

IRS FINANCIAL REPORTING RETURN Fiscal Year 2021 | Form 990 & 990T

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Form	990
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Department of the Treasury

PUBLIC DISCLOSURE COPY

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.
 Go to www.irs.gov/Form990 for instructions and the latest information

Open to Public Inspection

OMB No. 1545-0047 2021

٨	For th	o 2021 colon	dar year, or tax		-	550 101 1130		, and endin				, 20		
			C	year begin	ning		, 2021	, and endin	ig			, ZU ification number		
В		f applicable:	-											
	Ad	dress change	COMMUNITY			R SW WAS	HINGTON			-	L246	-		
	Name change 610 ESTHER STREET #201 VANCOUVER, WA 98660									E Telephone number				
	Initial return VANCOUVER, WA 98660									(360)) 6	94-2550		
	Fin	al return/terminated												
	An	nended return								G Gross re	ceipts	\$ 117,727,427.		
		plication pending	F Name and add	ess of principa	l officer: NAT		т		H(a) Is this	a group return				
	, b	priorition portaing	SAME AS C	ABUIL	MAI	I MORIOI	N		H(b) Are all	subordinates attach a list.	included			
	Tax	avampt atatua	X 501(c)(3)			nsert no.)	4047(a)(1) a	or 527	If "No,"	attach a list.	See ins	structions.		
<u>.</u>		exempt status:		501(c) () ~ (1	isert no.)	4947(a)(1) o	JI 327						
<u>1</u>			W.CFSWW.O		r r	т.			(1)	exemption nu				
ĸ		of organization:	X Corporation	Trust	Association	Other Other	L	Year of format	ion: 198	4. M is	tate of l	egal domicile: WA		
Pa	nrt I	Summar												
	1		be the organiza											
ė						<u>ION IS 1</u>	[<u>0_INSP</u>]	<u>IRE A C</u>	<u>JLTURE</u>	<u>OF GIV</u>	ING	<u>TO CREATE A</u>		
Activities & Governance		VIBRANT	AND ENGAGI	ED COMM	<u>JNITY.</u>									
E														
ð		Check this bo			n discontinu									
G			ting members								3	14		
ŝ			dependent votir								4	14		
ifie			of individuals								5	14		
÷			of volunteers (6	30		
Ă			ed business rev								7a	-8,031.		
	b	Net unrelated	l business taxal	ole income	from Form 9	90-T, Part I	, line 11		1		7b	0.		
										rior Year		Current Year		
Ð			and grants (Pa							1,924,3		84,513,485.		
nű			vice revenue (P							5,9		77,669.		
Revenue			ncome (Part VII						-	5,315,0	35.	6,333,820.		
œ			e (Part VIII, col											
			e – add lines 8	-						.,245,3		90,924,974.		
	13	Grants and s	imilar amounts	paid (Part I	X, column (A), lines 1-3)		. 26	5,726,7	48.	26,189,969.		
	14													
	15	Salaries, othe	er compensatio	n, employe	e benefits (P	art IX, colur	nn (A), line	s 5-10)	. 1	,450,4	88.	1,539,742.		
ses	16a	Professional	fundraising fees	s (Part IX, d	column (A),	line 11e)								
Expenses	h	Total fundrais	sing expenses (Part IX, col	umn (D), lin	e 25) ►	5	58,674.						
Щ			es (Part IX, col			·		· · ·		585,6	55	649 012		
		•	es. Add lines 13			,						648,012.		
			es. Add lines is expenses. Sub							8,762,8		28,377,723.		
. 0		Revenue less	expenses. Sur		o ironi iine	2				7,517,5		62,547,251.		
a o l	~	T . i . i i .								ng of Curren		End of Year		
sset 3ala	20		(Part X, line 16) s (Part X, line 2							$\frac{1}{798,4}$		413,342,244.		
Net Assets or Fund Balances	21		-	-						2,351,7		7,570,063.		
_			fund balances.	Subtract li	ne 21 from l	ine 20			. 318	3,446,6	96.	405,772,181.		
Pa	nrt II	Signatur	e Block											
Unde	er penalt	ties of perjury, I de	eclare that I have exa	mined this retu	urn, including acc	companying sche	edules and state	ements, and to	the best of m	ny knowledge	and beli	ief, it is true, correct, and		
com	piete. De			a) is based off	an mormation o	i which preparer	nas any known	euge.						
					$- \bigcirc /$		$\overline{\mathcal{M}}$							
Siq He	yn	-	re of officer		11-1		2 17		Da	ile				
Не	re		CABANATUA						CFO					
			print name and title		1	<i>,</i>	-7			I				
		Print/Type p	preparer's name		Preparer's sign	nature	il.	Date 10/11	122	Check X	ſ	PTIN		
Pa	id	RICHAR	RD V. PROU	LX, CPA		\underline{U}^{\bullet}		10/11	122	self-employe	d	P00432577		
Pre	epare	Firm's name	e ► KERN &	THOMP:	SON LLC									
Us	e On	ly Firm's addre			r avenue	, SUITE	410			Firm's EIN	► 93·	-1157146		
				AND, OR			-			Phone no.	(503			
Ma	y the I	RS discuss th	is return with th			ve? See inst	ructions					X Yes No		
			eduction Act N						EA0101L 09/			Form 990 (2021		

