Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

and ending JUN 30,

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

A For the 2018 calendar year, or tax year beginning JUL 1, 2018

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

Inspection

В	Check i applica	C Name of organization	D Employer identifi	cation number
_	- Add	Unitarian Universalist Service	140	
	char  Nam	G COMMITTEE INC		105010
<u></u>	char  Initia	gé Doing business as		186012
	retur [Final	Number and street (or P.U. box it mail is not delivered to street address) Hoom/s		
L	retur	000 Massachusects Avenue		)-868-6600
position.	ated	City or town, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	9,279,108.
L	retur	Cambridge, MA 02139	H(a) Is this a group re	
ļ	Appl tion pend	r Name and address of principal officer, Marry Rachet Title Motifi	for subordinates	? Yes X No
11-10-1		same as C above	H(b) Are all subordinates in	ves No
		xempt status: X 501(c)(3) 501(c) ( ) ◀ (insert no.) 4947(a)(1) or		list, (see instructions)
		ite: ▶ www.uusc.org	H(c) Group exemptio	
			rear of formation: 1948 n	A State of legal domicile: MA
P	art I	Summary		
ø	1	Briefly describe the organization's mission or most significant activities: See Sche	dule 0	
Activities & Governance		A CONTROL OF THE PROPERTY OF T	***************************************	
EL	2	Check this box  if the organization discontinued its operations or disposed of m	1 1	
ò	3		3	14
e G	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	13
es	5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)		46
×.	6	Total number of volunteers (estimate if necessary)		960
Act	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		12,455.
	b	Net unrelated business taxable income from Form 990-T, line 38		46,548.
			Prior Year	Current Year
e	8	Contributions and grants (Part VIII, line 1h)	8,042,732.	6,959,775.
Revenue	9	Program service revenue (Part VIII, line 2g)	180,653.	142,533.
ev Sev	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	479,533.	1,585,160.
<u></u>	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	111,989.	61,833.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	8,814,907.	8,749,301.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,687,281.	1,297,344.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	4,531,431.	4,760,251.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	200,438.	180,000.
ďx	b	Total fundraising expenses (Part IX, column (D), line 25) 727,857.		
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	3,124,897.	2,842,694.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	9,544,047.	9,080,289.
-	19	Revenue less expenses. Subtract line 18 from line 12	-729,140.	-330,988.
S OF			Beginning of Current Year	End of Year
L Assets (	20	Total assets (Part X, line 16)	29,650,107.	28,764,609.
A P	21	Total liabilities (Part X, line 26)	4,275,047.	3,940,905.
		Net assets or fund balances. Subtract line 21 from line 20	25,375,060.	24,823,704.
	art II			
		alties of perjury, I declare that I have examined this return, including accompanying schedules and state		knowledge and belief, it is
true,	corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of which prepare		
		Cinitive of affine	12 Nov	2019
Sign		Signature of officer	Date	
Her	е	Mack Davidson, VP & CAO		
		Type or print name and title	T Fig. 1	DTM
		Print/Type preparer's name Preparer's signature	Date Check	PTIN
Paid		Brenda L. Booth Grada X. Caste.	11/07/19 self-employe	
C000	arer	Firm's name CBIZ MHM, LLC	Firm's EIN ▶	26-3753134
Use	Unly	Firm's address 500 Boylston Street		7 061 0600
		Boston, MA 02116	Phone no. 6 1	7-761-0600
May	the I	RS discuss this return with the preparer shown above? (see instructions)	/A./	X Yes No

	onicatian oniversalist Service	
	m 990 (2018) Committee Inc	04-6186012 Page
Pa	rt III Statement of Program Service Accomplishments	447
	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 structur	es 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	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	ers, the total expenses, and
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses\$4 , 879 , 792 . including grants of\$999 , 630 . ) (Rever	nue \$ 26,501.
	Human Rights Programs - I. Migrant Justice & Crisis Resp	onse: See
	Schedule O.	
4b	(Code:) (Expenses \$1,680,056. including grants of \$279,326. ) (Reven	nue \$ 7,170.
	Human Rights Programs - II. Climate Justice & Environmen	tal Justice:
	See Schedule O.	
4c	(Code:) (Expenses \$ 794,618. including grants of \$ 5,820. ) (Reven	133,240.
	Human Rights Programs - III. UU College of Social Justic	e. See Schedule
	0.	e. Dee Belledule
	<u>* ·                                     </u>	
4d	. •	
	(Expenses \$ 75,588. including grants of \$ 12,568.) (Revenue \$	<b>)</b>
4e	Total program service expenses ► 7,430,054.	

Form **990** (2018)

### 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	Х	
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		Х
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		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		Х
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		Х
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	Х	
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	4///	TUE M	8 85.1
	as applicable.			lines.
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
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	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		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_
е	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	Х	
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		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	

Form 990 (2018) Committee Inc

Part IV | Checklist of Required Schedules (continued)

	(continued)			_
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
22	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	22		1
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
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	Х	
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		X
	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), 501(c)(4), and 501(c)(29) 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 "Yes,"			٠,,
07	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			x
28	of any of these persons? If "Yes," complete Schedule L, Part III	27		Δ
20	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):			
а	A summer of forms of the state	28a	W1=8	х
b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	х	<u> </u>
		ZOD		$\vdash$
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			$\overline{}$
	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	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_	
	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		<u> X</u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			7.7
	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			37
20	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		х	
Par		38		
_ 314	Check if Schedule O contains a response or note to any line in this Part V			
			Voc	Nic
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	W.S	Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 53  Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	7.17	1	
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	10 2	TI.	
	(gambling) winnings to prize winners?	1c	Х	
832004	12-31-18			(2018)

	Statements regarding other mort linigs and rax compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		-	
	filed for the calendar year ending with or within the year covered by this return 2a 46			100
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)		377	
3a	, , , , , , , , , , , , , , , , , , ,	За	X	
	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			37
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	and box	X
D	If "Yes," enter the name of the foreign country:	5 8		
Eo	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	100,000	Sec.	X
5a b	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a		X
C		.5b		
6a	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?  Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	5c		
Va		6-		X
h	any contributions that were not tax deductible as charitable contributions?  If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6a		- 25
D		6b		
7	were not tax deductible?  Organizations that may receive deductible contributions under section 170(c).	GD	(1008)	1390
	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		Х
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	75		
	to file Form 8282?	7c		x
d	14 M 4 M 1 M 1 M 1 M 1 M 1 M 1 M 1 M 1 M	70	10,39	ALC: U
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		Х
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. Did a donor advised fund maintained by the	To Site	TOB.	
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.		11 20	
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			1
а	Initiation fees and capital contributions included on Part VIII, line 12		Season .	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities10b			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders		8500	
b	Gross income from other sources (Do not net amounts due or paid to other sources against			31
	amounts due or received from them.)	15,14	3000	Phys.
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		-	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	DIAS.	11 12 14	IIII-E
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
h	Note. See the instructions for additional information the organization must report on Schedule O.			
Ŋ	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	124.1	10	V# 5
		2500	13	
14a	Enter the amount of reserves on hand  Did the organization receive any payments for indoor tanning services during the tax year?	1/10		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	14b	-	
	excess parachute payment(s) during the year?	15		Х
	If "Yes," see instructions and file Form 4720, Schedule N.		A 1	
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O.	W 210	B (4)	T.J.
		Form	<b>990</b> (	(2018)

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	ction A. Governing Body and Management	**********	101010	Z
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		163	140
	If there are material differences in voting rights among members of the governing body, or if the governing	1010		43
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	16	Mr.	- ;
b	Friendly sumbourfunds and the first transfer and the first transfer and transfer an	301		Ţ.
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1112	見せ	
_		0	100	Х
3	officer, director, trustee, or key employee?  Did the organization delegate control over management duties customarily performed by or under the direct supervision	2		
v	of officers, directors, or trustees, or key employees to a management company or other person?			37
4		3		X
5	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
6	Did the organization become aware during the year of a significant diversion of the organization's assets?  Did the organization have members or stockholders?	5	-	
_		6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			۱
	more members of the governing body?	7a		X
D	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	Х	
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			
C	organization's mailing address? If "Yes." provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
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	The state of the s	THE STATE OF	11, 125	BWE
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	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent	2015	N. J.V	
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		30	40.44
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a		P.C	78 Y
	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	W-1	100	138
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	90		
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure	100	_	
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	ΚΥ	T, A
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s			
	for public inspection. Indicate how you made these available. Check all that apply.	лпу) а	ıvanaD	IC
	77			
19	Own website Another's website Upon request Other (explain in Schedule O)  Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and f	ne=-	al.	
	statements available to the public during the tax year.	nanci	al	
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	Carol Cahalane - (617)301-4331			
	UUSC, 689 Massachusetts Avenue, Cambridge, MA 02139			_
	12-31-18 See Schedule O for full list of states	F	000	(2018)
	TO TOTAL O MOT THAT THE OT BUILDS	LOLL	220	,∠∪ IԾ)

#### Form 990 (2018) 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

#### 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.

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

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

Nours for related organizations   Nours for form the organizat	(A) Name and Title	(B) Average				C)		1000	(D) Reportable	(E)	(F)
Observed Hember   Companisation from the organizations (W2/1099MISC)   Companisation from the organizations (W2/1099MISC)   Companisation from the organizations (W2/1099MISC)   Companisation from the organizations and related organizations and related organizations	Name and The	hours per	box	k, unle	heck ss pe	more rson	than is bot	h an	compensation		
1.00		(list any hours for related organizations below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization	organizations	compensation from the organization and related
A		1.00									
Vice-Chair		1 00	X	┝	X				0.	0.	0
Secretary		1.00	₩.		v			ľ		0	0
Secretary		1 00	Α.		Δ		K	_	0.	U .	
Treasurer	, ,	1.00	x		x				0.5	0.	0 -
Treasurer	(4) Todd Hess	1.00								•	
Sarah K. Dreier	Treasurer		x		x				0.	0.	0 -
Columber   Columber	(5) Sarah K. Dreier	1.00							- 70	+ 3+1	
Columber   Columber	Board Member		X						0.	0.	0 .
The state of the	(6) Barbara Du Mond	1.00		П							
Board Member	Board Member		Х						0.	0.	0.
Rev. Dr. Hope Johnson	(7) Peter Fenn	1.00									
Board Member			Х						0.	0.	0.
1.00   Name		1.00									
Board Member			X						0.	0	0.
1.00   Board Member		1.00								_	_
Board Member		1 00	X	_	ш				0.	0.	0 :-
1.00   Naria Pignataro Nielsen   1.00   Naria Pignataro Nielsen   1.00   Naria Pignataro Nielsen   1.00   Naria Pignataro Nielsen   Naria Pignatar		1.00	٠,								
Board Member		1 00	X						0.	0.	0.
1.00   No.   1.00   No.   No		1.00	v							_	0
Board Member		1 00	^						0.	0.	0.
1.00   Name		1.00	x						ا م	0	0
Board Member	(13) Cynthia Totten	1.00	2.5			_	-		0,10	0.	
1.00   X   0.			х						0	0 -	0 -
Board Member	(14) Rev. Ned Wight	1.00		П							
(15) Mary Katherine Morn     40.00       President & CEO     X       (16) Rachel Freed     35.00       VP & CPO     X       (17) Mack Davidson     35.00       VP & CAO     X       170,383.     0.21,473.	Board Member		Х						0.	0.	0.
President & CEO     X     139,424.     0. 15,995.       (16) Rachel Freed     35.00     X     172,446.     0. 14,246.       VP & CPO     X     172,446.     0. 14,246.       (17) Mack Davidson     X     170,383.     0. 21,473.	(15) Mary Katherine Morn	40.00									
(16) Rachel Freed     35.00       VP & CPO     X       (17) Mack Davidson     35.00       VP & CAO     X       172,446.     0. 14,246.       X     170,383.       0. 21,473.	President & CEO				Х				139,424.	0.	15,995.
(17) Mack Davidson  VP & CAO  X 170,383.  0. 21,473.	(16) Rachel Freed	35.00									
(17) Mack Davidson  VP & CAO  X 170,383.  0. 21,473.					X				172,446.	0.	14,246.
		35.00									
	VP & CAO				X				170,383.		21,473. Form <b>990</b> (2018)

Form 990 (2018)

