGELES, CA 90015	90-0728464	501(C)(3)	20,000.	0.			RESEARCH AND EDUCATIONAL MATERIALS ON POULTRY INDUSTRY
LET JUSTICE ROLL 1550 S. INDIANA AVE.,SUITE 606 CHICAGO, IL 60605	26-2888798	501(C)(3)	18,000.	0.			LIVING WAGE CAMPAIGNS AND LIVING WAGE EMPLOYER PROJECT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 18.

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

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

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MASSACHUSETTS GLOBAL ACTION 33 HARRISON AVE. BOSTON, MA 02111	04-3454144	501(C)(3)	30,000.	0.			BOSTON HRW POLICY AND LOCAL UTILITY ADVOCACY
NORTHWEST ARKANSAS WORKERS' JUSTICE CENTER - 207 W. EMMA ST. - SPRINGDALE, AR 72764	20-3709967	501(C)(3)	28,500.	0.			REINFORCING IMMIGRANT WORKERS' COLLECTIVE POWER: A CONTINUATION OF WORKER LEADERSHIP IN
RESTAURANT OPPORTUNITIES CENTER-UNITED (ROC UNITED) - 350 7TH AVENUE, SUITE 1504 - NEW YORK, NY 10001	01-0939141	501(C)(3)	29,000.	0.			TRANSNATIONAL WOMEN RESTAURANT WORKERS' PROJECT
DEPARTMENT OF SOCIOLOGY 509 E. CIRCLE DR., BERKEY HALL #316 EAST LANSING, MI 48824-1111	38-6005984	501(C)(3)	10,000.	0.			TO COMPILE AND ANALYZE U.S. CENSUS AND OTHER RELEVANT DATA TO DOCUMENT EVIDENCE OF
ENVIRONMENTAL JUSTICE COALITION FOR WATER - P.O. BOX 18891 - SACRAMENTO, CA 95818-8911	20-2539559	501(C)(3)	10,000.	0.			CALIFORNIA HUMAN RIGHT TO WATER PROJECT, FOLLOW FROM SUCCESFUL CAMPAIGN TO GET STATE OF
CENTRAL UNITED METHODIST CHURCH 23 EAST ADAMS DETROIT, MI 48226	45-0510041	501(C)(3)	5,000.	0.			TO RAISE AWARENESS AND ORGANIZE CITY RESIDENTS AT RISK OF WATER SHUT OFFS ABOUT THEIR RIGHTS
NC COUNCIL OF CHURCHES 27 HORNE STREET RALEIGH, NC 27607	56-0619364	501(C)(3)	5,000.	0.			NORTH CAROLINA FAITH COMMUNITIES SEEKING TRANSPARENCY ON TORTURE-PHASE II
REFUGEE AND IMMIGRANT CENTER FOR EDUCATION & LEGAL SERVICES - 1305 N. FLORES STREET - SAN ANTONIO, TX 78212	74-2433690	501(C)(3)	15,000.	0.			TO ESTABLISH A SHELTER HOME FOR ASYLUM SEEKERS
TASSC INTERNATIONAL 4121 HAREWOOD RD. WASHINGTON, DC 20017	30-0060696	501(C)(3)	15,000.	0.			TO SUPPORT TORTURE SURVIVORS IN IMMIGRATION DETENTION AND FOCUS ON IMPROVING THE HORRENDOUS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TRAUMA RESOURCE INSTITUTE P.O. BOX 1891 CALIFORNIA, CA 91711	20-2420669	501(C)(3)	116,275.	0.			HUMANITARIAN ASSISTANCE-TRAUMA RESOURCE INSTITUTE-PHILIPINE COMM RESILIENCY- HAITIAN
UUJMCA 1731 HOWE AVE., #579 SACRAMENTO, CA 95825	87-0694546	501(C)(3)	6,000.	0.			TO ENGAGE UU AND NATIONAL POLICYMAKERS IN AN EFFORT TO BRING FAIRNESS AND EQUITY TO WORKER
THE CITY SCHOOL 614 COLUMBIA ROAD DORCHESTER, MA 02125	02-0532474	501(C)(3)	30,390.	0.			TO PROVIDE YOUTH LEADERSHIP DEVELOPMENT AND SOCIAL JUSTICE PROGRAMMING
BORDERLINKS 620 S. 6TH AVENUR TUSCAN, AZ 85701	86-0760505	501(C)(3)	6,110.	0.			TO HELP SUPPORT IMMIGRATION JUSTICE PROGRAMMING