Form	n 990 (2021)	COMMUNITY	Y FOUNDATIC	N FOR SW WA	ASHINGTON		91-1246	778	Page 2
Par				e Accomplishi					
				onse or note to ar	y line in this Part	III			
1	-	ribe the organization		THE THEFT			דע עשעים	ע שועעםם	ND
						DF GIVING TO C			
	MILLION		. SINCE OU	<u>R_FOUNDING</u>	<u>IN 1984, WE</u>	HAVE GRANTED	MORE IHAN	<u>\$256</u>	
	<u>MTTTTON</u>	·							
2	Did the orga	nization undertake	e any significant p	orogram services du	uring the year which	were not listed on the	prior		
								Yes	X No
		cribe these new s					-		_
3	5		5,	5	anges in how it co	nducts, any program	services?	Yes	X No
4		cribe these chang	•		for each of its thr	ee largest program se	nuisos os moos	urad by av	noncoc
-	Section 501	(c)(3) and 501(c	c)(4) organization	ns are required to	report the amount	of grants and allocati	ions to others, th	le total exp	penses. enses,
	and revenue	e, íf ány, for eac	h program servio	ce reported.					
4.0	(Code:) (Expen			ding grants of \$	26,189,969.)	(Revenue \$		((0))
4 a						<u> </u>			<u>,669.</u>) 'O
						AT THE INTERS			
						ISIVE SOLUTION			
		TIES IN SO							
						MS AND SERVIC		RENGTHE	N THE
	<u>EFFORTS</u>	OF DONORS	, NONPROFI	TS AND COMM	UNITIES ACRO	DSS OUR REGION	· 		
		ED ON SCHE							
4 b	(Code:) (Expen	ises \$	inclu	ding grants of \$)	(Revenue \$)
	·				<u> </u>	ŕ	·		^
4 c	: (Code:) (Expen	ises \$	inclu	ding grants of \$)	(Revenue \$)
								_ _ _ _ _	
4 d		am services (De خ			¢) (Douopus	¢	、	
4	(Expenses	\$ am service exper		luding grants of 26,964,994) (Revenue	Y)	
BAA			1000 -		• A0102L 09/22/21			Form 9	990 (2021)

I	Part IV	Chec	klist of Requi	ired Schedules	5		
F	orm 990 (2	2021)	COMMUNITY	FOUNDATION	FOR	SW	WASHINGTON

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			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? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If 'Yes,' complete Schedule C, Part l</i> .	3		Х
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	Х	
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? <i>If 'Yes,' complete Schedule D, Part I</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? <i>If 'Yes,' complete Schedule D, Part II</i>	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? <i>If 'Yes,' complete Schedule D, Part IV</i>	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If 'Yes,' complete Schedule D, Part V</i>	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, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
Ł	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.	11 b	Х	
C	Did the organization report an amount for investments – program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		Х
c	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.	11 d		Х
e	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Х	
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)? <i>If 'Yes,' complete Schedule D, Part X</i>	11 f		Х
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a		Х
Ł	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	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
Ł	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? <i>If 'Yes,' complete Schedule F, Parts I and IV</i>	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? <i>If 'Yes,' complete Schedule F, Parts II and IV</i>	15		Х
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? <i>If 'Yes,' complete Schedule F, Parts III and IV</i>	16		х
	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. See instructions	17		х
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		х
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		Х
20a	Did the organization operate one or more hospital facilities? <i>If 'Yes,' complete Schedule H</i>	15 20a		X
	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	Х	
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 Form 990 (2021)
 COMMUNITY
 FOUNDATION
 FOR
 SW
 WASHINGTON

 Part IV
 Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If 'Yes,' complete Schedule I, Parts I and III</i>	22	Х	
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23	х	
24 a	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
I	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
(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		
(Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	a 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		Х
I	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		х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If 'Yes,' complete Schedule L, Part II</i>	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If 'Yes,' complete Schedule L, Part III.</i>	27		х
	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
ä	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> 'Yes,' complete Schedule L, Part IV	28a		Х
I	A family member of any individual described in line 28a? If 'Yes,' complete Schedule L, Part IV.	28b		Х
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If Yes,' complete Schedule L, Part IV.	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If 'Yes,' complete Schedule M</i>	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		Х
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		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If 'Yes,' complete Schedule R, Part L</i>	33	Х	
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	Х	
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
I	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If 'Yes,' complete Schedule R, Part VI</i>	37		Х
	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pa	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		1	
	a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable1 a28b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable1 b0		Yes	No
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		(2001)
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Form 990 (2021)

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Form	1 990 (2021) COMMUNITY FOUNDATION FOR SW WASHINGTON 91-1246	5778	F	age 5
Part	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State- ments, filed for the calendar year ending with or within the year covered by this return 2a	14		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> . See instructions.	2b	Х	
3.2	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
	If 'Yes,' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation on Schedule 0</i>			
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)? If 'Yes,' enter the name of the foreign country ►	4a		Х
U	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	-		
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			Х
	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?			
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		х
b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X	
b	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	_	Х	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Х
d	I If 'Yes,' indicate the number of Forms 8282 filed during the year 7d			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		Х
g	I f the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		X
9	Sponsoring organizations maintaining donor advised funds.			
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		Х
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			Х
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
	o Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)			
	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 12b			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
	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.	_		
	Enter the amount of reserves on hand	14.		Х
	Did the organization receive any payments for indoor tanning services during the tax year?			Λ
	If 'Yes,' has it filed a Form 720 to report these payments? <i>If 'No,' provide an explanation on Schedule O</i>	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		Х
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
17	If 'Yes,' complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		