Dort VIII	- 1110	_	_	_	_	_	_		04-01	.00	<u>7 T Z</u>	Page C
Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees,	and	Hi	ghes	st C	Compensated Employee	s (continued)			
(A)	(B)	(C)						(D)	(E)	(F)		
Name and title	Average	(do		Pos		า than ∈	опе	Reportable	Reportable		E۶	stimated
	hours per	box	, unle	ss per	rson i	is both or/trus	h an	compensation	compensation	ו ר	ar	nount of
	week	-	Lei ai	luau	recic	Trus	lee)	from	from related	- 1		other
	(list any hours for	director						the	organizations			pensation
	related	or d	ee			sated		organization (W-2/1099-MISC)	(W-2/1099-MIS	C)		om the
	organizations	trustee or	l trus		99	преп		(44-27 1099-141130)			_	anization d related
	below	dual t	Institutional trustee	_	yoldu	st co.	<u> </u>					anizations
	line)	Individual	Instit	Officer	Key employee	Highest compensated employes	Former				o, ge	ar == atro1 10
(18) Cassandra Ryan	35.00											
VP & CDO				Х				163,835.		0.	4	1,340.
(19) Kathleen McTigue	35.00											
Director of UUCSJ						X		141,326.		0.	4	0,126.
(20) Quang Nguyen	35.00											
Director of Human Resource						X		137,675.		0.	2	1,603.
(21) Danielle Fuller-Wimbush	35.00											
Director of Programs						X		110,949.		0.	2	3,221.
(22) Michael Kourabas	35.00											
Associate Director						Х		112,692.		0.	31	0,799.
(23) Meredith Larson	35.00											
Director of Advocacy	40.00					Х	_	114,624.		0.	<u> </u>	5,995.
(24) Thomas H Andrews	40.00											
President & CEO (former)							X	137,567.		0.		0 *
(25) Carol Cahalane	35.00											
Director of Finance			_	4	4		Х	127,542.		0.	12	2,755.
				$\blacksquare$	M							
1h Sub total					Ų			1,528,463.		$\sim$	221	7 553
1b Sub-total c Total from continuation sheets to Part VII	0 4							0.		0.	45	7,553.
d Total (add lines 1b and 1c)			*****			3444		1,528,463.		0.	221	0. 7,553.
Total number of individuals (including but no	at limited to the	200	iotor	d ob	0110	l				0 .	43	7,555.
compensation from the organization	or influted to the	720	istet	abl	ove	WIIC	o re	ceived more than \$100,0	от геропавіе			11
sempensation from the organization			_		_		_				$\neg$	Yes No
3 Did the organization list any former officer,	director or tru	stee	key	, em	رمامر	/PP	or k	nighest compensated em	anlovee on	Г	Alexa I	105 110
line 1a? If "Yes," complete Schedule J for su										F	3	Х
4 For any individual listed on line 1a, is the sui		000	mne	nsat	ion :	and	oth	er compensation from the	ne organization	"	3	ELE BERTO
and related organizations greater than \$150										ŀ	4	Х
5 Did any person listed on line 1a receive or a	ccrue compen	satio	npie m fra	om a	anv i	unre	o n late	ed organization or individ	ual for services	22	LOCOL I	
rendered to the organization? If "Yes." com								organization of marvia	dar for scrytocs	-	5	X
Section B. Independent Contractors						<u> </u>					U	
1 Complete this table for your five highest con	npensated ind	eper	ıden	t coi	ntra	ctors	s th	at received more than \$	100.000 of compe	 nsati	on fro	m
the organization. Report compensation for the												
(A)							Т	(B)	1		(C	)
Name and business a								Description of se	ervices	Co		sation
Grassroots Solutions, 861					1		T					
Ave., Suite 350, Minneapolis, MN 55414 Strategic Planning 177,000							7,000.					
Lisa Sock & Associates												
4952 Maple Street, Omaha, NE 68104 Website Services 103,029.							3,029.					
<del>!</del>							4					

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

Form 990 (2018)
Part VIII | Statement

Committee Inc

		Check if Schedule O cont			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluder from tax under sections 512 - 514
0 0	1 2	Federated campaigns	1a	21,376.	Z	Tevende	TOVERNE	512-514
and Other Similar Amounts		Manabanabia di sa	41		4.			
8		Fundraising events						
rA		Related organizations						
illa		Government grants (contributi						The state of
Š		All other contributions, gifts, gran						
je	•	similar amounts not included above		6,938,399.				
ŏ	a	Noncash contributions included in lines	Transfer No.	187,974				The title of
pue		Total. Add lines 1a-1f			6,959,775.			
		Total, Add intes 14 11	****************	Business Code	C. Zakaninini			T. S. J. T. C. S. S.
	2 a	Participant Fees Learni	na Trips	624200	142,533.	142,533.		
'	b	-				,		
me	c							
Revenue	d							
B	e							
	f	All other program service reve	nue					
					142,533.		a description	and the latest
1	3	Investment income (including						
		other similar amounts)	•	·	295,506.			295,50
4	4	Income from investment of tax						,
۱,	5	Royalties			A 1			
		,	(i) Real	(ii) Personal				ATTILL TALL
1 6	6 a	Gross rents	433,938.					diction in
		Less: rental expenses	379,983.					
		Rental income or (loss)	53,955.					
					53,955.	16,500.	12,455.	25,000
1 -		Gross amount from sales of	(i) Securities	(ii) Other	ACHER WITCHES   BIRTH	CHI STANDING A N	esta Linka III	glever rugin.
'		assets other than inventory	1,152,583.	259,549.				
	b	Less: cost or other basis						
		and sales expenses	122,478.	0.				
	С	Gain or (loss)	1,030,105.	259 549				
		Net gain or (loss)			1,289,654.			1,289,654
١		Gross income from fundraising						CONTRACTOR OF
] [	-	including \$	, ,	1				V
[ ]		contributions reported on line		1				
		Part IV, line 18						
]	b	Less: direct expenses	b					
5		Net income or (loss) from fund		<b>D</b>		Property of the		
6		Gross income from gaming ac	•					
		Part IV, line 19				A STATE OF THE STA		
	b	Less: direct expenses						
1		Net income or (loss) from gami						
10		Gross sales of inventory, less r			10000	NA VERNIEN	ap work jp E A.	III şivelik gazatı
		and allowances		35,224.				
	b	Less: cost of goods sold						
		Net income or (loss) from sales		<b></b>	7,878.	7,878.		
	_	Miscellaneous Revenue		Business Code		en à par l'égal des		dy sin svenia
11	l a	THIOGONAL TOOGO THO FOR THE		112 0000				
	b							
	c							
	-	All other revenue						
		Total. Add lines 11a-11d					4.040.00	ESSE FEX HELL
		Total revenue See instructions			8 749 301.	166 911	12 455	1 610 160

Form 990 (2018) Committee Inc
Part IX Statement of Functional Expenses

Sect	tion 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respon			nplete column (A).	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
1	Grants and other assistance to domestic organizations		expenses	general expenses	expenses
'	and domestic governments. See Part IV, line 21	695,498.	695,498.		
2	Grants and other assistance to domestic	033,1301	055,450.		
~	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign			NAME OF THE PARTY	
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	601,846.	601,846.		
4	Benefits paid to or for members	,	,,,,,,,		
5	Compensation of current officers, directors,				
	trustees, and key employees	739,143.	519,961.	179,285.	39,897.
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	3,244,815.	2,776,885.	362,076.	105,854.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	44,331.	31,185.	10,753.	2,393.
9	Other employee benefits	442,904.	365,912.	60,704.	16,288.
10	Payroll taxes	289,058.	238,810.	39,618.	10,630.
11	Fees for services (non-employees):				
а	Management				
b		12,000.		12,000.	
С		55,640.		55,640.	
d	Lobbying				
е	5 ( ) ( ) ( ) ( ) ( ) ( ) ( )	180,000.			180,000.
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0.)	582,596.	521,728.		60,868.
12	Advertising and promotion				
13	Office expenses				
14	Information technology	239,012.	156,152.	34,871.	47,989.
15	Royalties				
16	Occupancy	194,013.	124,132.	52,201.	17,680.
17	Travel	574,633.	547,376.	1,779.	25,478.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	28,381.	7,860.	19,515.	1,006.
20	Interest	68,074.	54,116.	9,054.	4,904.
21	Payments to affiliates	000 001	100 600		
22	Depreciation, depletion, and amortization	220,031.	138,620.	52,807.	28,604.
23	Insurance	53,643.	33,906.	12,809.	6,928.
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.)				
9	Printing & Publications	352,037.	304,835.		47,202.
	- Color - Landon Language - com	269,429.	229,253.	711.	39,465.
C	Telephone	26,039.	18,569.	4,179.	3,291.
d	Supplies	24,628.	14,235.	6,498.	3,895.
	All other expenses	142,538.	49,175.	7,878.	85,485.
25	Total functional expenses. Add lines 1 through 24e	9,080,289.	7,430,054.	922,378.	727,857.
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)				

Form 990 (2018)
Part X Balance Sheet

Part )	Balance Sheet			
	Check if Schedule O contains a response or note to any line in this Part X	yana		
		<b>(A)</b> Beginning of year		<b>(B)</b> End of year
1	Cash - non-interest-bearing	825,862.	1	1,303,748
2		5,172,381.	2	3,582,224
3		1,987,810.	3	1,490,187
4		297,201.	4	391,398
5			15.28	The tradette
	trustees, key employees, and highest compensated employees. Complete			
	Part II of Schedule L		5	
6			1	
	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	employers and sponsoring organizations of section 501(c)(9) voluntary		, no.	
2	employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
7 Assets	Notes and loans receivable, net	140,054.	7	124,961
ž   8			8	
9		200,043.	9	169,611
10	a Land, buildings, and equipment: cost or other		77	
	basis. Complete Part VI of Schedule D 10a 8,965,390.			
	b Less: accumulated depreciation 10b 3,085,551.	6,035,207.	10c	5,879,839
11		10,617,653.	11	10,722,536
12		4,324,731.	12	5,050,546
13	Investments - program-related. See Part IV, line 11		13	
14	✓ ************************************		14	
15		49,165.	15	49,559
16		29,650,107.	16	28,764,609
17	Accounts payable and accrued expenses	863,431.	17	694,503
18			18	
19			19	
20		2,575,323.	20	2,477,894
21	1000000		21	
22				
	key employees, highest compensated employees, and disqualified persons.		H. 1	Parks No.
22	Complete Part II of Schedule L		22	
<sup>1</sup>   23			23	
24	1 /	125,000.	24	125,000
25	, ,			
	parties, and other liabilities not included on lines 17-24). Complete Part X of	711 000		640 500
	Schedule D	711,293.	25	643,508
26		4,275,047.	26	3,940,905
	Organizations that follow SFAS 117 (ASC 958), check here ▶ X and		100	
27 28 29 30 31 32 32	complete lines 27 through 29, and lines 33 and 34.	14 550 005		15 201 124
27		14,772,295.	27	15,391,134
28		10 600 765	28	0 430 550
29		10,602,765.	29	9,432,570
!	Organizations that do not follow SFAS 117 (ASC 958), check here			
5	and complete lines 30 through 34.			
30	199111111111111111111111111111111111111		30	
31			31	
32		15 17F 0C0	32	04 000 004
00		25,375,060.	33	24,823,704
34	Total liabilities and net assets/fund balances	29,650,107.	34	28,764,609 Form <b>990</b> (201

	1990 (2016) COMMIT EECC THE	0 -	0 1 0 0 0	14	Pa	ge 12	
Pa	rt 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				01.	
2	Total expenses (must equal Part IX, column (A), line 25)	2	9,	80	0,2	89.	
3	Revenue less expenses. Subtract line 2 from line 1	3				88.	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))						
5	Net unrealized gains (losses) on investments	5	_	18	7,8	58.	
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		-3	2,5	10.	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,						
_	column (B))	10	24,	82	3,7	04.	
Pa	rt XIII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII					Ш	
					Yes	No	
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			3		143	
	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	18				
	separate basis, consolidated basis, or both:		08				
	Separate basis Consolidated basis Both consolidated and separate basis		0	12		14 A	
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,	1.0	V V			
	consolidated basis, or both:		5				
	X Separate basis Consolidated basis Both consolidated and separate basis		.90	1	W <sup>A</sup>	1919	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the						
	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 Scheol			FVIS	510	8.0	
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing						
	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	ed audi	t				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b			
			F	orm	990	(2018)	

#### SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# **Public Charity Status and Public Support**

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

➤ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Name of the organization Unitarian Universalist Service Committee Inc 04-6186012 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations g Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions)) Total

12591107 143399 34366,001

# 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.)

Se	ction A. Public Support		· · · · · · · · · · · · · · · · · · ·	,			=
Cale	endar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Gifts, grants, contributions, and				(4)2011	(0) 2010	(i) rotal
	membership fees received. (Do not						
	include any "unusual grants.")	10459122.	8141734.	7674074.	8042642.	6959775.	41277347.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf		1				
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	10459122.	8141734.	7674074.	8042642.	6959775.	41277347.
5	The portion of total contributions			TE Estrice Unity		INCHES YOU	
	by each person (other than a						
	governmental unit or publicly						l
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,		RESTURNATION OF THE		etro i		
	column (f)						4178553.
_6	Public support. Subtract line 5 from line 4.		CONTRACTOR OF THE	THE PROPERTY OF THE PARTY OF TH			37098794.
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4	10459122.	8141734.	7674074.	8042642.	6959775.	41277347.
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	220,047.	257,222.	303,624.	218,406.	320,506.	1319805.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on	33,184.	18,501.	20,116.	28,123.	46,548.	146,472.
10	Other income. Do not include gain						,
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10	f_ant # nt ar		In the section			42743624.
12	Gross receipts from related activities,	etc. (see instructio	ns)			12 1	,222,405.
13	First five years. If the Form 990 is for	the organization's				501(c)(3)	
Car	organization, check this box and stop	here					<b>&gt;</b>
	ction C. Computation of Publi	ALL STATEMENT COLORS					
	Public support percentage for 2018 (li					14	86.79 %
	Public support percentage from 2017					15	87.90 %
16a	33 1/3% support test - 2018. If the o						
	stop here. The organization qualifies	as a publicly suppo	orted organization	***************************************			X
b	33 1/3% support test - 2017. If the o						
	and stop here. The organization quali	fies as a publicly s	upported organizat	tion			.,
17a	10% -facts-and-circumstances test						
	and if the organization meets the "fact						
	meets the "facts-and-circumstances" t						
b	10% -facts-and-circumstances test						
	more, and if the organization meets th						
40	organization meets the "facts-and-circ						▶
18	Private foundation. If the organization	n did not check a b	ox on line 13, 16a	, 16b, 17a, or 17b,			
					Schee	dule A (Form 990	or 990-EZ) 2018