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

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

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

PART I, LINE 2:

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

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: BEYOND BORDERS

(H) PURPOSE OF GRANT OR ASSISTANCE: TO BUILD THE CAPACITY OF ITS STAFF

Part IV Supplemental Information

TO BE MORE EFFECTIVE IN RUNNING A GROWING GRASSROOTS MOVEMENT

NAME OF ORGANIZATION OR GOVERNMENT: BOSTON COLLEGE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT RESEARCH WITH AFFECTED POPULATIONS AND THE IMPACTS OF WATER SHUT OFFS WITH A FOCUS ON CHILDREN, FAMILIES, AND SOCIAL SERVICE

NAME OF ORGANIZATION OR GOVERNMENT: BILL OF RIGHTS DEFENCE COMMITTEE

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORTING LOCAL GRASSROOTS COALITION, COORDINATING ORGANIZING CAMPAIGNS AROUND PARTICULAR CIVIL LIBERTIES ISSUES

NAME OF ORGANIZATION OR GOVERNMENT:

NORTHWEST ARKANSAS WORKERS' JUSTICE CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: REINFORCING IMMIGRANT WORKERS' COLLECTIVE POWER: A CONTINUATION OF WORKER LEADERSHIP IN LABOR EDUCATION AND ORGANIZING CAMPAIGNS

NAME OF ORGANIZATION OR GOVERNMENT: DEPARTMENT OF SOCIOLOGY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO COMPILE AND ANALYZE U.S. CENSUS AND OTHER RELEVANT DATA TO DOCUMENT EVIDENCE OF DISCRIMINATION IN ACCESS TO WATER AND SANITATION

NAME OF ORGANIZATION OR GOVERNMENT:

ENVIRONMENTAL JUSTICE COALITION FOR WATER

(H) PURPOSE OF GRANT OR ASSISTANCE: CALIFORNIA HUMAN RIGHT TO WATER PROJECT, FOLLOW FROM SUCCESFUL CAMPAIGN TO GET STATE OF CALIFORNIA TO ADOPT HUMAN RIGHT TO WATER POLICY IN 2012

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: TASSC INTERNATIONAL

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT TORTURE SURVIVORS IN IMMIGRATION DETENTION AND FOCUS ON IMPROVING THE HORRENDOUS CONDITIONS IN SHORT-TERM HOLDING CELLS

NAME OF ORGANIZATION OR GOVERNMENT: TRAUMA RESOURCE INSTITUTE

(H) PURPOSE OF GRANT OR ASSISTANCE: HUMANITARIAN ASSISTANCE- TRAUMA RESOURCE INSTITUTE-PHILIPINE COMM RESILIENCY- HAITIAN EARTHQUAKE FOLLOW UP PROJECT - TRI TRAINING IN LEBANON FOR SYRIANS

NAME OF ORGANIZATION OR GOVERNMENT: UUJMCA

(H) PURPOSE OF GRANT OR ASSISTANCE: TO ENGAGE UU AND NATIONAL POLICYMAKERS IN AN EFFORT TO BRING FAIRNESS AND EQUITY TO WORKER PAYCHECKS

SCHEDULE J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
▶ Attach to Form 990. ▶ See separate instructions.
▶ Information about Schedule J (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization: UNITARIAN UNIVERSALIST SERVICE COMMITTEE INC

Employer identification number: 04-6186012

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, 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 ☐ 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 directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		
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. ☒ Compensation committee ☒ Written employment contract ☒ Independent compensation consultant ☒ Compensation survey or study ☐ Form 990 of other organizations ☒ Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
a	Receive a severance payment or change-of-control payment?	4a	X	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3) 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
b	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 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.			
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) 2013

332111
08-13-13

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.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) WILLIAM SCHULZ	(i)	188,441.	0.	0.	40,612.	17,492.	246,545.	0.
PRESIDENT & CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) CONSTANCE KANE	(i)	143,154.	0.	0.	14,315.	25,718.	183,187.	0.
VP & COO	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) MICHAEL ZOUZOUA	(i)	126,383.	0.	0.	12,638.	25,718.	164,739.	0.
CFO	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) KATHLEEN MCTIGUE	(i)	126,405.	0.	0.	11,376.	25,718.	163,499.	0.
DIRECTOR OF UUCSJ	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 4A:

ROSEMARY E. ATEMA RECEIVED SEPARATION PAYMENT OF $55,354

DURING CALENDAR 2013.