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Pa	rt VI	Governance, Management, and Disclosure. For each 'Yes' response to lines 2 through 7b be			for
		a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or chan Schedule O. See instructions.	ges c	n	
		Check if Schedule O contains a response or note to any line in this Part VI.			. X
Sec	ction A	A. Governing Body and Management			
				Yes	No
1:	If the	the number of voting members of the governing body at the end of the tax year 1a 14 re are material differences in voting rights among members governing body, or if the governing body delegated broad rity to an executive committee or similar committee, explain on Schedule O.			
I		the number of voting members included on line 1a, above, who are independent 1b 14			
2		ny officer, director, trustee, or key employee have a family relationship or a business relationship with any other r, director, trustee, or key employee?	2		Х
3	Did th of offi	e organization delegate control over management duties customarily performed by or under the direct supervision icers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did th	ne organization make any significant changes to its governing documents			
		the prior Form 990 was filed?	4		Х
5 6		ne organization become aware during the year of a significant diversion of the organization's assets?	5 6		X X
7 :		e organization have members, stockholders, or other persons who had the power to elect or appoint one or more bers of the governing body?	7 a		Х
I		ny governance decisions of the organization reserved to (or subject to approval by) members, holders, or persons other than the governing body?	7 b		Х
8	Did th the fo	e organization contemporaneously document the meetings held or written actions undertaken during the year by Illowing:			
	0	overning body?	8 a 8 b	X X	
	Is the	re any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the nization's mailing address? If 'Yes,' provide the names and addresses on Schedule Q	9		х
Sec		B. Policies (This Section B requests information about policies not required by the Internal Re	-	ie Co	
				Yes	No
10 a	a Did th	ne organization have local chapters, branches, or affiliates?	10 a		Х
	operati	' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their ons are consistent with the organization's exempt purposes?	10 b		
		e organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	Х	
		ibe on Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O			
		ne organization have a written conflict of interest policy? If 'No,' go to line 13	12a	Х	
	to cor	officers, directors, or trustees, and key employees required to disclose annually interests that could give rise nflicts?	12b	Х	
	Schee	dule O how this was done SEE . SCHEDULE . Q	12c	X	
13		ne organization have a written whistleblower policy?	13 14	X X	
14 15	Did th	e process for determining compensation of the following persons include a review and approval by independent	14	Λ	
	•	ns, comparability data, and contemporaneous substantiation of the deliberation and decision? organization's CEO, Executive Director, or top management official	15a	Х	
		officers or key employees of the organizationSEE .SCHEDULEO.	15a	X	
		s' to line 15a or 15b, describe the process on Schedule O. See instructions.	150	21	
16	a Did th	e organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a le entity during the year?	16 a		X
I	b If 'Yes	s,' did the organization follow a written policy or procedure requiring the organization to evaluate its ipation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	Tou		
	organ	ization's exempt status with respect to such arrangements?	16 b		
		C. Disclosure			
17		the states with which a copy of this Form 990 is required to be filed ►			
18	availa	on 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 5 ble for public inspection. Indicate how you made these available. Check all that apply. www.website X Another's website X Upon request Other <i>(explain on Schedule O)</i>	01(c)(3	3)s on	lly)
19	Describ	e on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements availa	ble to		
20	•	the name, address, and telephone number of the person who possesses the organization's books and records ►			
20		CABANATUAN 610 ESTHER STREET VANCOUVER WA 98660 (360) 694-2550			

Form 990 (2021) COMMUNITY FOUNDATION FOR SW WASHINGTON	91-1246778	Page 7								
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Higher Independent Contractors	st Compensated Employee	es, and								
Check if Schedule O contains a response or note to any line in this Part VII	·····									
Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees										
1 a Complete this table for all persons required to be listed. Report compensation for the calendar year endir organization's tax year.	ng with or within the									

• 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 the 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.

See the instructions for the order in which to list the persons above.

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

			(C)							
(A) Name and title	(B) Average hours	Pos thar is	ition (de n one bo s both a direc	n off	fficer a	and a e)	0	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated	Former	the organization (W-2/1099- MISC/1099-NEC)	relatéd organizations (W-2/1099- MISC/1099-NEC)	compensation from the organization and related organizations
(1) JENNIFER RHOADS	40]								
PRESIDENT	2		Σ	Χ				195,477.	0.	43,895.
(2) PAM CABANATUAN	40									
CFO	1		Σ	X				140,338.	0.	33,782.
(3) JANIE SPURGEON	40									
EXEC VP AND CDO	0					Х		145,675.	0.	10,197.
(4) T. RANDALL GROVE	2							0	0	2
CHAIR (D) KDI (CHAIR)	1	Х	Σ	X				0.	0.	0.
(5) KRISTY WEAVER	2	v		7				0	0	0
VICE CHAIR (6) VANESSA GASTON	1	Х	Σ	X			_	0.	0.	0.
SECRETARY	<u>2</u> 1	Х	Σ	7				0.	0.	0.
(7) KIM CAPELOTO	2			2				0.	0.	0.
TREASURER	1	Х	Σ	z				0.	0.	0.
(8) CRISTHIAN CANSECO JUAREZ	2		1					0.		<u>0.</u>
DIRECTOR	0	Х						0.	0.	0.
(9) JOHN DEEDER	2									
DIRECTOR	0	Х						0.	0.	0.
(10) ROBERT DJERGAIAN	2									
DIRECTOR	0	Х						0.	0.	0.
(11) MARTY FORSMANN	2									
DIRECTOR	0	Х						0.	0.	0.
(12) STEVE HANSEN	2									
DIRECTOR	0	Х						0.	0.	0.
(13) INNA LIU	2									
DIRECTOR	0	Х						0.	0.	0.
(14) KARISSA LOWE	2				ſ					
DIRECTOR	0	Х						0.	0.	0.
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<u>JT TZ 10110</u>