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

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

Section A. Public Support	ow, please comp	piete rait II.)				
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and	(8) 2014	(6) 2013	(0) 2010	(4) 2017	(e) 2010	(i) Total
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions,						
merchandise sold or services per-						
formed, 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 bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to					1	
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.)			A COLUMN			
Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6	107 = 0	12.0	(8) - 5 / 5	14/	10/2010	M. J. J. S. S.
10a Gross income from interest,						
dividends, payments received on						
securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income					1	
(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	ne organization's	s first, second, third	d, fourth, or fifth tax	year as a sectio	n 501(c)(3) organiza	tion,
check this box and stop here		**************************************	*******************			
Section C. Computation of Public	Support Per	centage				12-11-11-11-11-11-11-11-11-11-11-11-11-1
15 Public support percentage for 2018 (line	e 8, column (f), d	ivided by line 13, o	olumn (f))		15	%
16 Public support percentage from 2017 S	chedule A, Part	III, line 15			16	%
Section D. Computation of Investi					01	
17 Investment income percentage for 201	8 (line 10c, colur	nn (f), divided by lir	ne 13, column (f))	350	17	%
18 Investment income percentage from 20					18	%
19a 33 1/3% support tests - 2018. If the o						
more than 33 1/3%, check this box and	_					▶□
b 33 1/3% support tests - 2017. If the o						d
line 18 is not more than 33 1/3%, check	-				•	<b>_</b>
20 Private foundation. If the organization			·			
	S.S HOLDHOUN A	Contonino 17, 106	, or roo, origon trill	2 20x 410 366 III3		

#### Part IV | Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

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

	Yes	No
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3a		
	Q.S	(6)9/
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9b	nu ==	
9c		207
	10	0.34
ES	15-19	SW E
10a	1250	TVE.
10b		

Pa	rt IV   Supporting Organizations (continued)			
7			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
	71 11 0 0		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to	180.00	100	.,,,
•	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the		200	1.5
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or	17.5	5,544	
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	1		
2	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.  Did the organization operate for the benefit of any supported organization other than the supported			WC E
_				
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	0	(All CO.)	
Sec	supervised, or controlled the supporting organization. etion C. Type II Supporting Organizations	_   2		-
366	ation 6, Type it Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control		100	
	or management of the supporting organization was vested in the same persons that controlled or managed	TO VIEW		Waw
C	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			38
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	Halifal	in A	
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			-45
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how		neces	6.1
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a	1000		
	significant voice in the organization's investment policies and in directing the use of the organization's	100		
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	741		120
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction	ns).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	nstructions),		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		M.	1
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify	5- To E	94	
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined		20	947
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			Sta .
	reasons for the organization's position that its supported organization(s) would have engaged in these	011 <u>;</u> 26	0.75	STRY
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.		64.s	
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	100	Partie.	2027
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	24/4U)	25,	9
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Pa	rt V   Type III Non-Functionally Integrated 509(a)(3) Supportin	g Organi	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trust on N	lov. 20, 1970 (explain in F	Part VI.) See instructions. Al
	other Type III non-functionally integrated supporting organizations must co	mplete Sec	tions A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see	TWEST D		
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other	7500		
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
_6_	Multiply line 5 by .035	6		1
_7_	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount	T.		Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	The self had been	
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to		SAID BY BUT HOLD S	
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	ly integrated	Type III supporting orga	nization (see
	instructions).			-

Schedule A (Form 990 or 990-EZ) 2018

Schedule A	/Eorm	aan a	r 000.E71	2018	Commi	ttee	Tnc
scriedule A	(FOIII)	990 0	1 990-EZ1	2010	COMMIT		TILL

Pai	Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizations (continued)	
Sect	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe			
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	ne organization is responsive		
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2018		His Nation of the County	
а	From 2013			
b	From 2014			
С	From 2015	THE PLANE OF THE PERSON OF THE		MALL WATER
	From 2016	TESTINA VIEW		Chinales Services
	From 2017	CALLY SIME		
254-5	Total of lines 3a through e			
	Applied to underdistributions of prior years			
7,5	Applied to 2018 distributable amount	A SECTION		
i	Carryover from 2013 not applied (see instructions)			
1	Remainder, Subtract lines 3g, 3h, and 3i from 3f.			dado hvoje in 1999.
4	Distributions for 2018 from Section D, line 7:			
а	Applied to underdistributions of prior years			
b	Applied to 2018 distributable amount	The way is a second of the second	R. S. S. S. S. S. S.	
С	Remainder. Subtract lines 4a and 4b from 4.			I OLIVET NETT THE SAME OF
5	Remaining underdistributions for years prior to 2018, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2018. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3			
	and 4c.			
8	Breakdown of line 7:	River of the Ya		
	Excess from 2014	La tribucellemon Vi		
_	Excess from 2015			
	Excess from 2016		el ordalization consolina	B S S S S S S S S S S S S S S S S S S S
	Excess from 2017	M ADRIES SELDEN	VALUE CARROLIVEN	
	Excess from 2018	A TO A STANSAND	MINERAL STATE	AND STREET
C	EXCOCC TOTAL ECTO			

Schedule A (Form 990 or 990-EZ) 2018

#### Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

### Schedule of Contributors

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

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

Unitarian Universalist Service

OMB No. 1545-0047

2018

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Committee Inc 04-6186012 Organization type (check one): Filers of: Section: X 501(c)( 3 ) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \_\_\_\_\_\_\_ > \$\_ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the instructions for 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 a	dditional 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 or	•			Employer identification number			
	rian Universalist Servic ttee Inc	e		04-6186012			
Part III	Exclusively religious, charitable, etc., contribution from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, cl	brough (e) and the following line e	ntry For organizations	(10) that total more than \$1,000 for the year			
	Use duplicate copies of Part III if additional s	pace is needed.	Tess for the year. (Enter this	into once, r			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d)	Description of how gift is held			
<u></u>							
		(e) Transfer of g	ift				
	Transferee's name, address, and	1 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			of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d)	Description of how gift is held			
	L	(e) Transfer of gi	ft				
	Transferee's name, address, and	I ZIP + 4	Relationship of	of transferor to transferee			
	-						
1							

#### SCHEDULE C

(Form 990 or 990-EZ)

# **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.

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form990 for instructions and the latest information. Inspection If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

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

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

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

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy

Гах	) (see separate instructions), then				
0	Section 501(c)(4), (5), or (6) organizat	tions: Complete Part III.			
Van	ne of organization Unitari	an Universalist S	ervice	Emp	loyer identification number
	Committ				04-6186012
Pa	art I-A   Complete if the org	janization is exempt unde	r section 501(c) o	r is a section 527 or	ganization.
2	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai	ures			
Pa	rt I-B   Complete if the org	anization is exempt unde	r section 501(c)(3	).	
1	Enter the amount of any excise tax	incurred by the organization unde	r section 4955	<b>&gt;</b> \$	
2	Enter the amount of any excise tax	incurred by organization manager			
	If the organization incurred a sectio				
4a	Was a correction made?				Yes No
	If "Yes," describe in Part IV.				
Pa	art I-C Complete if the org	janization is exempt unde	r section 501(c), e	except section 501(c	)(3).
2	Enter the amount directly expended Enter the amount of the filing organ exempt function activities Total exempt function expenditures	ization's funds contributed to other.  Add lines 1 and 2. Enter here an	er organizations for second	otion 527 ► \$	,
	line 17b				
4	Did the filing organization file Form	1120-POL for this year?		***************************************	Yes No
5	Enter the names, addresses and en	-			
	made payments. For each organizar contributions received that were propolitical action committee (PAC). If a	omptly and directly delivered to a	separate political organ	nization, such as a separat	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization.  If none, enter -0
-					

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

Schedule C (Form 990 or 990-EZ) 2018

LHA

832041 11-08-18

Part II-A Complete if the organization section 501(h)).	on is exempt under section 501(c)(3) and file		ction under
expenses, and share of exce	gs to an affiliated group (and list in Part IV each affiliated as lobbying expenditures).  sed box A and "limited control" provisions apply.	group member's name	, address, EIN,
Limits on Lob (The term "expenditures" n	(a) Filing organization's totals	(b) Affiliated group totals	
1a Total lobbying expenditures to influence pub	lic opinion (grass roots lobbying)	12,819.	
b Total lobbying expenditures to influence a le	gislative body (direct lobbying)	12,091.	
c Total lobbying expenditures (add lines 1a an	d 1b)	24,910.	
	III	8,327,522.	
e Total exempt purpose expenditures (add line	s 1c and 1d)	8,352,432.	
f Lobbying nontaxable amount. Enter the amo		567,622.	
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	PWO TOWNS	
Not over \$500,000	20% of the amount on line 1e.		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
Over \$17,000,000	\$1,000,000.		
g Grassroots nontaxable amount (enter 25% o	f line 1f)	141,906.	
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, e	nter -0-	0 .	
j If there is an amount other than zero on either	er 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 o	of the five columns be	low.

See the separate instructions for lines 2a through 2f.)

	Lobbying Expend	litures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	<b>(c)</b> 2017	(d) 2018	(e) Total
2a Lobbying nontaxable amount	607,970.	587,746.	578,943.	567,622.	2,342,281.
b Lobbying ceiling amount (150% of line 2a, column(e))		4-11-1			3,513,422.
c Total lobbying expenditures	110,210.	91,589.	42,585.	24,910.	269,294.
d Grassroots nontaxable amount	151,993.	146,937.	144,736.	141,906.	585,572.
e Grassroots ceiling amount (150% of line 2d, column (e))					878,358.
f Grassroots lobbying expenditures	48,854.	32,684.	30,269.	12,819.	124,626.

Schedule C (Form 990 or 990-EZ) 2018

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)).

or ea	ch "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	(a	)	(k	o)
of the	lobbying activity.	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state, or		2 2 1 1		
1	local legislation, including any attempt to influence public opinion on a legislative matter	1.0			
	or referendum, through the use of:	إستساري	200	air and	
a '	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				1
С	Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
	Grants to other organizations for lobbying purposes?				
	Direct contact with legislators, their staffs, government officials, or a legislative body?				
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
	Other activities?	NAME OF THE OWNER.	Low History		
J	Total. Add lines 1c through 1i		V = V = 313	9771 E 76	1 1
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	1	27 34 34		
	If "Yes," enter the amount of any tax incurred under section 4912  If "Yes," enter the amount of any tax incurred by organization managers under section 4912		TE SE		
					. 44
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?  III-A Complete if the organization is exempt under section 501(c)(4), section	1 501(c)(5	), or sec	tion	
20,0	501(c)(6).		,,		
			4/2	Yes	N
1 '	Were substantially all (90% or more) dues received nondeductible by members?		1		
	Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
2   3	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	e prior year? n 501(c)(5	), or sec		3, is
2 3 Part	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes."	e prior year? n 501(c)(5 'No," OR	2 3 ), or sec (b) Part		e 3, is
2 3 Part	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	e prior year? n 501(c)(5 'No," OR	2 3 ), or sec (b) Part		e 3, is
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2   3   Part   1   2   6   6   6   6   6   6   6   6   6	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year	e prior year? n 501(c)(5 'No," OR	2 3 3), or sec (b) Part		e 3, is
2   3   Part   1   2   3   6   6   6   6   6   7   3   7   7   7   7   7   7   7   7	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	e prior year? n 501(c)(5 'No," OR	2 3 3), or sec (b) Part		3, is
2   3   Part   2   5   6   6   6   6   6   6   6   6   6	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds	e prior year? n 501(c)(5 'No," OR	2 3 3), or sec (b) Part		e 3, is
2   3   Part   1   2   3   6   6   6   6   6   6   6   6   6	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the Sol(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures (and not include amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures (by a contract of the exceeded estimate of nondeductible lobbying and political expenditures (and not include amount on line 3).	e prior year? n 501(c)(5 'No," OR	2 3 (b) Part 1 2a 2b 2c 3		3, is
2   3   Part	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the Sol(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polyper polypers.	e prior year? n 501(c)(5 'No," OR	2 3 3), or sec (b) Part		e 3, is
2   3   Part   1   2   3   6   6   6   6   6   7   3   7   7   7   7   7   7   7   7	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	e prior year? n 501(c)(5 'No," OR	2 3 3), or sec (b) Part		•
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2   3   1   2   5   6   6   6   6   6   6   6   6   6	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedages the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pole expenditure next year?  Taxable amount of lobbying and political expenditures (see instructions)  IV Supplemental Information	e prior year? n 501(c)(5 'No," OR sal	2 3 3 3 ), or sec (b) Part 1 2a 2b 2c 3 4 5	III-A, line	2 3, i
2   1   2   5   6   6   7   7   7   7   7   7   7   7	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pole expenditure next year?  Taxable amount of lobbying and political expenditures (see instructions)  IV Supplemental Information  e the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group)	e prior year? n 501(c)(5 'No," OR sal	2 3 3 3 ), or sec (b) Part 1 2a 2b 2c 3 4 5	III-A, line	3, i
2   1   2   5   6   6   7   7   7   7   7   7   7   7	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedages the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pole expenditure next year?  Taxable amount of lobbying and political expenditures (see instructions)  IV Supplemental Information	e prior year? n 501(c)(5 'No," OR sal	2 3 3 3 ), or sec (b) Part 1 2a 2b 2c 3 4 5	III-A, line	3, i
2   1   2   5   6   6   7   7   7   7   7   7   7   7	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pole expenditure next year?  Taxable amount of lobbying and political expenditures (see instructions)  IV Supplemental Information  e the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group)	e prior year? n 501(c)(5 'No," OR sal	2 3 3 3 ), or sec (b) Part 1 2a 2b 2c 3 4 5	III-A, line	e 3, i
2   1   2   5   6   6   7   7   7   7   7   7   7   7	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pole expenditure next year?  Taxable amount of lobbying and political expenditures (see instructions)  IV Supplemental Information  e the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group)	e prior year? n 501(c)(5 'No," OR sal	2 3 3 3 ), or sec (b) Part 1 2a 2b 2c 3 4 5	III-A, line	e 3, i
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## **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990.