SCHEDULE K (Form 990)
Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

▶ Attach to Form 990. ▶ See separate instructions. ▶ Information about Schedule K (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No. 1545-0047
2013
Open to Public Inspection

Name of the organization: UNITARIAN UNIVERSALIST SERVICE COMMITTEE INC

Employer identification number: 04-6186012

Part I Bond Issues

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

Part II Proceeds

		A	B	C	D
1	Amount of bonds retired				
2	Amount of bonds legally defeased				
3	Total proceeds of issue	3,500,000.			
4	Gross proceeds in reserve funds				
5	Capitalized interest from proceeds				
6	Proceeds in refunding escrows				
7	Issuance costs from proceeds	47,000.			
8	Credit enhancement from proceeds				
9	Working capital expenditures from proceeds				
10	Capital expenditures from proceeds	3,453,000.			
11	Other spent proceeds				
12	Other unspent proceeds				
13	Year of substantial completion	2009			

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No
14	Were the bonds issued as part of a current refunding issue?		X						
15	Were the bonds issued as part of an advance refunding issue?		X						
16	Has the final allocation of proceeds been made?	X							
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X							

Part III Private Business Use

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

Part III Private Business Use *(Continued)*

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts that may result in private business use of bond-financed property?		X						
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c Are there any research agreements that may result in private business use of bond-financed property?		X						
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶	.00 %		%		%		%	
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶	.00 %		%		%		%	
6 Total of lines 4 and 5	.00 %		%		%		%	
7 Does the bond issue meet the private security or payment test?		X						
8a Has there been a sale or disposition of any of the bond-financed property to a non-governmental person other than a 501(c)(3) organization since the bonds were issued?		X						
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of	%		%		%		%	
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?	X							

Part IV Arbitrage

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X						
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?		X						
b Exception to rebate?	X							
c No rebate due?		X						
If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed								
3 Is the bond issue a variable rate issue?		X						
4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X						
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								

Part IV Arbitrage *(Continued)*

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X						
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		X						
7 Has the organization established written procedures to monitor the requirements of section 148?		X						

Part V Procedures To Undertake Corrective Action

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	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 regulations?	X							

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions).

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization: UNITARIAN UNIVERSALIST SERVICE COMMITTEE INC

Employer identification number: 04-6186012

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

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

FORM 990, PART III, LINE 4A:

RIGHTS IN HUMANITARIAN CRISES

UUSC'S RIGHTS IN HUMANITARIAN CRISES PROGRAM PROVIDES IMMEDIATE RELIEF AND LONG-TERM RECOVERY SUPPORT TO INDIVIDUALS AND ORGANIZATIONS MOST AFFECTED BY DISASTERS, BUT LEAST SUPPORTED BY LARGER GOVERNMENT AND AID ORGANIZATIONS. IN FY14, UUSC CONTINUED ITS LONG-TERM RECOVERY EFFORTS IN HAITI, BY WORKING WITH HAITIAN GRASSROOTS ORGANIZATIONS ON PROMOTING SUSTAINABLE LIVELIHOODS AND FOOD SOVEREIGNTY, AS WELL AS REDUCING CHILD EXPLOITATION, TRAUMA, AND GENDER-BASED VIOLENCE. AN EVALUATION AND SURVEY OF COMMUNITY LEADERS TRAINED IN TRAUMA THERAPY REVEALED THAT 2,688 PEOPLE WERE TRAINED IN THE COMMUNITY RESILIENCY MODEL AND THEY IN TURN TRAINED THOUSANDS OF OTHER INDIVIDUALS. THE SURVEY RESULTS SHOWED THAT 67% OF SURVEY RESPONDENTS USED THE SKILLS DAILY, AND 87% HAD TRAINED FAMILY MEMBERS AND FRIENDS IN THESE COPING TOOLS TO OVERCOME TRAUMA. UUSC ALSO SUPPORTED THE CONSTRUCTION OF A SCHOOL FOR 120 CHILDREN OF EARTHQUAKE SURVIVORS, TRAINING ON GENDER-BASED VIOLENCE FOR 150 DIRECT AND 1,500 INDIRECT BENEFICIARIES, AND FINANCIAL CAPITAL AND SKILLS DEVELOPMENT FOR 940 INDIVIDUALS TO IMPROVE THEIR FAMILIES' FOOD SECURITY AND LIVELIHOODS. IN THE PHILIPPINES, UUSC SUPPORTED THE