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Par	t VII Section A. Officers, Directors, Tru	stees,	Key	Em	ploy	/ees	, and	d Highest Com	pensated Emp	oyees (continued)
		(B)			(C)					
	(A) Name and title	Average hours per week (list any	box, offic	, unles cer and	s pers 1 a dire	ion iore that ion is b ector/tr	oth an ustee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from
		hours for related organiza - tions below dotted line)	Individual trustee or director	nstitutional trustee	Officer	employee Kev employee	Former Highest compensated	(W-2/1099- MISC/1099-NEC)	(W-271099- MISC/1099-NEC)	the organization and related organizations
(15)	LISA_LOWE DIRECTOR	20	x					0.	0.	0.
(16)	MARK_MATTHIAS DIRECTOR	<u>2</u> 1	Х					0.	0.	0.
(17)	GEORGE MIDDLETON DIRECTOR	 	x					0.	0.	0.
(18)										
(19)										
(20)										
(21)										
(22)										
(23)			-							
(24)										
(25)										
	Subtotal						•	481,490.	0.	87,874.
d	Total from continuation sheets to Part VII, Section Total (add lines 1b and 1c).						►	0. 481,490.	0.	0. 87,874.
2	Total number of individuals (including but not limited from the organization ► 3	to those I	isted	abov	e) wh	no rec	eived	more than \$100,00	0 of reportable comp	ensation
3	Did the organization list any former officer, direct	or, truste	e, ke	ey em	nploy	vee, c	r higł	nest compensated	employee	Yes No
4	on line 1a? If 'Yes,' complete Schedule J for such For any individual listed on line 1a, is the sum of	reportab	le coi	mper	nsatio	on ar	id oth	er compensation		. <mark>3</mark> <u>X</u>
5	the organization and related organizations greate such individual									. 4 X
	for services rendered to the organization? If 'Yes	,' comple	ete Sc	chedu	ile J	for s	uch p	erson		. 5 X
	Complete this table for your five highest compens compensation from the organization. Report compens	sated ind sation for	epeno the ca	dent alend	cont ar ye	racto ear en	rs tha ding v	t received more the vith or within the or	han \$100,000 of ganization's tax year	
	(A) Name and business addr	ess						(B) Description of	of services	(C) Compensation
. <u> </u>										
·										
2	Total number of independent contractors (including b		ited to	o thos	se lis	ted at	ove)	who received more	than	
	\$100,000 of compensation from the organization	- 0								

Part VIII Statement of Revenue

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

(B) Related or (A) Total revenue (C) (D) Unrelated Revenue business excluded from tax exempt under sections 512-514 function revenue revenue 1 a Federated campaigns 1 a Gifts, Grants, ilar Amounts **b** Membership dues..... 1 b c Fundraising events..... 1 c d Related organizations 1 d e Government grants (contributions) 1 e Contributions, and Other Sin f All other contributions, gifts, grants, and similar amounts not included above . . . 1 f 84,513,485 a Noncash contributions included in 1 g lines 1a-1f. 77,568,471 h Total. Add lines 1a-1f ► 84,513,485 **Business Code** Program Service Revenue 2a SERVICE FEES 900099 77,669 77,669 b С d e f All other program service revenue... g Total. Add lines 2a-2f 77,669 Investment income (including dividends, interest, and 3 other similar amounts) 6,333,820 -8,031. 6,341,851 Income from investment of tax-exempt bond proceeds 4 5 Royalties (i) Real (ii) Personal 6 a Gross rents 6a **b** Less: rental expenses 6b c Rental income or (loss) 6c d Net rental income or (loss) ► (i) Securities (ii) Other 7 a Gross amount from sales of assets other than inventory **b** Less: cost or other basis 7a 26802453 7b and sales expenses 26802453 c Gain or (loss)..... 7c d Net gain or (loss) 8 a Gross income from fundraising events Revenue (not including \$ of contributions reported on line 1c). See Part IV, line 18 8a Other | 8b **b** Less: direct expenses c Net income or (loss) from fundraising events ► ${\bf 9\,a}\,$ Gross income from gaming activities. 9a See Part IV, line 19. **b** Less: direct expenses 9b c Net income or (loss) from gaming activities..... ► **10a** Gross sales of inventory, less returns and allowances. 10a 10b **b** Less: cost of goods sold.... c Net income or (loss) from sales of inventory..... Business Code Miscellaneous 11 a Revenue b С d All other revenue. e Total. Add lines 11a-11d . • Total revenue. See instructions ► 12 6,341,851 90 924 974 77,669 -8,031

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Part IX Statement of Functional Expenses

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

Section 501(c)(3) and 501(c)(4) organizations must cor Check if Schedule O contains a				
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	25,269,385.	25,269,385.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	920,584.	920,584.		
3 Grants and other assistance to foreign organizations, foreign governments, and for- eign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	413,491.	59,843.	293,805.	59,843.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7 Other salaries and wages	857,595.	396,037.	184,126.	277,432.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	56,624.	26,149.	12,157.	18,318.
10 Payroll taxes	<u>120,402.</u> 91,630.	55,602. 34,022.	<u>25,850.</u> 32,631.	<u>38,950.</u> 24,977.
11 Fees for services (nonemployees):	91,030.	34,022.	32,031.	24,977.
a Management				
b Legal	16,836.		16,836.	
c Accounting	68,088.	31,419.	32,996.	3,673.
d Lobbying.	00,000.	51,415.	52,550.	5,075.
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column	100 010		100 010	
(A), amount, list line 11g expenses on Schedule 0.)12 Advertising and promotion	103,616.		103,616.	4.4.0
13 Office expenses	440.	10 504	10 100	440.
14 Information technology	28,531.	<u>10,594</u> . 50,087.	10,160.	7,777.
15 Royalties	134,896.	50,087.	48,039.	36,770.
16 Occupancy	155,874.	57,876.	55,510.	42,488.
17 Travel	1,421.	528.	506.	42,488.
 18 Payments of travel or entertainment expenses for any federal, state, or local public officials. 	1,421.			
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	37,313.	13,854.	13,288.	10,171.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a PRINTING AND PUBLICATIONS	35,914.	30,978.		4,936.
b DUES AND SUBSCRIPTIONS	20,356.	7,558.	7,249.	5,549.
^C EQUIPMENT LEASE & MAINTENANCE	8,413.	3,124.	2,996.	2,293.
d <u>OUTREACH & EVENTS</u>	6,784.	-11,434.		18,218.
e All other expenses.	29,530.	8,788.	14,290.	6,452.
25 Total functional expenses. Add lines 1 through 24e	28,377,723.	26,964,994.	854,055.	558,674.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► if following				
SOP 98-2 (ASC 958-720)				Form 990 (2021)