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

Inspection

OMB No. 1545-0047

Name of the organization

Unitarian Universalist Service

Committee Inc

Employer identification number 04-6186012

Pa	rt I Organizations Maintaining Donor Advised	Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line	6.	<u> </u>
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in w	riting that the assets held in donor advise	ed funds
	are the organization's property, subject to the organization's e		
6	Did the organization inform all grantees, donors, and donor ad		
	for charitable purposes and not for the benefit of the donor or		-
		and the second s	
Pa	rt II Conservation Easements. Complete if the orga		
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or ed		orically important land area
	Protection of natural habitat	Preservation of a cert	
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifie	ed conservation contribution in the form o	of a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		
b			
c	Number of conservation easements on a certified historic structure.		
	Number of conservation easements included in (c) acquired af		
_	listed in the National Register		
3	Number of conservation easements modified, transferred, rele		
_	year >	gerenou, en terminateu by the	organization during the tax
4	Number of states where property subject to conservation ease	ement is located	
5	Does the organization have a written policy regarding the period		
	violations, and enforcement of the conservation easements it h		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, h	533 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	***************************************
7	Amount of expenses incurred in monitoring, inspecting, handli	ng of violations, and enforcing conservati	ion easements during the year
	<b>▶</b> \$		ion oddomome damig and your
8	Does each conservation easement reported on line 2(d) above	satisfy the requirements of section 170/h	n)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation		
	include, if applicable, the text of the footnote to the organization	·	
	conservation easements.		
Par	rt III Organizations Maintaining Collections of A	Art, Historical Treasures, or Oth	ner Similar Assets.
	Complete if the organization answered "Yes" on Form 9	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (ASC	958), not to report in its revenue statem	ent and balance sheet works of art,
	historical treasures, or other similar assets held for public exhib		
	the text of the footnote to its financial statements that describe	es 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, edu	cation, or research in furtherance of pub	lic service, provide the following amounts
	relating to these items:	•	.,
	(i) Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical treas		
	the following amounts required to be reported under SFAS 116		
а	Revenue included on Form 990, Part VIII, line 1		> \$
	Assets included in Form 990, Part X		

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

Schedule D (Form 990) 2018

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		$\pm 11 C$

Pai	rt III   Organizations Maintaining C	ollections of Ar	t, Historical Tre	asures, or O	ther Simil	ar Assets	(continue	ed)
3	Using the organization's acquisition, accession							
	(check all that apply):							
а	Public exhibition	d	Loan or exc	hange programs				
b	Scholarly research	е	Other					
С	Preservation for future generations		10-11-1					
4	Provide a description of the organization's co	llections and explair	how they further th	e organization's	exempt purp	ose in Part	XIII.	
5	During the year, did the organization solicit or	receive donations of	of art, historical treas	sures, or other sir	milar assets			
	to be sold to raise funds rather than to be ma	intained as part of th	ne organization's col	llection?			Yes	No
Pai	t IV Escrow and Custodial Arrang		ete if the organizatio	n answered "Yes	s" on Form 9	90, Part IV, I	line 9, or	
	reported an amount on Form 990, Par	t X, line 21.						
1a	Is the organization an agent, trustee, custodia	an or other intermed	ary for contributions	s or other assets	not included	i		
	on Form 990, Part X?		***************************************				Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII a	and complete the fol	lowing table:		-			
							Amount	
С	Beginning balance				10			
	Additions during the year							
	Distributions during the year							
	Did the organization include an amount on Fo						Yes	No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	planation has been	provided on Part	XIII			
Par	rt V Endowment Funds. Complete in	the organization an	swered "Yes" on Fo	rm 990, Part IV, I	line 10.			
		(a) Current year	(b) Prior year	(c) Two years ba	ick (d) Thre	e years back	(e) Four ye	ars back
1a	Beginning of year balance	14,539,232.	12,738,655.	11,970,55	58. 12	,188,326.		31,318.
b	Contributions	668,430.	2,005,427.	725,85	57.	821,152.	1,9	68,663.
С	Net investment earnings, gains, and losses	1,452,677.	1,046,381.	1,672,03	31.	286,426.	25	91,125.
d	Grants or scholarships							
е	Other expenditures for facilities							
	and programs	1,292,941.	1,170,730.	1,542,95	57. 1	,252,498.	1,20	57,921.
f	Administrative expenses	80,547.	80,501.	86,83	34.	72,848.		74,859.
g	End of year balance	15,286,851.	14,539,232.	12,738,65	55. 11	,970,558.	12,18	38,326.
2	Provide the estimated percentage of the curre		(line 1g, column (a)	) held as:				
а	Board designated or quasi-endowment	55.30	%					
b	Permanent endowment ► 37.10	<u>%</u>						
С	Temporarily restricted endowment	7.60 %						
	The percentages on lines 2a, 2b, and 2c should							
За	Are there endowment funds not in the posses	ssion of the organiza	tion that are held an	d administered f	or the organ	ization		
	by:						Y	es No
	(i) unrelated organizations						3a(i)	X
	(ii) related organizations						3a(ii)	X
b	If "Yes" on line 3a(ii), are the related organizate	tions listed as require	ed on Schedule R?	********			3b	
4	Describe in Part XIII the intended uses of the		vment funds.					
Par	t VI Land, Buildings, and Equipme							
	Complete if the organization answered	I "Yes" on Form 990	Part IV, line 11a. S	ee Form 990, Pa	rt X, line 10.			
	Description of property	(a) Cost or o			(c) Accumula		(d) Book v	alue
		basis (investr			depreciation	n		
1a	Land			0,001.				001.
b	Buildings		6,71	2,861.	2,359,	164.	4,353,	697.
C	Leasehold improvements							4 - 6
	Equipment			9,537.	726,	387.		150.
	Other			2,991.				991.
Total	l. Add lines 1a through 1e. (Column (d) must ed	gual Form 990, Part	K, column (B), line 10	)c.)		***	5,879,	
						Schedule	D (Form 9	90) 2018

(Form 990) 2018	Committee	In

Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11b. See Form 990, Part >	, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuati	on: Cost or end-of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A) Government Issued			
(B) Securities	3,007,602.	End-of-Year	Market Value
(C) Corporate Bonds	1,864,169.	End-of-Year	Market Value
(D) Assets Related to Pooled			
(E) Funds	178,775.	End-of-Year	Market Value
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	5,050,546.		
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990, Part X	, line 13.
(a) Description of investment	(b) Book value		on: 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.)		DAYES CO. THE WAY	
Part IX Other Assets.			
	on Form 990, Part IV, line	11d. See Form 990, Part X	, line 15.
Part IX Other Assets.  Complete if the organization answered "Yes"	on Form 990, Part IV, line <sup>-</sup> Description	l1d. See Form 990, Part X	, line 15.  (b) Book value
Part IX Other Assets.  Complete if the organization answered "Yes"		11d. See Form 990, Part X	
Part IX Other Assets.  Complete if the organization answered "Yes"  (a)		I1d. See Form 990, Part X	
Part IX Other Assets.  Complete if the organization answered "Yes"  (a)  (1)		I1d. See Form 990, Part X	
Part IX Other Assets.  Complete if the organization answered "Yes"  (a)  (1)  (2)		I1d. See Form 990, Part X	
Part IX Other Assets.  Complete if the organization answered "Yes"  (a)  (1)  (2)  (3)		I1d. See Form 990, Part X	
Part IX Other Assets.  Complete if the organization answered "Yes"  (a)  (1)  (2)  (3)  (4)		11d. See Form 990, Part X	
Part IX Other Assets.  Complete if the organization answered "Yes"  (a)  (1)  (2)  (3)  (4)  (5)		I1d. See Form 990, Part X	
Complete if the organization answered "Yes"  (a)  (1)  (2)  (3)  (4)  (5)  (6)		I1d. See Form 990, Part X	
Part IX Other Assets.  Complete if the organization answered "Yes"  (a)  (1)  (2)  (3)  (4)  (5)  (6)  (7)		I1d. See Form 990, Part X	
Part IX Other Assets.  Complete if the organization answered "Yes"  (a)  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)	Description	I1d. See Form 990, Part X	
Complete if the organization answered "Yes"  (a)  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line	Description		(b) Book value
Part IX Other Assets.  Complete if the organization answered "Yes"  (a)  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) lines  Part X Other Liabilities.	Description  2 15.)  on Form 990, Part IV, line		(b) Book value
Part IX Other Assets.  Complete if the organization answered "Yes"  (a)  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line  Part X Other Liabilities.  Complete if the organization answered "Yes"	Description  2 15.)  on Form 990, Part IV, line	1e or 11f. See Form 990,	(b) Book value
Complete if the organization answered "Yes"  (a)  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  Total. (Column (b) must equal Form 990. Part X. col. (B) lines  Part X Other Liabilities.  Complete if the organization answered "Yes"  1. (a) Description of liability	Description  2 15.)  on Form 990, Part IV, line	1e or 11f. See Form 990,	(b) Book value
Part IX Other Assets.  Complete if the organization answered "Yes"  (a)  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) lines  Part X Other Liabilities.  Complete if the organization answered "Yes"  1. (a) Description of liability  (1) Federal income taxes	Description  2 15.)  on Form 990, Part IV, line	11e or 11f. See Form 990, b) Book value	(b) Book value
Part IX Other Assets.  Complete if the organization answered "Yes"  (a)  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  Total. (Column (b) must equal Form 990. Part X. col. (B) line Part X Other Liabilities.  Complete if the organization answered "Yes"  1. (a) Description of liability  (1) Federal income taxes  (2) Gift Annuities Payable	on Form 990, Part IV, line	11e or 11f. See Form 990, b) Book value 580,975.	(b) Book value
Complete if the organization answered "Yes"  (a)  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.  Complete if the organization answered "Yes"  1. (a) Description of liability  (1) Federal income taxes  (2) Gift Annuities Payable  (3) Liabilities Under Trust Age	on Form 990, Part IV, line	11e or 11f. See Form 990, b) Book value 580, 975. 53.	(b) Book value
Complete if the organization answered "Yes"  (a)  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  Total. (Column (b) must equal Form 990. Part X. col. (B) line Part X Other Liabilities.  Complete if the organization answered "Yes"  1. (a) Description of liability  (1) Federal income taxes  (2) Gift Annuities Payable  (3) Liabilities Under Trust Ag  (4) Pooled Income Deferred Rev	on Form 990, Part IV, line	11e or 11f. See Form 990, b) Book value 580, 975. 53.	(b) Book value
Complete if the organization answered "Yes"  (a)  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  Total. (Column (b) must equal Form 990. Part X. col. (B) line Part X Other Liabilities.  Complete if the organization answered "Yes"  1. (a) Description of liability  (1) Federal income taxes  (2) Gift Annuities Payable  (3) Liabilities Under Trust Act  (4) Pooled Income Deferred Rev.  (5)	on Form 990, Part IV, line	11e or 11f. See Form 990, b) Book value 580, 975. 53.	(b) Book value
Complete if the organization answered "Yes"  (a)  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  Total. (Column (b) must equal Form 990. Part X. col. (B) lines  Part X Other Liabilities.  Complete if the organization answered "Yes"  1. (a) Description of liability  (1) Federal income taxes  (2) Gift Annuities Payable  (3) Liabilities Under Trust Ag  (4) Pooled Income Deferred Rev  (5)  (6)	on Form 990, Part IV, line	11e or 11f. See Form 990, b) Book value 580, 975. 53.	(b) Book value
Complete if the organization answered "Yes"  (a)  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  Total. (Column (b) must equal Form 990. Part X. col. (B) lines Part X Other Liabilities.  Complete if the organization answered "Yes"  1. (a) Description of liability  (1) Federal income taxes  (2) Gift Annuities Payable  (3) Liabilities Under Trust Ag  (4) Pooled Income Deferred Rev  (5)  (6)  (7)	on Form 990, Part IV, line	11e or 11f. See Form 990, b) Book value 580, 975. 53.	(b) Book value
Complete if the organization answered "Yes"  (a)  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  Total. (Column (b) must equal Form 990. Part X. col. (B) line Part X Other Liabilities.  Complete if the organization answered "Yes"  1. (a) Description of liability  (1) Federal income taxes  (2) Gift Annuities Payable  (3) Liabilities Under Trust Ag  (4) Pooled Income Deferred Rev  (5)  (6)  (7)  (8)	Description  15.)  on Form 990, Part IV, line  greement  renue	11e or 11f. See Form 990, b) Book value 580, 975. 53.	(b) Book value
Complete if the organization answered "Yes"  (a)  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  Total. (Column (b) must equal Form 990. Part X. col. (B) line Part X Other Liabilities.  Complete if the organization answered "Yes"  1.  (a) Description of liability  (1) Federal income taxes  (2) Gift Annuities Payable  (3) Liabilities Under Trust Ag  (4) Pooled Income Deferred Rev  (5)  (6)  (7)  (8)  (9)	Description  15.)  on Form 990, Part IV, line  greement  renue	11e or 11f. See Form 990, b) Book value 580, 975. 53. 62,480.	(b) Book value