Name of the organization UNITARIAN UNIVERSALIST SERVICE COMMITTEE INC

Employer identification number 04-6186012

RECOVERY, RESILIENCE SKILLS AND MENTAL HEALTH SERVICES FOR 48,000 PEOPLE AFFECTED BY TYPHOON HAIYAN; GREATER FOOD SECURITY AND AGRICULTURAL RESILIENCE FOR 130 LOW-INCOME FORMERLY LANDLESS FAMILIES IN LEYTE; AND ORGANIC FARMING AND CHICKEN RAISING FOR 400 FORMERLY LANDLESS FAMILIES IN THREE MUNICIPALITIES IN NORTHERN CEBU.

FORM 990, PART III, LINE 4B:

ENVIRONMENTAL JUSTICE

UUSC ADVANCES THE HUMAN RIGHT TO WATER BY WORKING WITH GRASSROOTS GROUPS, RESEARCH INSTITUTIONS, AND VARIOUS LEVELS OF GOVERNMENT TO ADVOCATE FOR NEW LAW AND POLICY, CHALLENGE VIOLATIONS, AND CREATE NEW MODELS FOR IMPLEMENTATION. UUSC COLLABORATES WITH INNOVATIVE GROUPS WHO ARE PROTECTING WATER RESOURCES AND INCREASING ACCESS TO SERVICES FOR LOW-INCOME AND VULNERABLE POPULATIONS, SUCH AS WOMEN, CHILDREN, THE ELDERLY, PEOPLE WITH DISABILITIES, AND ETHNIC AND RELIGIOUS MINORITIES.

IN FY 14, UUSC PROVIDED SUPPORT TO PARTNERS IN AFRICA, THE AMERICAS, AND ASIA. FOR EXAMPLE, UUSC SUPPORTED THE ENGAGEMENT AND EDUCATION OF TANZANIANS ON THE HUMAN RIGHT TO WATER AND OTHER RIGHTS--INCLUDING WORKSHOPS FOR OVER 2,000 TANZANIANS IN LOW-INCOME NEIGHBORHOODS IN DAR E SALAAM. THIS WAS A PART OF THE CONSTITUTIONAL REFORM PROCESS THAT BENEFITED 49 MILLION TANZANIANS, 45% OF WHOM DO NOT HAVE ACCESS TO WATER AND SANITATION SERVICES. IN MEXICO, UUSC SUPPORTED LITIGATION TO ADVANCE THE HUMAN RIGHT TO WATER OF FOUR PLAINTIFFS AND THEIR COMMUNITY. THIS LITIGATION WILL SET PRECEDENT FOR THE 12 MILLION POOREST, MOST VULNERABLE MEXICANS. IN DETROIT, UUSC SUPPORTED THE

Name of the organization: UNITARIAN UNIVERSALIST SERVICE COMMITTEE INC

Employer identification number: 04-6186012

MOBILIZATION AND CLASS ACTION DISCRIMINATION SUIT ON BEHALF OF LOW-INCOME RESIDENTS FIGHTING MASS WATER SHUTOFFS AFFECTING 5,000 TO 8,000 HOUSEHOLDS--OVERWHELMINGLY AFRICAN-AMERICAN, CHILDREN, ELDERLY, AND THE POOR.