For	m 99	0 (2021) COMMUNITY FOUNDATION FOR SW	<u>WASHI</u>	NGTON	91-	1246	778 Page 11
Pa	rt X	Balance Sheet Check if Schedule O contains a response or note to	a any line	in this Port V			
					(A) Beginning of year		(B) End of year
	1	Cash – non-interest-bearing			59,204.	1	63,622.
	2	Savings and temporary cash investments			2,941,466.	2	1,473,697.
	3	Pledges and grants receivable, net			, ,	3	, ,
	4	Accounts receivable, net			21,640,000.	4	85,623,026.
	5	Loans and other receivables from any current or form trustee, key employee, creator or founder, substantia controlled entity or family member of any of these pe	er officer, l contribut rsons	director, or, or 35%		5	
	6	Loans and other receivables from other disqualified p	•	F			
		section 4958(f)(1)), and persons described in section	4958(c)(3)(B)		6	
	7	Notes and loans receivable, net				7	
sts	8	Inventories for sale or use				8	
Assets	9	Prepaid expenses and deferred charges			17,226.	9	57,619.
A	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	36,500.			
		Less: accumulated depreciation			36,500.	10 c	36,500.
	11	Investments – publicly traded securities			107,294,551.	11	103,564,670.
	12	Investments - other securities. See Part IV, line 11.			183,219,539.	12	214,562,861.
	13	Investments - program-related. See Part IV, line 11.			1,960,000.	13	4,085,819.
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			3,629,965.	15	3,874,430.
	16	Total assets. Add lines 1 through 15 (must equal line			320,798,451.	16	413, 342, 244.
	17	Accounts payable and accrued expenses			29,448.	17	29,583.
	18	Grants payable				18	,
	19	Deferred revenue			224,185.	19	
	20	Tax-exempt bond liabilities				20	
es	21	Escrow or custodial account liability. Complete Part				21	
Liabilities	22	Loans and other payables to any current or former of key employee, creator or founder, substantial contribu- controlled entity or family member of any of these pe	ficer, dired utor, or 35 rsons	ctor, trustee, ;%		22	
Ξ	23	Secured mortgages and notes payable to unrelated th				23	
	24	Unsecured notes and loans payable to unrelated third	•	-		24	
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com	•		2,098,122.	25	7,540,480.
	26	Total liabilities. Add lines 17 through 25			2,351,755.	26	7,570,063.
ces		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.					.,,
lar	27	Net assets without donor restrictions			225,349,846.	27	245,217,919.
Ba	28	Net assets with donor restrictions			93,096,850.	28	160,554,262.
Net Assets or Fund Balances		Organizations that do not follow FASB ASC 958, che and complete lines 29 through 33.	eck here ►				
ō	29	Capital stock or trust principal, or current funds				29	
ŝ	30	Paid-in or capital surplus, or land, building, or equipn				30	
SSE	31	Retained earnings, endowment, accumulated income				31	
t A	32	Total net assets or fund balances			318,446,696.	32	405,772,181.
Ne	33	Total liabilities and net assets/fund balances		-	320,798,451.	33	413, 342, 244.
BA			TEEA0111L		520,750,451.		Eorm 990 (2021)

BAA

TEEA0111L 09/22/21

413,342,244. Form 990 (2021)