Schedule D (Form 990) 2018

Committee Inc

Pa	t XI Reconciliation of Revenue per Audited Financial Stateme	ents With	Revenue per Ret	turn.	and the second s
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	ì.			
1	Total revenue, gains, and other support per audited financial statements		***********	1	8,908,916.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		3411-30-00-00-00-00-3-3-4-3-00-00-00-00-00-00-00-00-00-00-00-00-0		
а	Net unrealized gains (losses) on investments	2a	-187,858.	V 81	
b	Donated services and use of facilities	. 2b			
С	Recoveries of prior year grants	. 2c		Cont	
d	Other (Describe in Part XIII.)	2d	347,473.		
е	Add lines 2a through 2d			2e	159,615.
3	Subtract line 2e from line 1			3	8,749,301.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	î f		1320	
а	Investment expenses not included on Form 990, Part VIII, line 7b	-		330	
b	Other (Describe in Part XIII.)			= 200	0
	Add lines 4a and 4b			4c	0.
5 Da	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)  rt XII   Reconciliation of Expenses per Audited Financial Statem			5 oturr	8,749,301.
Pa			Expenses per n	eturi	la)
_	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a			. [	9,460,272.
1	Total expenses and losses per audited financial statements			1	3,400,272.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	001		33	
a	Donated services and use of facilities			ELV:	
b	Prior year adjustments	4		373	
c d	Other losses Other (Describe in Part XIII.)		379,983.	Swo)	
u e	Add lines 2a through 2d			2e	379,983.
3	Subtract line 2e from line 1			3	9,080,289.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			RI B	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		Suppl	
b	Other (Describe in Part XIII.)				
-	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	9,080,289.
Pa	rt XIII Supplemental Information.				
Prov	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part	t 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 add	ditional inforn	nation.		
_					
Pai	ct V, line 4:				
TTTT	SC'S endowment funds support programs with	an ann	uual amondii	n.a. 1	rate of
008	se s endowment runds support programs with	an am	idai spendi	uy i	ate or
5%.					
500					
Pai	ct X, Line 2:				
UUS	SC accounts for the effect of any uncertain	n tax r	ositions b	asec	l on a
"mo	ore likely than not" threshold to the reco	gnition	of the tax	x po	sitions
		c . 1			,
be	ing sustained based on the technical merit	s of tr	ne position	unc	ler
	cutiny by the applicable taxing authority.	Tf a	taw poditi	on 6	~ ~ ~
SCI	during by the applicable taxing authority.	тт а	cax position	011 (	)1
gog	sitions are deemed to result in uncertaint	ies of	those posi	tior	is, the
		<b></b> -			
uni	recognized tax benefit is estimated based	on a "c	umulative ;	prok	oability
ass	sessment" that aggregates the estimated tax	x liabi			
02205	4 10-29-18			Sched	ule D (Form 990) 2018

Schedule D (Form 990) 2018 Committee Inc 04-6186012 Page 5
Part XIII   Supplemental Information (continued)
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
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.
Part XI, Line 2d - Other Adjustments:
Rental expense 379,983.
Change in value of split-interest gifts -32,510.
Total to Schedule D, Part XI, Line 2d 347,473.
Part XII, Line 2d - Other Adjustments:
Rental expense 379,983.

#### SCHEDULE F (Form 990)

Department of the Treasury

### 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.

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

2018
Open to Public Inspection

Name of the organization

Unitarian Universalist Service

Committee Inc

Employer identification number

04-6186012

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.

United States.					
3 Activities per Region. (T	he following Part	I, line 3 table ca	an be duplicated if additional space is ne	eded.)	
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, pro- gram 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 the region	(f) Total expenditures for and investments in the region
Central America and			Grants to Recipients		
the Caribbean	0	0	Located in the Region		120,000.
East Asia and the	0	0	Grants to Recipients Located in the Region		254,387.
					251,567.
Europe (Including			Grants to Recipients		
Iceland & Greenland)	0	0	Located in the Region		126,500.
			Grants to Recipients		
North America	0	0	Located in the Region		89,000.
			Grants to Recipients		
Sub-Saharan Africa	0	0	Located in the Region		11,960.
3 a Subtotal	0	0		81.14 M 1 M 1 M 1 M 1 M 1 M 1 M 1 M 1 M 1 M	601,847.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	0	0			601,847.

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

Schedule F (Form 990) 2018

Committee Inc Schedule F (Form 990) 2018 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. Part II

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 noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	Humanitarian Assistance	15,000.	Wire Transfer	o		
		Central America and the Caribbean	Humanitarian Assistance	20,000.	Wire Transfer	0		
		Central America and the Caribbean	Humanitarian Assistance	20,000.	20,000.Wire Transfer	0		
		Central America and the Caribbean	Humanitarian Assistance	50,000.	000. Wire Transfer	0		
		Central America and the Caribbean	Humanitarian Assistance	15,000.	000. Wire Transfer	0		
		East Asia and the Pacific	Humanitarian Assistance	25,000.	25,000. Wire Transfer	*0		
		East Asia and the Pacific	Humanitarian Assistance	25,387.	Wire Transfer	0.		
		East Asia and the Pacific	Humanitarian Assistance	25,000.	25,000. Wire Transfer	*0		
2 Enter total number of	recipient organization	ns listed above that are r	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IDS or for which the greates or country has been provided a continued by a continued by a continued by a continued by the IDS or for which the greates or country has been provided a continued by the IDS or for which the greatest or country in the IDS or for which the greatest or country in the IDS or for which the greatest or country in the IDS or for which the greatest or country in the IDS or for which the greatest or country in the IDS or for which the greatest or country in the IDS or for which the greatest or continued by the IDS or for which	oreign country, r	ecognized as tax-exe	ampt		29

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

Enter total number of other organizations or entities

က

Schedule F (Form 990) 2018

35

Unitarian Universalist Service Committee Inc

Schedule F (Form 990)	Committee	ttee Inc	arrac service		04-6186012	86012		Page 2
Part II Continuation o	of Grants and Other	Continuation of Grants and Other Assistance to Organizations or	tions or Entities Outside the United States.	Jnited States.	(Schedule F (Form 990), Part II, line 1)	90), 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	25,000,	25,000. Wire Transfer	0		
		East Asia and the Pacific	Humanitarian Assistance	25,000.	25,000.Wire Transfer	0.		
		East Asia and the Pacific	Humanitarian Assistance	36,000,	36,000.Wire Transfer	0.		
		East Asia and the Pacific	Humanitarian Assistance	25,000.	25,000.Wire Transfer	*0		
		Bast Asia and the Pacific	Humanitarian Assistance	20,000.	20,000.Wire Transfer	.0		
		East Asia and the Pacific	Humanitarian Assistance	22,000.	22,000.Wire Transfer	0		
		Bast Asia and the Pacific	Humanitarian Assistance	26,000.	26,000.Wire Transfer	*0		
		Europe (Including Iceland & Greenland)	Humanitarian Assistance	10,000.	Wire Transfer	• 0		
		Europe (Including Iceland & Greenland)	Humanitarian Assistance	25,000.	Wire Transfer	*0		Y

Unitarian Universalist Service Committee Inc

Page 2		(h) Description (i) Method of of non-cash valuation (book, FMV, assistance appraisal, other)																							
86012	90), Part II, line 1)	(g) Amount of non-cash assistance		0			0.			0			.0			0			0			0		0	
04-6186012	(Schedule F (Form 990), Part II, line 1)	(f) Manner of cash disbursement		20,000 Wire Transfer			Wire Transfer			15,000. Wire Transfer			Wire Transfer			12,500, Wire Transfer			10,000. Wire Transfer			10,000. Wire Transfer		20,000. Wire Transfer	
		(e) Amount of cash grant		20,000.			12,000.0			15,000.			12,000.			12,500.			10,000.			10,000.		20,000.	0
ersarrsc service	ions or Entities Outside the United States.	(d) Purpose of grant	Humanitarian	Assistance		Humanitarian	Assistance		Humanitarian	Assistance		Humanitarian	Assistance		4	Assistance		Humanitarian	Assistance		Humanitarian	Assistance	, , , , , , , , , , , , , , , , , , , ,	Assistance	Humanitarian
Inc	Continuation of Grants and Other Assistance to Organizations or	(c) Region	cluding	Greenland)	Europe (Including		Greenland)	Europe (Including	Iceland &	Greenland)	Europe (Including	Iceland &	Greenland)	sailou [ o a 1 ) o accaus	rooland r	_	cluding	- 3	ıd)	ממוחייום ( דמת ביות	29	Greenland)		North America	
Committee	Grants and Other A	(b) IRS code section and EIN (if applicable)	H T					[P]		9			9						9						
Schedule F (Form 990)	Part II Continuation of	1 (a) Name of organization										The second second													

Unitarian Universalist Service

Committee Inc

Schedule F (Form 990)

04-6186012

(i) Method of valuation (book, FMV, appraisal, other) Page 2 (h) Description of non-cash assistance Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1) (g) Amount of non-cash assistance . 0 0 of cash grant cash disbursement 25,000. WIRE Transfer 15,000. Wire Transfer 11,960. Wire Transfer (f) Manner of (e) Amount (d) Purpose of grant **Tumanitarian Jumanitarian** Humanitarian Assistance Assistance Assistance (c) Region North America North America Sub-Saharan Africa (b) IRS code section and EIN (if applicable) (a) Name of organization Part II

04-6186012

Committee Inc

Schedule F (Form 990) 2018

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.

(h) Method of valuation (book, FMV, appraisal, other)				- N		Schedule F (Form 990) 2018
(g) Description of noncash assistance						Sched
(f) Amount of noncash assistance						
(e) Manner of cash disbursement			?			
(d) Amount of cash grant						
(c) Number of recipients						
(b) Region						
(a) Type of grant or assistance (b) Region						

Part	IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately 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; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2018

## 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. See instructions.

## Part I, Line 2:

Activities for each grant are outlined in the proposal form and are mutually agreed upon by UUSC and the partner organization. The goals of the project must be in line with UUSC's mission and vision and the partner organization must comply with Department of Treasury regulations.

Once the grant is awarded, the progress of goals and activities is monitored using a results based monitoring and evaluation system that includes the following methods: metrics systems, whole measure rating scale, complex adaptive systems, systems thinking, observation and ethnographic story lines. These methods are implemented through a variety of ways such as site visits, regular phone calls, focus group meetings, written reports, and financial reports.

A written midterm report is requested as well as a financial report.

Upon completion of the project, a final written narrative and financial report is requested that analyzes the success and challenges of the project based on the goals and activities outlined in the proposal.

### Schedule F, Part II, Line 2:

The number of grantees listed on Part II, Line 2 represents the number of recipient organizations, not the number of grants made.

## **SCHEDULE G**

(Form 990 or 990-EZ)

## Supplemental Information Regarding Fundraising or Gaming Activities

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

Open to Public

OMB No. 1545-0047

Department of the Treasury

Internal Revenue Service	► Go	to www.irs.gov/Form990 for instr	uction	s and	the latest informati	on.	mspection
Name of the organization	Unitaria	an Universalist Se	rvi	ce		Employer id	entification number
	Committe	ee Inc				04-6186	012
	ing Activities.	Complete if the organization answe	ered "Y	'es" oı	n Form 990, Part IV, I	ine 17. Form 990-E	Z filers are not
a X Mail solicitati b X Internet and c C X Phone solicit d X In-person soli 2 a Did the organization key employees liste	ons email solicitations ations icitations n have a written o ed in Form 990, Pa highest paid indiv	f Solicitate g Special r oral agreement with any individual art VII) or entity in connection with priduals or entities (fundraisers) pursu	tion of tion of fundra (includ	non-g gover aising ding of ional f	overnment grants rnment grants events fficers, directors, trus undraising services?	X Ye	
(i) Name and address or entity (fund		(ii) Activity	have o	Did raiser ustody ntrol of utions?	(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 M	arketing -		Yes	No			
1250 Connecticut Av	e. NW,	Donor Marketing		Х	1,880,544.	151,924	1,728,620.
Public Interest							1

1250 Connecticut Ave. NW,	Donor Marketing	х	1,880,544	151,924.	1,728,620.
Public Interest					
Communications - 7700	Phone Solicitation	X	73,873	28,076.	45 <sub>%</sub> 797.
,					
Total	*	 <b>&gt;</b>	1,954,417	180,000.	1,774,417.

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration 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, MS, LA, MO, ND, AZ

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

Schedule G (Form 990 or 990-EZ) 2018

Pa	art	Fundraising Events. Complete if the of fundraising event contributions and groups.	ne organization answered	d "Yes" on Form 990, P	art IV, line 18, or reported	I more than \$15,000
		or formulating event contributions and gir	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through
o)			(event type)	(event type)	(total number)	col. <b>(c)</b> )
Revenue						
Rev	1	Gross receipts				
	2	Less: Contributions				
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
Ŋ	5	Noncash prizes				
chense	6	Rent/facility costs				<u> </u>
Direct Expenses	7	Food and beverages				
	8	Entertainment		4		
	9	Other direct expenses	0: 1 (1)			
	10	Direct expense summary. Add lines 4 through Net income summary. Subtract line 10 from li	19 in column (d)			
Pa	art	III Gaming. Complete if the organization a		990. Part IV. line 19. o	r reported more than	
		\$15,000 on Form 990-EZ, line 6a.				
Φ			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
Revenue			(4) 290	bingo/progressive bingo	(b) carior garming	col. (a) through col. (c))
- Re	1	Gross revenue				
ses	2	Cash prizes				
Expens	3	Noncash prizes				
Direct Expenses	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes % No	Yes %	S 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)	***************************************	<b>&gt;</b>	
0	En	ter the state(s) in which the organization condu	ata gaming activities.			
		the organization licensed to conduct gaming ac		states?		Yes No
		No," explain:				
	_	· · · · · · · · · · · · · · · · · · ·				
	-					
		ere any of the organization's gaming licenses re Yes," explain:				Yes No
Ŋ		. so, oxpiain.				
83208	32 10	0-03-18			Schedule G (Fo	rm 990 or 990-EZ) 2018

## Unitarian Universalist Service

Schedule G (Form 990 or 990-EZ) 2018 COMMITTEE Inc	04-6186012 Page 3
11 Does the organization conduct 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 conducted in:	W (W)
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 rec	ords:
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 a	mount
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 sper	1*11**********
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 9h 10h
15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	, v, and r are in, inico o, ob, rob,
Schedule G, Part I, Line 2b, List of Ten Highest Paid Fundra	aisers:
/i) Name of Eurodynigon, Intermeted Direct Manietics	
(i) Name of Fundraiser: Integrated Direct Marketing	
(i) Address of Fundraiser:	
1250 Connecticut Ave. NW, Ste. 200, Washington, DC 20036	
/i) Nome of Eurodeniana, Dublic Totomat Committee	
(i) Name of Fundraiser: Public Interest Communications	
(i) Address of Fundraiser:	
7700 Leesburg Pike, Suite 301, Falls Church, VA 22043	ule G (Form 990 or 990-FZ) 2018
39083 10-03-18	HE IS LEARTH MAIL OF MAILER / 1 2011X

**SCHEDULE 1** (Form 990) Department of the Treasury Internal Revenue Service

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

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

► Attach to Form 990.