FORM 990, PART III, LINE 4C:

COLLEGE OF SOCIAL JUSTICE - THE MISSION OF THE UUCSJ IS TO INSPIRE AND SUSTAIN FAITH-BASED JUSTICE ACTION ON ISSUES OF LOCAL, NATIONAL AND GLOBAL IMPORTANCE, THROUGH A VARIETY OF EXPERIENTIAL LEARNING PROGRAMS. IN FISCAL YEAR 2014 OUR PROGRAMS INCLUDED SERVICE LEARNING JOURNEYS TO CHICAGO, WITH THE RESTAURANT OPPORTUNITIES CENTER (ROC), THE ARIZONA/MEXICO BORDER WITH BORDERLINKS, HAITI WITH THE PAPAYE PEASANT MOVEMENT (MPP) AND ALABAMA/MISSISSIPPI ON A CIVIL RIGHTS PILGRIMAGE IN PARTNERSHIP WITH THE UU LIVING LEGACY PROJECT. ALL OF THESE PROGRAMS WERE SUPPORTED BY THE UUCSJ STUDY GUIDE FOR CROSS-CULTURAL ENGAGEMENT, AN ON-LINE RESOURCE WE DESIGNED AND CREATED IN 2014. THEY WERE LED BY A CADRE OF 24 PROGRAM LEADERS WE TRAINED IN THE FALL OF 2013, OF WHOM NEARLY A THIRD ARE PROFESSIONAL RELIGIOUS LEADERS. IN FY2014 WE RAN A TOTAL OF 9 JOURNEYS, WITH 106 PARTICIPANTS.

IN ADDITION TO OUR SERVICE LEARNING PROGRAMS, WE BROUGHT 20 HIGH SCHOOL YOUTH TO A THREE-WEEK JUSTICE TRAINING IN BOSTON, AND 13 YOUTH TO A SIMILAR TRAINING IN NEW ORLEANS. WE DEVELOPED A NEW PROGRAM FOR COLLEGE AGE YOUNG ADULTS, PARTNERING WITH JUSTICE ORGANIZATIONS IN THE US AND IN KENYA AND LONDON TO CREATE 9 SUMMER-LONG INTERNSHIPS. THROUGH THE GENEROSITY OF OUR DONORS WE WERE ABLE TO SUPPORT OUR INTERNS WITH SMALL STIPENDS, AND DEEPENED THEIR EXPERIENCE THROUGH A SERIES OF WEEKLY

Name of the organization UNITARIAN UNIVERSALIST SERVICE COMMITTEE INC

Employer identification number 04-6186012

VOCATIONAL AND SPIRITUAL REFLECTIONS. THESE TRAININGS AND INTERNSHIPS INCLUDED A TOTAL OF 42 YOUNG PEOPLE.

UUCSJ 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.

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

CIVIL LIBERTIES

UUSC WORKS TO ENSURE PROTECTION FROM UNLAWFUL GOVERNMENT INTRUSION, THE DEFENSE OF RIGHTS AND LIBERTIES CHALLENGED BY NATIONAL SECURITY AND COUNTERTERRORISM, AND EQUAL PARTICIPATION IN OPEN DEMOCRATIC PROCESSES REGARDLESS OF RACE, CLASS, GENDER, OR RELIGION. UUSC SUPPORTED THREE PARTNERS IN THE UNITED STATES TO INCREASE ACTIVISM DEMANDING ACCOUNTABILITY AND TRANSPARENCY ON TORTURE AND TO PROMOTE PUBLIC EDUCATION SUPPORTING CIVIL RIGHTS AND LIBERTIES. WHILE THE PROJECTS DIRECTLY BENEFITED 106 INDIVIDUALS, THE LARGER IMPACT WAS ON THOUSANDS OF VICTIMS AND SURVIVORS, THROUGH POLICY ADVOCACY AND CAMPAIGN SUPPORT. UUSC SUPPORTED A FELLOWSHIP TO FACILITATE LOCAL GRASSROOTS CAMPAIGNS, CHALLENGING ABUSES COMMITTED BY LAW ENFORCEMENT AGENCIES. THE FELLOWSHIP IS EXPECTED TO REACH A DIRECT AUDIENCE OF APPROXIMATELY 300 MEMBERS OF COALITIONS INVOLVED IN THE WORK AND AN INDIRECT COMMUNITY BASE OF 9,000 INDIVIDUALS. UUSC ALSO FUNDED A INVESTIGATIVE REPORT ON ICEBOX CELLS FOR UNDOCUMENTED IMMIGRANTS AND ASYLUM SEEKERS, THAT WAS PRESENTED TO CONGRESS AND OTHER DECISION MAKERS. THE REPORT "TORTURED AND DETAINED" EXPOSED THE INHUMANE CONDITIONS OF CONFINEMENT IN THE

Name of the organization UNITARIAN UNIVERSALIST SERVICE COMMITTEE INC

Employer identification number 04-6186012

HOLDING CELLS ALONG THE U.S. BORDER AND SHOWED THAT BETWEEN 2010 AND 2013, THE U.S. GOVERNMENT DETAINED 6,000 TORTURE SURVIVORS IN ILLEGAL ICEBOXES. UUSC ALSO SUPPORTED A HOUSING AND HUMAN RIGHTS PROGRAM IN SAN ANTONIO BENEFITING ETHIOPIAN AND ERITREAN WOMEN WHO ARE ASYLUM SEEKERS RELEASED FROM DETENTION IN ICEBOXES.