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Part XI Reconciliation of Net Assets X Check if Schedule 0 contains a response or note to any line in this Part XI. X 1 Total expenses (must equal Part VI, column (A), line 12). 1 90,924,974. 2 Total expenses (must equal Part VX, column (A), line 25). 2 28,377,723. 3 Revenue less expenses. Subtract line 2 from line 1. 3 62,547,251. 4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)). 4 18,446,696. 5 Bonated services and use of facilities. 5 30,512,188. 6 Donated services and use of facilities. 7 7 Investment expenses. 7 8 Prior period adjustments. 8 -5,789,068. 9 Other changes in net assets or fund balances (explain on Schedule O). SEE. SCHEDULE O 9 55,114. 10 Net assets or fund balances at degrinue ines 3 through 9 (must equal Part X, line 32. 10 405,772,181. Part XII Financial Statements and Reporting 1 Accounting method used to prepare the Form 990: Cash X Accrual Other 1 Accounting method used to prepare the Form 990: Cash	Forn	n 990 (2021) COMMUNITY FOUNDATION FOR SW WASHINGTON 91-	12467	778		Pa	ge 12
1 Total revenue (must equal Part VIII, column (A), line 12)	Pa	rt XI Reconciliation of Net Assets					
2 Total expenses (must equal Part IX, column (A), line 25)		Check if Schedule O contains a response or note to any line in this Part XI.					. Х
2 Total expenses (must equal Part IX, column (A), line 25)	1	Total revenue (must equal Part VIII, column (A), line 12)	1	90	, 92	4,9	974.
4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)). 4 318, 446, 696. 5 Net unrealized gains (losses) on investments. 5 30, 512, 188. 6 Donated services and use of facilities. 6 7 Investment expenses. 7 8 Prior period adjustments. 8 -5, 789, 068. 9 Other changes in net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)). 10 405, 772, 181. Part XII Financial Statements and Reporting 10 405, 772, 181. Check if Schedule O contains a response or note to any line in this Part XII. 10 405, 772, 181. 1 Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked 'Other,' explain on Schedule 0. 2a X If Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: 2b X If Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis Consolidated basis 2b X If Yes,' check a box below to indic	2	Total expenses (must equal Part IX, column (A), line 25)	2				
4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)). 4 318, 446, 696. 5 Net unrealized gains (losses) on investments. 5 30, 512, 188. 6 Donated services and use of facilities. 6 7 Investment expenses. 7 8 Prior period adjustments. 8 -5, 789, 068. 9 Other changes in net assets or fund balances (explain on Schedule O). SEE SCHEDULE O 9 55, 114. 10 Net assets of fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)). 405, 772, 181. Part XII Financial Statements and Reporting 1 405, 772, 181. Check if Schedule O contains a response or note to any line in this Part XII. 1 405, 772, 181. 1 Accounting method used to prepare the Form 990: Cash X Accrual Other 1 Accounting method used to prepare the Form 990: Cash X Accrual Other 2a X 1 Accounting method used to prepare the Form 990: Cash X Accrual Other 2a X 1 Accounting method used to prepare the Form 990: Cash X Accrual Oth	3	Revenue less expenses. Subtract line 2 from line 1	3	62	,54	7,2	251.
5 Net unrealized gains (losses) on investments. 5 30, 512, 188. 6 6 7 7 7 8 8 Prior period adjustments 9 55, 114. 9 Other changes in net assets or fund balances (explain on Schedule O). SEE SCHEDULE O 9 55, 114. 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (8)). 10 405, 772, 181. Part XII Financial Statements and Reporting 10 405, 772, 181. Check if Schedule O contains a response or note to any line in this Part XII. 10 405, 772, 181. 11 Accounting method used to prepare the Form 990: Cash X Accrual Other 1 ft organization changed its method of accounting from a prior year or checked 'Other,' explain on Schedule O. 2a X 1 Yes, lock a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: 2a X 11 Yes, ' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: 2b X 11 Yes, ' check a box below to indicate whether the financial statements	4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)).	4			-	
6 Donated services and use of facilities 6 7 Investment expenses 7 8 Prior period adjustments 8 -5, 789, 068. 9 Other changes in net assets or fund balances (explain on Schedule O). SEE SCHEDULE O 9 55, 114. 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)). 10 405, 772, 181. Part XII Financial Statements and Reporting 10 405, 772, 181. Check if Schedule O contains a response or note to any line in this Part XII. 10 405, 772, 181. 1 Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked 'Other,' explain on Schedule 0. 2a X If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: 2b X If 'Yes,' check a box below to indicate whether the financial statements for the year were countant? 2b X If 'Yes,' check a box below to indicate whether the financial statements for the year were countant? 2b X If 'Yes,' check a box below to indicate whethere the financial statements for the year we	5	Net unrealized gains (losses) on investments.	5				
8 Prior period adjustments 8 -5,789,068. 9 Other changes in net assets or fund balances (explain on Schedule O). SEE SCHEDULE O 9 55,114. 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)). 10 405,772,181. Part XII Financial Statements and Reporting 10 405,772,181. Check if Schedule O contains a response or note to any line in this Part XII. 11 10 405,772,181. 1 Accounting method used to prepare the Form 990: Cash X Accrual Other 1 If the organization changed its method of accounting from a prior year or checked 'Other,' explain 2a X 2a X If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis. 2b X 2b X If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, orsolidated basis. Both consolidated and separate basis 2b X If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis. 2b X 2b X If 'Yes,' check a box below to indicate whether the financial statements for the year we	6	Donated services and use of facilities	6		,		
9 Other changes in net assets or fund balances (explain on Schedule O). SEE SCHEDULE O 9 55,114. 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)). 10 405,772,181. Part XII Financial Statements and Reporting 10 405,772,181. Check if Schedule O contains a response or note to any line in this Part XII. 11 10 405,772,181. 1 Accounting method used to prepare the Form 990: Cash X Accrual Other 1 If the organization changed its method of accounting from a prior year or checked 'Other,' explain 2a X 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a X If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis 2b X If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis. 2b X If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis. 2b X If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis. 2b X If 'Yes,' check a box below to indicate whether the financial statement a	7	Investment expenses	7				
10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 10 405, 772, 181. Part XII Financial Statements and Reporting	8	Prior period adjustments	8	-5	,78	9,0)68.
10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 10 405, 772, 181. Part XII Financial Statements and Reporting	9	Other changes in net assets or fund balances (explain on Schedule O). SEE SCHEDULE O	9		5	5,1	.14.
Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII. Image: Check if Schedule O contains a response or note to any line in this Part XII. 1 Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked 'Other,' explain on Schedule O. 2a X 2 a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a X If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Both consolidated and separate basis 2b X If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: 2b X Zb X If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: 2b X Zb X If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis C C Y X Zb X Zb X Zb X Zb X Zb X Zb X	10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
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If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: Image: Consolid	ł	Were the organization's financial statements audited by an independent accountant?			2 h	х	
basis, consolidated basis, or both:	-	5					
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? 2 c X If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? 3a X b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits 3b		basis, consolidated basis, <u>or</u> both:					
review, or compilation of its financial statements and selection of an independent accountant? 2 c X If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O. 2 c X 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? 3 a X b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits. 3 b		Separate basis X Consolidated basis Both consolidated and separate basis					
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Audit Act and OMB Circular A-133? 3a X b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits 3b							
or audits, explain why on Schedule O and describe any steps taken to undergo such audits	38				3 a		Х
	ł				3 h		
	RAA					990 ((2021)

SCHEDULE A (Form 990)	

(E)