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

-004/	00
No. 1545-004	
9 9	2
COME	6.41

Open to Public Inspection

			COCCUTO LANGES		-		
Name of the organization Unitarian		list Service					Employer identification number
Committee	Inc						04-6186012
Part I General Information on Grants and Assistance	nd Assistance						
1 Does the organization maintain records to substantiate the amount of the	o substantiate the	amount of the grants o	or assistance, the c	grantees' eligibility I	for the grants or assis	grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	
criteria used to award the grants or assistance?	stance?						X Yes No
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	cedures for monit	oring the use of grant fu	unds in the United	States.			
Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any	Domestic Organiz	ations and Domestic	Governments. C	omplete if the orga	nization answered "Y	es" on Form 990, Part	t IV, line 21, for any
recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	55,000. Part II can	be duplicated if additio	nal space is neede	gd.	And handle of the		
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
Unitarian Universalist Association 24 Farnsworth Street Boston, MA 02110-1409	04-2103733	501(c)(3)	11,653.	0			Hurricane Harvey Relief Fund
Rural Community Workers' Alliance 60731 Highway M Milan, MO 63556	61-1718871 501(c)(3)	501(c)(3)	10,000.	0			General Operating Support for RCWA
1							
Ailled Media Frojects 4126 Third St.					<i>A</i>		Existing Criminalization
Detriot, MI 48201	01-0559608 501(c)(3)	501(c)(3)	15,000.	0			& Surveill
							Support Rohingya Women
1532 Galena Street, #380 Aurora, CO 80010	46-0932179	501(c)(3)	20,000.	0			Leadership & Organizing in Diaspora
							Support Includes
							Strategic Campaign
119 Anabel Taylor Hall							Intercept LGBTQI
Ithaca, NY 14853	16-0990318	501(c)(3)	20,000.	0			Immigrants
Texas Unitarian Universalist							Support TXUUJM to Engage,
Justice Ministry - PO Box 1621 -							Sustain & Expand
Austin, TX 78768	46-3560205 501(c)(3)	501(c)(3)	10,000.	. 0			Sanctuary Network
	nd government org	anizations listed in the					8
۳.	s listed in the line 1	table				***************************************	0
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.	, see the Instruction	ons for Form 990.					Schedule I (Form 990) (2018)

## Unitarian Universalist Service Committee Inc

Schedule I (Form 990) Committee Inc  Part II Continuation of Grants and Other Assistance to Governments and	Inc Assistance to Go		Organizations in the United States		(Schedule I (Form 990), Part II.)		04-6186012 Page 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Center for Popular Democracy 449 Troutman Street Suite A Brooklyn, NY 11237	45-3813436 501(c)(3)	501(c)(3)	20,000.	*0			Support for MRPA's Shut Down Berks Campaign
Foundation Cristosal INC 9641 Carousel Center Dr. Syracuse, NY 13204	03-0366224	501(c)(3)	20,000.	*0			General Operating Support Work on Displaceme
Alaska Institute for Justice 431 West 7th Ave. Suite 208 Anchorage, AK 99501	56-2533062 501(c)(3)	501(c)(3)	42,000.	.0			Advocacy & Capacity Building for Alaska Native Communities
Fe Y Justicia Worker Center 3809 Driscoll Street Houston, TX 77098	45-3855515	501(c)(3)	20,000.	30			Recovery Response to Hurricane Harvey
Georgia Latino Alliance For Human Rights - 7 Dunwoody Park Suite 110 - Atlanta, GA 30338	76-0809155	501(c)(3)	15,000.	0			Expanding Outreach for ICE-Free Zones
Greater Minnesota Worker Center 2719 W. Division Street, Suite 122 Saint Cloud, MN 56301	46-3874287	501(c)(3)	20,000.	0.			Resist and Persist 2050 Campaign Continuation
Grassroots Leadership 2301 E. Cesar Chavez Austin, TX 78702	58-1581743	501(a)(3)	30,000.	.0			Participate in the Love Resists Research Project
Justice in Motion 789 Washington Ave Brooklyn, NY 11238	72-1597864 501(a)(3)	501(c)(3)	15,000.	*0			Support for Protecting Migrants Rights Across Borders
West Street Recovery 1707 West Street Houston, TX 77026	82-2708194 501(c)(3)	501(c)(3)	*000′09	.0			Recovery Response to Hurricane Harvey
							Schedule I (Form 990)

Service	
Universalist	Inc
Unitarian	Committee

Schedule I (Form 990) COMMILTEE LIIC  Part II   Continuation of Grants and Other Assistance to Governments and	Lnc Assistance to Gov		Organizations in the United States		(Schedule I (Form 990), Part II.)		04-5185012 Page 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
The Praxis Project Inc. 1001 Connecticut Ave, NW Ste 201 Washington, DC 20036	30-0044814	501(c)(3)	20,000.	.0			Sustain & Expand Mental Wellness for Undoc, Black Immigrants
Unitarian Universalist Advocacy Network of Illinois - 9 Pinewood Drive - Carbondale, IL 62901	04-2103733	501(c)(3)	10,000.	*0			Support Work Engaging UU's in Partnership with Immigrant-led
Unitarian Universalist Church of Tucson - 4831 E, 22nd Street - Tucson, AZ 85711	86-6006433	501(c)(3)	15,000.	.0			Humanitarian Aid, Research & Advocacy for Migrants in Arizon
Unitarian Universalist Mass Action Network - 40 Mechanic Street Suite 306 - Marlborough, MA 01752	30-0430799	501(c)(3)	22,500.	0.			Support Build Capacity to Meet the Needs of Immigrants Impact
Unitarian Universalist Pennsylvania Legislative Advocacy Network - 6900 Stenton Avenue - Philadelphia, PA 19150	27-3583099	501(c)(3)	7,250.	0,			Support Advoccay on Environmental Legislation and Education
UU Faith Action NJ 4 Waldron Avenue Summit, NJ 07901	27-1635079	501(c)(3)	10,000.	0.			Support Work UUFANJ's Immigration Justice Task Force
Living Hope Wheelchair Association 9500 Westview, Suite 104 Houston, TX 77055	61-1491319	501(c)(3)	30,000.	.0			Support to Immigrant, African American Affected by Harvey
Activate Labs 12412 Groveview St #D Garden Grove, CA 92840	82-2271990	501(c)(3)	19,000.	*0			Support Participatory Video & Storytelling on C.A.Immigrants
Coalition of Community Organizations - 7113 Parker Road - Houston, TX 77016	46-4368352	501(c)(3)	12,000.	.0			Harvey Impact Needs Assessment and Response Project
							Schedule I (Form 990)

## Unitarian Universalist Service Committee Inc

Schedule I (Form 990) Committee	Inc						04-6186012 Page 1
Part II Continuation of Grants and Other Assistance to Governments and	ssistance to Go		zations in the Uni	ted States (Sche	Organizations in the United States (Schedule I (Form 990), Part II.)	(*11.1	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
The Center for Ethical Living and Social Justice Renewal - 2903 Jefferson Avenue - New Orleans, LA 70115	75-3265307	501(c)(3)	15,000.	,0			Support & Overhead Costs Organizing in NO on Reducing Crimin
Skylight Engagement, Inc. 147 Prince Street, 3rd Floor Brooklyn, NY 11201	46-5530678	501(c)(3)	25,000.	.0			Support Piloting ''Virtual Accompaniment'' Model in Guatemal
Muslim Justice League 75 Atlantic Avenue Boston, MA 02111	47-4049679	501(c)(3)	7,500.	.0			To Participate in the Love Resists Research Group Project
Lowlander Center, Inc. 106 Sandalwood Drive Gray, CA 70359	46-4993987	501(c)(3)	30,000.	0.			Bring Coastal & Inland Communities in LA address Storm Events
Espacio Migrante 3085 El Porvenir Way San Ysidro, CA 92173	81-3819765	501(c)(3)	7,000.	0			Support & Shelter community space for migrants in Tijuana MX
Church World Service 28606 Philips Street, PO Box 968 Elkhart, IN 46515	13-4080201	501(c)(3)	20,000.	0			LAUNIDAD11's Support Engaging & Organizing Affected Communit
Central American Resources Center of California - 2845 W, 7th Street - Los Angeles, CA 90005	95-3867724	501(c)(3)	15,000.	,0			Strengthen the Volunteer Exec. Comm. that lead National TPS
Center for Labor Education and Research, Inc 375 Center Street - Boston, MA 02130	22-2604923	501(c)(3)	25,500.	*0			To Participate in the Love Resists Research Group Project
Al Otro Lado, Inc. 511 E. San Ysidro Blvd #333 San Ysidro, CA 92173	47-2910078	501(c)(3)	25,000.	0			Support & Safety in providing legal advice to Migrants in MX  Schedule   (Form 990)

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Schedule I (Form 990) Committee Inc	Inc		1 24		10 to the solution of the second of the seco		04-6186012 Page 1
	(b) EIN	(c) IRC section If applicable	ion (d) Amount of cash grant non-cash grant assistance		(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Foundation for the Austin Sanctuary Network - 3514 Pinnacle Road - Austin, TX 78746	82-2653572 501(c)(3)	501(c)(3)	15,000.	0.			Support the Organizing of Accompaniment Immigrants
Freedom for Imnigrants PO Box 40677 San Fransisco, CA 94140	80-0875881	501(c)(3)	25,000.	.0			Support Migrants in detention in the American South
							7
							Schedule I (Form 990)

04-01-18 04-6186012

Page 2

Committee Inc

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Schedule | (Form 990) (2018)

Part III Grants and Other

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
					5
			0		
Part IV Supplemental Information. Provide the information required in		2; Part III, column	Part I, line 2; Part III, column (b); and any other additional information.	ditional information.	
Part I, Line 2:					
Each grant has a term limit. At the	end of	the term,	a full nar	narrative and	
financial report is requested that documents how the funds were	documents	s how the	funds were	used.	
Monitoring and evaluation of the pr	the project is		ongoing throughout the	the term of	
the grant.					

Schedule I (Form 990) (2018)

## SCHEDULE J (Form 990)

**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.

Open to Public Inspection

Name of the organization

Department of the Treasury

► Go to www.irs.gov/Form990 for instructions and the latest information.
Unitarian Universalist Service

Committee Inc

**Questions Regarding Compensation** 

Employer identification number 04-6186012

OMB No. 1545-0047

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,	1-0		100
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.	or ett.		Por la
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence	5 5		-78
	Tax indemnification and gross-up payments Health or social club dues or initiation fees	3		10.1
	Discretionary spending account Personal services (such as maid, chauffeur, chef)	W M		
				116.
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or	70	11	
	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,	1635	11.5	
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
		-,44		YW.
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			1
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			16
	establish compensation of the CEO/Executive Director, but explain in Part III.	إواقر		
	X Compensation committee X Written employment contract	Ō.		1
	X Independent compensation consultant X Compensation survey or study			, v
	Form 990 of other organizations  X Approval by the board or compensation committee	1,8		Well.
		- 1		
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing	40		
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a	X	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			I/W
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.	21.1		100
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		Х
b	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.	30		R
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	100		
	contingent on the net earnings of:	Same		18/7
а	The organization?	6a		Х
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			J. U.
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments	.20	164	
	not described on lines 5 and 6? If "Yes," describe in Part III	7	Х	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	Ec. 11	ne dy	VI no
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	5w.1		
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2018

04-6186012

Рапр

Committee Inc

Schedule J (Form 990) 2018

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

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

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

		(B) Breakdown of \	(B) Breakdown of W-2 and/or 1099-MISC compensation	3C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		1			other deferred	benefits	(D)·(D)	in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) Mary Katherine Morn	€	124,424.	15,000.	0	0	15,995.	155,419.	0
President & CEO	<b>E</b>		0	0	0	0		0
(2) Rachel Freed	ε	157,767.	14,679.	0	14,246.	0	186,692.	0
VP & CPO			0	• 0	.0	0	0	0
(3) Mack Davidson	Ξ	155,704.	14,679.	0	14,246.	7,227.	191,856.	0
VP & CAO	▣	0	0.	0	0	0	(	0
(4) Cassandra Ryan	(I)	149,156.	14,679.	0.	15,829.	25,511.	205,175.	0
VP & CDO	(E)	* 0	0	0.	ı	0	46	0
(5) Kathleen McTigue	ε	137,006.	4,320.	0	14,615.	25,511.	181,452.	0
Director of UUCSJ	€	0	0	0	.0	4	4	0
(6) Quang Nguyen	€	133,616.	4,059.	0	13,732.	7,871.	159,278.	0
Director of Human Resource	(II)	0	0	0	0	0	1	0
(7) Thomas H Andrews	(1)	• 0	.0	137,567.	0	0	137,567.	.0
President & CEO (former)	(1)	0.	0	0	0	0	0	0
(8) Carol Cahalane	(1)	125,029.	2,513.	0	12,755.	0	140,297.	.0
Director of Finance		.0	0	0	0	0	0	0
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Schedule J (Form 990) 2018 Commi.
| Part III | Supplemental Information

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Line 4a:	ndrews received a severance payment in the amount of \$137,567	A portion	The balance of the payment was made during calendar 2018 and is	in Schedule J, Part II, column (B)(iii).	Line 7:	onuses were paid to all qualified staff members based upon their annual						
art I, Line 4a:	homas Andrews received	luring the fiscal year.	017. The balance	eported in Schedule J,	art I, Line 7:	onuses were paid	erformance review.					