EXPENSES $ 591,563. INCLUDING GRANTS OF $ 105,685. REVENUE $ 0.

ECONOMIC JUSTICE

UUSC ADVANCES ECONOMIC JUSTICE IN THE U.S. AND GLOBALLY THROUGH PROGRAM AND PARTNER SUPPORT, ADVOCACY, POLICY, AND MEMBER MOBILIZATION. UUSC'S ECONOMIC JUSTICE PROGRAM DEVELOPS STRATEGIC PARTNERSHIPS AND NETWORKS, BUILDS MOVEMENTS, AND INFLUENCES POLICY ON WORKERS' RIGHTS AND LIVING WAGES IN THE UNITED STATES, WITH A PARTICULAR EMPHASIS ON LOW-WAGE WORKERS IN THE FOOD INDUSTRY. INTERNATIONALLY, UUSC SUPPORTS GRASSROOTS, WOMEN-LED ECONOMIC EMPOWERMENT INITIATIVES IN AFRICA.

FOR EXAMPLE, UUSC SUPPORTED 16,000 STREET VENDORS IN KENYA TO LEARN ABOUT THEIR RIGHTS, DEVELOP COOPERATIVE FINANCING SCHEMES, AND ADVOCATE FOR IMPLEMENTATION OF THE NATIONAL LEGISLATION WON TO PROTECT THEIR RIGHTS. IN THE U.S., UUSC SUPPORTED TRAINING, MOBILIZATION, AND ADVOCACY BENEFITING 10,000 MEMBERS OF A NATIONAL RESTAURANT WORKERS' ASSOCIATION WORKING TO RAISE THE MINIMUM WAGE FROM $2.13 AN HOUR TO A LIVING WAGE WITH PAID SICK LEAVE AND BENEFITS. IN ARKANSAS, UUSC SUPPORTED THE EDUCATION AND ORGANIZING OF 12,000 POULTRY WORKERS AROUND 300 CASES OF WAGE THEFT, SEXUAL HARASSMENT, AND OTHER VIOLATIONS OF HUMAN RIGHTS, WITH THE POTENTIAL TO IMPACT 125,000 WORKERS IN ARKANSAS.

EXPENSES $ 536,509. INCLUDING GRANTS OF $ 142,850. REVENUE $ 0.

Name of the organization UNITARIAN UNIVERSALIST SERVICE COMMITTEE INC

Employer identification number 04-6186012

FORM 990, PART IV, LINE 28C:

UUSC'S INVESTMENTS ARE MANAGED BY A FIRM ASSOCIATED WITH A TRUSTEE. FEES FOR SUCH SERVICES WERE $40,554 FOR THE YEAR ENDED JUNE 30, 2014. 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 TRUSTEES. HUMAN RESOURCES DECIDES IF A CONFLICT OF INTEREST EXISTS FOR UUSC PERSONNEL AND ELEVATES THE MATTER TO THE PRESIDENT/CEO OR THE PRESIDENT OF THE BOARD OF TRUSTEES AS APPROPRIATE. THE BOARD COMPLETES A CONFLICT OF INTEREST FORM ANNUALLY WHICH IS THEN SHARED WITH THE FULL BOARD. ANY CONFLICTED INDIVIDUAL IS PROHIBITED FROM VOTING OR MAKING ANY DECISIONS RELATED TO THE MATTER.

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

Name of the organization UNITARIAN UNIVERSALIST SERVICE COMMITTEE INC

Employer identification number 04-6186012

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
PA,RI,SC,TN,UT,VA,WA,WV,WI,AL,AZ,AK,AR

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

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

CHANGE IN VALUE OF SPLIT-INTEREST GIFTS	-64,492.