Total

Public Charity Status and Public Support

OMB No. 1545-0047 1

1

	IEDULE A			ly Status and F		•••			2021
(For	n 99 0)	Com	plete if the organizat	ion is a section 501(c) (1) nonexempt charita	(3) orga	nization	or a section	n	2021
			•	ch to Form 990 or Form					On an to Datella
Depar	tment of the Treasury al Revenue Service	► 0		rm990 for instructions			nformation.		Open to Public Inspection
	of the organization								•
	5			NT.				loyer identifica	
Par			R SW WASHINGTO	rganizations must	compl	oto thi		-124677	
				For lines 1 through 12,					10115.
1	Ĕ	•	•	nurches described in sect		-			
2				ach Schedule E (Form		5717-7	(1).		
3				ization described in sec		0/6/11//			
4		•		unction with a hospital of				(1)(A)(iii) F	nter the hospital's
-	name, city, a	-							
5	An organizati	——— on operated for (1)(1)(A)(iv). (Co	the benefit of a colle mplete Part II.)	ge or university owned	or oper	ated by	a governme	ental unit de	scribed in
6				ntal unit described in s	ection 1	1 70(b)(1))(A)(v).		
7	An organizatio	n that normally r D(b)(1)(A)(vi). (1	eceives a substantial p Complete Part II.)	art of its support from a	governm	iental un	it or from the	e general pub	lic described
8	X A community	trust described	in section 170(b)(1)(A)(vi). (Complete Part I	l.)				
9				tion 170(b)(1)(A)(ix) operative (see instructions). Enter					
10	investment in	come and unre	y receives (1) more the exempt functions, sub lated business taxable 509(a)(2). (Complete F	nan 33-1/3% of its supp ject to certain exceptio e income (less section Part III.)	oort from ns; and 511 tax)	n contrib (2) no r) from b	outions, men more than 3 usinesses a	nbership fee 3-1/3% of it cquired by t	es, and gross receipts s support from gross he organization after
11				ly to test for public safe	ety. See	sectior	n 509(a)(4) .		
12	or more publi	cly supported o	rganizations describe	ly for the benefit of, to d in section 509(a)(1) of upporting organization	or sectio	on 509(a)(2). See se	ction 509(a)	It the purposes of one (3). Check the box on
а	organization(s)	orting organization the power to re t IV, Sections A	gularly appoint or elect	d, or controlled by its sup a majority of the director	ported or rs or trus	organizat stees of I	ion(s), typica the supportin	ally by giving g organizatio	the supported on. You must
Ł	management of	porting organiz of the supporting te Part IV, Sect i	organization vested in	ontrolled in connection the same persons that c	with its ontrol or	support manage	ted organiza the supporte	ition(s), by l ed organizati	naving control or on(s). You
c	Type III functio	nally integrated.	. A supporting organizat	ion operated in connection olete Part IV, Sections	n with, ai A, D, an	nd functio d E.	onally integra	ited with, its s	supported
C	functionally in	ntegrated. The c	organization generally	anization operated in cor must satisfy a distribu s A and D, and Part V.	nnection tion req	with its s uiremen	supported org it and an att	ganization(s) entiveness	that is not requirement (see
e	integrated, or	Type III non-fu	nctionally integrated	en determination from t supporting organizatior	1.			уре II, Туре	e III functionally
			5						
	•	-	n about the supported		1				
	(i) Name of supported o	rganization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	organizat in your g	ls the tion listed governing ment?		of monetary instructions)	(vi) Amount of other support (see instructions)
					Yes	No	-		
(A)									
<u>(B)</u>									
(C)									
<u>(D)</u>									

COMMUNITY FOUNDATION FOR SW WASHINGTON 91-1246778

Page 2

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

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

Section A. Public Support Calendar year (or fiscal year beginning in) ► (a) 2017 (b) 2018 (d) 2020 (e) 2021 (c) 2019 (f) Total Gifts, grants, contributions, and membership fees received. (Do pat include any 'unusual grants.'). PT. VI 1 25443494 18520616 19083459 14924364 18513485 96,485,418. Tax revenues levied for the 2 organization's benefit and either paid to or expended on its behalf..... 0. The value of services or facilities furnished by a governmental unit to the organization without charge ... Ω Total. Add lines 1 through 3... 19083459 4 25443494 18520616. 14924364 18513485. 96,485 418. The portion of total 5 contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) ... 32,380,014. Public support. Subtract line 5 6 from line 4 64,105,404. Section B. Total Support Calendar year (or fiscal year beginning in) ► (a) 2017 (b) 2018 (c) 2019 (d) 2020 (e) 2021 (f) Total 7 Amounts from line 4..... 25443494 18520616 19083459 14924364 18513485 96,485,418. 8 Gross income from interest, dividends, payments received on securities loans, rents, rovalties, and income from similar sources 3,555,701. 6,341,118. 6,416,288. 6,323,806. 6,341,851 28,978,764. Net income from unrelated 9 business activities, whether or not the business is regularly carried on..... 2,443 2,443. Other income. Do not include 10 gain or loss from the sale of capital assets (Explain in Part VI.) 0. 11 Total support. Add lines 7 through 10 125466625 Gross receipts from related activities, etc. (see instructions)..... 168,330 12 12 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 organization, check this box and **stop here**. ► Section C. Computation of Public Support Percentage 14 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f))..... 14 51.09% 15 Public support percentage from 2020 Schedule A, Part II, line 14 15 55.58% 16a 33-1/3% support test-2021. If the organization did not check the box on line 13, and line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. Х b 33-1/3% support test-2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test-2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here**. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization..... b 10%-facts-and-circumstances test-2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here**. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization..... Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions. 18

Schedule A (Form 990) 2021

COMMUNITY FOUNDATION FOR SW WASHINGTON

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.) D. I.I.

Sec	tion A. Public Support						
-	lar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any 'unusual grants.')						
2	Gross receipts from admissions,						
	merchandise sold or services performed, or facilities						
	furnished in any activity that is						
	related to the organization's tax-exempt purpose						
3	Gross receipts from activities						
	that are not an unrelated trade or business under section 513.						
4	Tax revenues levied for the						
	organization's benefit and						
	either paid to or expended on its behalf						
5	The value of services or						
	facilities furnished by a governmental unit to the						
	organization without charge						
	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.						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						
	dar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Amounts from line 6	(a) 2017	(6)2010	(0) 2015	(u) 2020	(0) 2021	
	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties, and income from similar sources						
b	Unrelated business taxable						
	income (less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business						
11	activities not included on 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,						
1/	10c, 11, and 12.) First 5 years. If the Form 990 is	for the organizati	on's first second	third fourth or f	ifth tax year as a	section 501(c)(3)	
	organization, check this box and						►
Sec	tion C. Computation of Pu						
15	11 1 5	-			-		
16	Public support percentage from						010
	tion D. Computation of Inv					I	^
17	Investment income percentage f	-		-			00
18	Investment income percentage f						96 al line 17
19a	33-1/3% support tests—2021. If is not more than 33-1/3%, check	the organization of this box and sto	not check the l p here. The organ	pox on line 14, ar nization qualifies a	a line 15 is more as a publicly supp	tnan 33-1/3%, an orted organization	a iine 17 i►
b	33-1/3% support tests-2020. If t	the organization c	lid not check a bo	ox on line 14 or lir	ne 19a, and line 1	6 is more than 33.	1/3%, and
~~	line 18 is not more than 33-1/3%		-				
20	Private foundation. If the organi	∠ation did not che			CHECK THIS DOX AND		∧ (Farm 000) 2021