Schedule J (Form 990) 2018

SCHEDULE K (Form 990)

Supplemental Information on Tax-Exempt Bonds

OMB No. 1545-0047

Schedule K (Form 990) 2018 å (i) Pooled financing × 2018 Open to Public Inspection Employer identification number Yes ŝ 04 - 6186012(g) Defeased (h) On behalf å × 0 of issuer Yes Yes ů × Yes ŝ O (f) Description of purpose Office Building Yes Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.
 to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information. Purchase ŝ Ω Yes 500,000 (e) Issue price .000 3,453,000. 500,000 × × å <u>m</u> 2009 47 05/11/07 (d) Date issued Yes co. × × 04-3431814|0000000000 Unitarian Universalist Service (c) CUSIP# Were the bonds issued as part of a refunding issue of tax-exempt bonds (or, For Paperwork Reduction Act Notice, see the Instructions for Form 990. Does the organization maintain adequate books and records to support the Were the bonds issued as part of a refunding issue of taxable bonds (or, if (b) Issuer EIN Attach to Form 990. Incissued prior to 2018, an advance refunding issue)? if issued prior to 2018, a current refunding issue)? Has the final allocation of proceeds been made? Working capital expenditures from proceeds Committee Capital expenditures from proceeds Credit enhancement from proceeds Capitalized interest from proceeds Amount of bonds legally defeased Gross proceeds in reserve funds **Development** Proceeds in refunding escrows Year of substantial completion Issuance costs from proceeds final allocation of proceeds? (a) Issuer name A Finance Agency Amount of bonds retired Other unspent proceeds Total proceeds of issue Other spent proceeds Name of the organization **Bond Issues** Proceeds Department of the Treasury Internal Revenue Service Mass. Part Part II ₹ 6 우 F 5 4 껸 16 m ပ 4

## Unitarian Universalist Service Committee Inc

Schedule K (Form 990) 2018 Committee Inc			04-6	-6186012				Page 2
Part III Private Business Use		-						
		A -	8		3			
Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?	Yes	<sup>∞</sup> ×	Yes	OZ.	Yes	ON	Yes	No
2 Are there any lease arrangements that may result in private business use of	×							
3a Are there any management or service contracts that may result in private		*						
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside		4						
counsel to review any management or service contracts relating to the fina								
c Are there any research agreements that may result in private business use of bond-financed property?		×						
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		70 0 0		8		70		70
5 Enter the percentade of financed property used in a private business use as a result of		1		₹		0		20
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?		×						
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?		×						Ì
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	Þ							
Hegulations sections 1,141-12 and 1,145-27	4							
			6.6		•			
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	No	Yes	No	Yes	No	Yes	No
Penalty in Lieu of Arbitrage Rebate?		×						
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?		X						
b Exception to rebate?	×							
c No rebate due?		×						
If "Yes" to line 2c, provide in Part VI the date the rebate computation was								
3 Is the bond issue a variable rate issue?		×						Ĩ
22						Sch	Schedule K (Form 990) 2018	n 990) 2018

Inc
Committee

Schedule K (Form 990) 2018

Page 3

04-6186012

No. ŝ Yes Yes ŝ Š Yes Yes ŝ ů Yes Yes Supplemental Information. Provide additional information for responses to questions on Schedule K. See instructions ŝ 윈× × × × Yes Yes × d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? Has the organization established written procedures to monitor the requirements of 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 isn't available under applicable Were any gross proceeds invested beyond an available temporary period? 5a Were gross proceeds invested in a guaranteed investment contract (GIC)? 4a Has the organization or the governmental issuer entered into a qualified Part V Procedures To Undertake Corrective Action hedge with respect to the bond issue? d Was the hedge superintegrated? Was the hedge terminated? Part IV Arbitrage (Continued) b Name of provider b Name of provider c Term of hedge section 148? c Term of GIC regulations? Part VI

## **SCHEDULE L**

Department of the Treasury

(Form 990 or 990-EZ)

## **Transactions With Interested Persons**

➤ Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Inspection

2018

Internal Revenue Service

Name of the organization

Unitarian Universalist Service

Employer identification number

	ommittee									860	12		
Part I Excess Bene	fit Transact	ions (section 5	01(c)(3	3), sect	ion 501(c)(4), and 50	1 (c)(	29) organization:	s only)					
Complete if the o	rganization ans	wered "Yes" on	Form 9	990, Pa	art IV, line 25a or 25b	, or	Form 990-EZ, Pa	art V, I	ine 40	b.			
(a) Name of disqualified p	(b)	Relationship bet			ified	J Da	carintian of tran	aaatia			(d)	Corre	cted?
(a) Name of disqualified p	erson	person and or	rganiza	ation	(0	;) DE	escription of tran	Sacuo	'n		Y	es	No
2 Enter the amount of tax in	ncurred by the o	organization man	agers	or disc	ualified persons duri	ng tl	he year under						
							***********		<b>\$</b>	-			
3 Enter the amount of tax, i	if any, on line 2,	above, reimburs	ed by	the org	ganization	*****			<b>&gt;</b> \$				
Doub III Loone to and	Van Ename Ind	avacted Days											
Part II Loans to and					4								
·	-				, Part V, line 38a or F	orm	990, Part IV, line	e 26; d	or if the	e orga	nizatio	n	
reported an amou										/h) An	proved		
(a) Name of interested person	(b) Relationship			n the	(e) Original principal amount	(f)	Balance due	(g) defa	l In	(h) App by bo	ard or	(i) W	ritten ment?
interested person	with organization	U U IUAII		ization?	principal amount			_	tuit :	comm	ittee?	agree	
			То	From				Yes	No	Yes	No	Yes	No
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			<u>.                                    </u>										
Total					<b>&gt;</b> \$				1312	Major P	14.141	ME,E	8 -
Part III Grants or Ass													
Complete if the o		wered "Yes" on I	Form 9	990, Pa	V								
(a) Name of interested p	erson	(b) Relationship			(c) Amount of	- 1	(d) Type				) Purp		f
		interested pers the organiza		d	assistance	- 1	assistan	ce		è	assista	ince	
		the organiza	2011			-			_				
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						- 1			- 1				

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

Schedule L (Form 990 or 990-EZ) 2018

	"Yes" on Form 990, Part IV, line 28a, 28	b, or 28c.		7 7 7 7 7	out and
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sha organiz rever	ation's ues?
Family member of Board Mem	Family member of Bo	67,103.	Employment	Yes	No X
Part V Supplemental Information.			<u></u>		
	onses to questions on Schedule L (see in		. a. D		
Sch L, Part IV, Business T			ea Persons:		
(a) Name of Person: Family					
(b) Relationship Between I		Organizati	on:		
Family member of Board Mem	ber				
					_

## SCHEDULE M (Form 990)

## **Noncash Contributions**

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

Attach to Form 990.

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

Unitarian Universalist Service Committee Inc

Employer identification number 04-6186012

Pai	rt I Types of Property							
	#!	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d Method of d noncash contrib	letermir		s
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	X	31	187,974.	Mean Value	on (	Gift	- D
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts				-			
23	Scientific specimens							
24	Archeological artifacts							
25	Other • ()							
26	Other • ()							
27	Other • ()							
28	Other ▶ (							
29	Number of Forms 8283 received by the organization	•	•				_	
	for which the organization completed Form 828	33, Part IV, I	Donee Acknowledg	gement 29			0	Torres -
							Yes	No
30a	During the year, did the organization receive by					I TOTAL		
	must hold for at least three years from the date		l contribution, and	which isn't required to be us	sed for	lo H	04	
	exempt purposes for the entire holding period?					30a		X
b	If "Yes," describe the arrangement in Part II.					11/19	APS.	N IS
31	Does the organization have a gift acceptance p	-			ions?	31	Х	
32a	Does the organization hire or use third parties of	or related or	ganizations to solid	cit, process, or sell noncash				
	contributions?	9954	2022 24 24 22			32a		X
b	If "Yes," describe in Part II.					77		1
33	If the organization didn't report an amount in co	olumn (c) foi	a type of property	for which column (a) is chec	ked,	1	E175	
	describe in Part II.							12000

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

Schedule M (Form 990) 2018

Schedule M (Form 990) 2018

### SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

## Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

Unitarian Universalist Service

Committee Inc

2018 Open to Public Inspection

OMB No. 1545-0047

Employer identification number 04-6186012

Form 990, Part I, Line 1, Description of Organization Mission:

Guided by UU principles and the Universal Declaration of Human Rights,

UUSC strives to advance human rights, dismantle systems of oppression,

and uplift and affirm the inherent worth and dignity of all people. We

center the voices and experiences of those most affected and strengthen

those grassroots groups and movements who are organizing themselves to

advance these goals. In order to accomplish this, we offer justice

education and leadership development; engagement and mobilization for

advocacy; partner support; and grant funding.

UUSC aims to leverage our particular strategic assets and strengths to
disrupt criminalization and systemic oppression of people based on
their identities; support self-determination and defend the rights of
people who are or may be forced to leave the places they call home due
to climate, conflict, or economic hardship, and address the root causes
of forced displacement; and respond to humanitarian crises as partners
with people whose access to aid is most limited, by helping them to
rebuild their lives and by addressing the human rights issues or
violations that make them more vulnerable.

In all of our work, UUSC and our partners work with the communities most affected by injustice, including:

In Burma, all of our partners are focused on protecting the rights of the Rohingya Muslim minority, currently facing a crisis of displacement and a military campaign of genocide.

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

Schedule O (Form 990 or 990-EZ) (2018)

What Is Our Impact

This year, UUSC helped strengthen grassroots movements, addressed immediate harms while working toward systemic solutions, and centered the experiences and wisdom of the communities most impacted by

Name of the organization	Unitarian Universalist Service Committee Inc	Employer identification number 04-6186012
injustice. We	did this by:	
Answering the	urgent calls of our grassroots partners	
In the face of	increasing repression and violence perp	petrated by state
and corporate	actors, UUSC has consistently answered t	the call of our
grassroots par	tners for accompaniment, solidarity, and	d international
advocacy.		
Impact Highlig	ht: Between January 2018 and March 2019	, we helped
coordinate and	lead five accompaniment and solidarity	delegations to
Honduras in su	pport of our local partners, Radio Progr	reso and Foro de
Mujeres Por la	Vida, and the country's active resistar	nce movements. In
February 2019,	in response to our partners' request for	or emergency
in-person acco	mpaniment at a court hearing for twelve	community leaders
and human righ	ts defenders, UUSC flew to Tegucigalpa t	to accompany our
partners and t	he defenders in their court appearance.	Nearly a week
later, an inte	rnational presence at the hearing and gr	rowing pressure
from U.S. Memb	ers of Congress coordinated and ampli	ified by UUSC
led to the def	enders' release and the dismissal of all	L charges.
	of our resources in an ongoing fight ag	gainst the
-		
This year, as	the torrent continued of oppressive rule	es, policies, and
programs aimed	at the criminalization of immigrants ar	nd other
marginalized g	roups, UUSC leveraged all of its strateg	gic resources to
fight them at 832212 10-10-18	every turn. While this struggle will not	end anytime Schedule O (Form 990 or 990-EZ) (2018)

resources to support solidarity with Central American asylum-seekers,

and hosted a companion webinar facilitated by UUSC, featuring UUSC's

partner, Activate Labs, and attended by over 150 people.

Name of the organization Unitarian Universalist Service Committee Inc

Employer identification number 04-6186012

Building power to change policies

One of the hallmarks of a powerful movement — whether small or large,

local or international — is the ability to make or change policy. This

year, UUSC and our partners were able to do just that. Not only are

these policy changes indicative of the kind of powerful movements

necessary to change systems, they have the potential to immediately

improve people's lives. Key victories include the passage of the

American Dream and Promise Act, ending immigration detention in

Atlanta, and creating Welcoming Schools in Pennsylvania.

Impact Highlight: In June 2019, the U.S. House of Representatives

passed the American Dream and Promise Act, "a groundbreaking bill to

provide a path to citizenship for more than a million immigrants at

risk of deportation and family separation." This marked the first time

any legislation including permanent protections for undocumented

immigrants has passed the House or Senate in almost a decade -- and the

first ever time a bill containing permanent protections for holders of

Temporary Protected Status (TPS) has passed a chamber of Congress in

any form.

This historic victory was made possible through the tireless organizing
of directly-affected immigrant communities, including UUSC's partners
the UndocuBlack Network and the National TPS Alliance. In recent weeks,
leaders with both UndocuBlack and the TPS Alliance addressed members of
Congress in person. For years, UUSC and our supporters have joined
these and similar efforts, by condemning attempts by the administration
to end TPS (for people from Somalia, Yemen, Syria, Haiti, El Salvador,

Schedule O (Form 990 or 990-EZ) (2018)

Name of the organization Unitarian Universalist Service Employer identification number 04-6186012 Committee Inc Honduras, and Nepal) and by advocating to legislators around the country to enact permanent protections. In the weeks leading up to the vote in June, hundreds of UUSC supporters sent the message to members of Congress that TPS holders deserve permanent protections. This time, we know that message was heard. Going beyond funding in the pursuit of justice and accountability At UUSC, we believe that achieving the changes we seek in the world will require the redistribution of financial resources to grassroots organizations and movements. However, we also understand that this alone will not be enough. While funding is a critical component of this work, we maximize our impact by supplementing funding with support for activism, justice education, research, and other forms of partner and movement support. Impact Highlight: Last August, as apart of a "Faith Floods the Desert" solidarity action, UUSC organized 60 faith leaders from around the country to bring jugs of drinking water to leave in the Sonoran Desert, in support of No More Deaths (NMD) and the migrants who regularly make the perilous journey to the U.S. border. For similar acts of humanity, nine of NMD's volunteer human rights defenders were charged with federal crimes. One of the volunteers, Dr. Scott Warren, was charged with three felonies. His arrest, which came just hours after No More Deaths released a UUSC-funded report, The

report.

Disappeared, documenting the sabotage of humanitarian supplies by

Border Patrol agents, was most likely intended as retaliation for the

Schedule O (Form 990 or 990-EZ) (2018)

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Schedule O (Form 990 or 990 EZ) (2018)	Page :						
Name of the organization Unitarian Universalist Service Committee Inc	Employer identification number $04-6186012$						
Scott. In his testimony, Scott asked, "If you live in a pl	ace where						
people are dying by the dozens every year around you, how	could you not						
respond?" UUSC continues to stand with Dr. Warren, No More	Deaths, and						
all of our partners and allies in seeking justice and dign	ity for						
migrants.							
Form 990, Part III, Line 4a, Description of Program Service	e:						
Fulfilling a commitment to long-term recovery in Haiti							
It has been nearly a decade since the deadly earthquake t	hat destroyed						
much of Haiti's capital, impacting nearly 3 million people and killing							
upwards of 200,000. UUSC's response, which is in its ninth							
included partnerships with more than a dozen grassroots or	ganizations,						
serves as an important counterpoint to the mainstream "cri	sis caravan"						
that left Port-au-Prince long ago.							
In each of those years, we have been in partnership with M	louvman						
Peyizan Papay (Papaye Peasant Movement) (MPP), Haiti's lar	gest peasant						
organization. Together, we have developed a network of six	sustainable						
villages in Haiti's Central Plateau, and a national school	to serve the						
villages, which was recently certified by the Haitian Mini	stry of						
Education. By committing to this work for the long-term, i	n the face of						
endemic corruption, political instability, devastating dro	ought, and						
other unforeseen challenges, our work together stands out	a model for						
post-crisis recovery and development.							

MPP was able to connect all six EcoVillages to the electrical grid and Schedule O (Form 990 or 990-EZ) (2018)

Impact Highlight: In 2018-19, using emergency assistance from UUSC,

Name of the organization Unitarian Universalist Service Committee Inc

to fix both of the broken wells. Now, all villagers have access to clean water and electricity, improving well-being in the villages and leading to new ambitions among the villagers. In addition, the EcoVillage School was recently granted a certificate of nationalization from the Haitian Ministry of Education, and the school is now known as "The National School of the EcoVillages of Colladere." This means that, if and when the state has the funds, all teachers will be compensated by the Ministry, making the school viable for the long-term.

Form 990, Part III, Line 4b:

Climate Justice & Environmental Justice

Fostering connections to build and strengthen movements

This year, UUSC again succeeded at fostering collaborations among our partners and created spaces for them to convene, connect, and strategize, in order to help build and strengthen movements for justice. Support for movement-building is critical because strong, interconnected social movements are critical to achieving the deep, systemic change we seek. Moreover, the organizations on the frontlines of this fight are often overworked, on the verge of burnout, and lack the resources necessary to build movements, like time to connect to, learn from, and strategize with their peers.

Impact Highlight: In early October 2018, UUSC and more than 60 representatives from impacted First and Indigenous communities in

Alaska, Fiji, Solomon Islands, Marshall Islands, Papua New Guinea,

Schedule O (Form 990 or 990-EZ) (2018)

Name of the organization Unitarian Universalist Service Er
Committee Inc

Employer identification number 04-6186012

Palau, Kiribati, Tuvalu, Bangladesh, Washington State, and Louisiana

convened in Girdwood, Alaska, for a three-day gathering to discuss the

impacts of climate change on First and Indigenous communities, build

community, and share strategies about how to address the devastating

effects of the climate crisis.

Bringing grassroots leaders to the table

Another way UUSC can use our power to support our grassroots partners
is by providing them with access to decision-making spaces from which
they have traditionally been excluded. In our work on climate-forced
displacement, for example, those partners represent the First and
Indigenous Peoples most impacted by the climate crisis, and UUSC has
worked hard to ensure that their voices are heard when decisions are
being made about their future.

Impact Highlight: In December 2018, for the third consecutive year,

UUSC staff traveled to the United Nations Framework Convention on

Climate Change's 24th Conference of the Parties (COP 24), this year

held in Katowice, Poland. UUSC co-organized an event, Climate-Forced

Displacement: Advancing Human Rights and Justice, to emphasize the

importance of centering human rights and voices of communities in

addressing climate-forced displacement one of just a few NGO-led side

events approved by the UN. The panel featured at the event was

moderated by UUSC staff and included our partners, Robin Bronen and

Maina Talia, from Alaska and Tuvalu, who shared the experiences of

their communities grappling with the prospects of climate-forced

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displacement.

Schedule O (Form 990 or 990-EZ) (2018) Name of the organization Unitarian Universalist Service Employer identification number 04-6186012 Committee Inc Form 990, Part III, Line 4c: UU College of Social Justice The UU College of Social Justice (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. UUCSJ's mission is to inspire and sustain faith-based activism for justice, on issues of local, national and global importance. We accomplish this through a variety of experiential learning programs, and through workshops and resources designed for use in our UU congregations. In fiscal year 2019 we offered immersion learning journeys to the Arizona/Mexico border with BorderLinks and No More Deaths; to Honduras with Foro de Mujeres por la Vida; and to West Virginia with the Southern Appalachian Labor School (SALS). In addition to the border witness programs designed for high school youth, we offered Activate New Orleans, a youth training focused on racial justice. Each of these programs utilized our adult or youth Study Guides for preparation and follow-up. UUCSJ continued its annual collaboration with the UUA on the UU-UNO Spring Seminar; and building on last year's experiment with a half-day justice program in Portland, OR, this year we offered a similar program in the Pacific Southwest District. We increased our capacity to offer congregational workshops by training

Schedule O (Form 990 or 990-EZ) (2018)

more staff and Program Leaders in the workshop pedagogy and delivery.

We presented one or more workshops for the national gathering of UU
religious educators in Houston (LREDA), the Pittsburgh cluster of
congregations, the State Action network in New Hampshire, and for five
separate congregations. As part of our support for accompaniment of
refugees and migrants, we collaborated with UUSC partner Freedom for
Immigrants in creating a resource Handbook for Sponsors of Asylum
Seekers.

One of the most dramatic increases in our programming during fiscal

2019 was with our skilled volunteers. The numbers of refugees fleeing

violence and poverty in Central America rose quickly in the summer of

2018 and continued at historically high levels. The refugees were met

with an escalating rhetoric of hostility from the Trump administration,

along with multiple attempts to shut down avenues for asylum. Many of

our constituents were motivated to respond, and between June 2018 and

July 2019 UUCSJ was able to recruit, screen and deploy more than 110

Spanish-speakers. These volunteers donated their labor for between one

and eight weeks, offering a much-needed infusion of human capital to

Annunciation House (El Paso, TX), RAICES (San Antonio, TX), Al Otro

Lado (San Diego, CA and Tijuana, Mexico) and Casa Alitas (Tucson, AZ).

To support these volunteers before and after their immersion at the

border we created a new Volunteer Handbook and initiated monthly

support calls for returned volunteers.

Our internships for college age young adults placed 12 interns with
justice organizations in the US and Mexico; our interns were supported
with small stipends and frequent check-ins from CSJ Program Leaders
serving as internship liaisons. Also for young adults, we offered

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Schedule O (Form 990 or 990-EZ) (2018) Name of the organization Unitarian Universalist Service Employer identification number Committee Inc 04-6186012 another iteration of GROW Racial Justice, this time in collaboration with the Minnesota UU Justice Alliance (MUUSJA). All of our programs are supported by the UUCSJ Study Guide for Cross-Cultural Engagement and by adaptations to the Guide for different age groups. They are led by staff and by our Program Leaders, who we support with an annual retreat. Our current cadre of 20 Program Leaders includes 13 ministers, seminarians or Directors of Religious Education; 11 are people of color and 8 are fluent Spanish speakers. Form 990, Part III, Line 4d, Other Program Services: Human Rights Programs - IV. Economic Justice & Other: See Schedule O. Expenses \$ 75,588. including grants of \$ 12,568. Revenue \$ 0. Form 990, Part III, Line 4d: Economic Justice /Other The "UUSC Fair Trade Project" links congregations with small farmers through fair trade. This project is a partnership between UUSC and Equal Exchange, a worker-owned cooperative offering 100% fairly traded coffee, tea, chocolate, and other foods. For every pound of Equal Exchange's fairly-traded coffee, chocolate, and other products purchased by UU congregations, Equal Exchange donates 20 cents to UUSC's Small Farmer Fund. In addition to supporting the farmer coops

cooperative groups, particularly the rights of women, youth, and 832212 10-10-18

Schedule O (Form 990 or 990-EZ) (2018)

that supply Equal Exchange's products, UUSC uses the Small Farmer Fund

to build sustainable livelihoods and advance human rights of other

Name of the organization Unitarian Universalist Service Committee Inc

Employer identification number 04-6186012

Indigenous Peoples.

Last year, UUSC used the Small Farmer Fund to provide two grants to
Fundacion Entre Mujeres ("FEM"), a feminist organization based in rural
Nicaragua that, after 23 years of working with rural women, is in a
moment of transition, construction, and germination of a peasant
feminism that allows women to reaffirm their ways of being, thinking,
and acting in the context of structural violence. These grants
supported FEM's efforts to provide community health kits with key basic
medical supplies to 12 of their communities; the temporary relocation
of a part of the FEM team to an office in the community of El Rosario,
given that it is often too dangerous for FEM to travel to its office in
the current context and political climate; and strengthened the
business management of FEM's coffee "agro-chain" by evaluating the
results obtained in the different levels of production, stockpiling,
and commercialization 2018 and 2019.

Form 990, Part VI, Section B, line 11b:

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

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Schedule O (Form 990 or 990-EZ) (2018)

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:

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,AK,AR,ND,MS

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.

SCHEDULE R (Form 990) Name of the organization

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

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

▶ Attach to Form 990.

Open to Public Inspection 2018

Employer identification number 04-6186012Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Inc Committee Part

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets		(f) Direct controlling entity
Part II Identification of Related Tax-Exempt Organizations. Complete if organizations during the tax year.	ions. Complete if the organization ar	the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt	Part IV, line 34, bec	ause it had one o	more related tax-exer	npt
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section st	(e) Public charity status (if section	(f) Direct controlling entity	(g) Section \$12(b)(13) controlled entity?
				501(c)(3))		Yes
						-1.
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	s for Form 990.				Schedule R	Schedule R (Form 990) 2018

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Unitarian Universalist Service

Committee Inc

Schedule R (Form 990) 2018

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

Page 2

04-6186012

(j) (k) General or Percentage managing ownership partner?			
Code V-UBI Germont in box man 20 of Schedule Bal K-1 (Form 1065) Ye.			
(h) Disproportionale allocations?			
(g) Share of end-of-year assets			
(f) Share of total income			
(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)			S
(d) Direct controlling entity		C	
(c) Legal domicile (state or foreign country)			
(b) Primary activity			
(a) Name, address, and EIN of related organization			

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

organizations treated as a corporation or trust during the tax year.	Jring the tax year.								
(a)	(q)	(0)	(p)	(e)	(1)	(6)	(h)	€,	
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling Type of entity (C corp., S corp.	Type of entity (C corp, S corp,	Share of total income	Share of end-of-year	Percentage ownership	Section 512(b)(13) controlled entity?	13) led
		country)	- 1	or trust)		assers		Yes	N <sub>o</sub>
	Charitable Annuity								
Charitable Annuity Trusts (4)	Trust	MA	ນນຮດ	TRUST				×	
Pooled Income Fund (1)	Pooled Income Fund	MA	ກນຮວ	TRUST				×	
									ĺ
39									

Schedule R (Form 990) 2018

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# Unitarian Universalist Service

Committee Inc Schedule R (Form 990) 2018

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

Page 3

04 - 6186012

Schedule R (Form 990) 2018 × × × × × × × Yes 우 P 투 <u>a</u> ၁ <u>9</u> ¥ 19 무 두 9 4 7 ÷ 43 ÷ Ŧ = Method of determining amount involved 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds. During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? (c) Amount involved (b) Transaction type (a-s) l Performance of services or membership or fundraising solicitations for related organization(s) m Performance of services or membership or fundraising solicitations by related organization(s) Reimbursement paid by related organization(s) for expenses n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity k Lease of facilities, equipment, or other assets from related organization(s) Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. j Lease of facilities, equipment, or other assets to related organization(s) S Other transfer of cash or property from related organization(s) c Gift, grant, or capital contribution from related organization(s) Reimbursement paid to related organization(s) for expenses **b** Gift, grant, or capital contribution to related organization(s) r Other transfer of cash or property to related organization(s) d Loans or loan guarantees to or for related organization(s) Sharing of paid employees with related organization(s) (a)
Name of related organization e Loans or loan guarantees by related organization(s) h Purchase of assets from related organization(s) i Exchange of assets with related organization(s) Sale of assets to related organization(s) f Dividends from related organization(s) 832163 10-02-18 ٥ Б 4 (5) Ξ 2 3 9

Committee Inc

Schedule R (Form 990) 2018

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37,

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(k) arcentage wnership				1	90) 2018
(j) General or Pemaraging partner?					(Form 9
(h)					Schedule R (Form 990) 2018
(h) Dispropor- lionate allocations?					
(g) Share of end-of-year assets					
(f) Share of total					
(e) Are all partners sec. 501(c)(3) orgs.?					
(d) Predominant income related, unrelated, excluded from tax under sections 512-514)					
(c) Legal domicile (state or foreign country)					
(b) Primary activity					
(a) Name, address, and EIN of entity					