91-1246778

 Part IV
 Supporting Organizations

 (Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, 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 If 'No,' describe in Part VI how the supported organizations are designated. If designated by class or purported the designation. If historic and continuing relationship, explain.	ose, describe		
2 Did the organization have any supported organization that does not have an IRS determination of status ur	nder section		
509(a)(1) or (2)? If 'Yes,' explain in Part VI how the organization determined that the supported org described in section 509(a)(1) or (2).	ganization was 2		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Y and 3c below.	/es,' answer lines 3b	a 📃	
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5) satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in Part VI when and he made the determination.), or (6) and ow the organization	5	
c Did the organization ensure that all support to such organizations was used exclusively for section purposes? If 'Yes,' explain in Part VI what controls the organization put in place to ensure such us	170(c)(2)(B) se. 3	:	
4a Was any supported organization not organized in the United States ('foreign supported organization if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	n')? If 'Yes' and	a	
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign organization? If 'Yes,' describe in Part VI how the organization had such control and discretion despite being or supervised by or in connection with its supported organizations.	n supported controlled	5	
c Did the organization support any foreign supported organization that does not have an IRS determine sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in Part VI what controls the organization used all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purports of the termine support of termine supp	used to ensure that	5	
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' a 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN nur supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) authority under the organization's organizing document authorizing such action; and (iv) how the a accomplished (such as by amendment to the organizing document).	mbers of the the	a	
b Type I or Type II only. Was any added or substituted supported organization part of a class already organization's organizing document?	y designated in the 5	5	
c Substitutions only. Was the substitution the result of an event beyond the organization's control?	5	c	
6 Did the organization provide support (whether in the form of grants or the provision of services or f anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class or more of its supported organizations, or (iii) other supporting organizations that also support or benefit or the filing organization's supported organizations? <i>If 'Yes,' provide detail in Part VI.</i>	ss benefited by one		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% contro regard to a substantial contributor? <i>If 'Yes,' complete Part I of Schedule L (Form 990)</i> .			
 B Did the organization make a loan to a disqualified person (as defined in section 4958) not described on lin complete Part I of Schedule L (Form 990). 	ne 7? If 'Yes,' 8		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqua as defined in section 4946 (other than foundation managers and organizations described in section <i>If 'Yes,' provide detail in Part VI.</i>		a	
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity supporting organization had an interest? <i>If 'Yes,' provide detail in Part VI.</i>	y in which the 9	5	
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any perso assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI.	onal benefit from,	:	
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 494 certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations.	43(f) (regarding janizations)? <i>If 'Yes,'</i>	a	
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to a whether the organization had excess business holdings.)	determine 10	2	

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

COMMUNITY FOUNDATION FOR SW WASHINGTON

Section B. Type I Supporting Organizations

Schedule A (Form 990) 2021

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
 - a 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.*
 - c The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).

2 Activities Test. Answer lines 2a and 2b below.

- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If 'Yes' or 'No,' provide details in Part VI.*
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If 'Yes,' describe in **Part VI** the role played by the organization in this regard.

2a

2b

3a

91-1246778

Page 5

Yes

Yes

No

No

Yes

1

2

No

Schedule A (Form 990) 2021 COMMUNITY FOUNDATION FOR SW WASHINGTON Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

Check here if the organization satisfied the Integral Part Test as a qualifying tr instructions. All other Type III non-functionally integrated supporting organization	ust on No	v. 20. 1970 (explain ir	n Part VI). See through E.
Section A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B — Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for sho tax year or assets held for part of year):	rt		
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 0.015 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 0.035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C – Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1		
2 Enter 0.85 of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
		<u> </u>	

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions). 7

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Schedule A (Form 990) 2021

COMMUNITY FOUNDATION FOR SW WASHINGTON

Par	t V Type III Non-Functionally Integrated 509(a)(3) Si	upporting Organiza	ations (continue	ed)	
Sec	tion D – Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exempt pu		1		
2	Amounts paid to perform activity that directly furthers exempt purposes	of supported organizatior	ns,		
	in excess of income from activity	2			
3	Administrative expenses paid to accomplish exempt purposes of su		3		
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - provide	e details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the organizati	ion is responsive (provide	e details		
9	in Part VI). See instructions. Distributable amount for 2021 from Section C, line 6			8	
	Line 8 amount divided by line 9 amount			10	
				10	
Sec	tion E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributi Pre-2021	ons	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2021 (reasonable cause required – <i>explain in Part VI</i>). See instructions.				
3	Excess distributions carryover, if any, to 2021				
a	From 2016				
b	From 2017				
	From 2018				
c	From 2019				
e	P From 2020				
1	Total of lines 3a through 3e				
ġ	Applied to underdistributions of prior years				
h	Applied to 2021 distributable amount				
i	Carryover from 2016 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2021 from Section D, line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2021 distributable amount				
C	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.				
6	Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.				
7	Excess distributions carryover to 2022. Add lines 3j and 4c.				
8	Breakdown of line 7:				
a	Excess from 2017				
-	Excess from 2018				
	Excess from 2019				
C	Excess from 2020				
e	Excess from 2021				

BAA

Schedule A (Form 990) 2021

Schedule A (Form 990) 2021	COMMUNITY FOUNDATION FOR SW WASHINGTON	91-1246778	Page 8				
B, lines 1 and 2; F 3a, and 3b; Part V	Information. Provide the explanations required by Part II, line 10; Pa, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; art IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section I, line 1; Part V, Section D, lines 5, 6, and 8; and Also complete this part for any additional information. (See instructions.)	E, lines 1c, 2a, 2b,					
PART II, LINE 1 - UNUSUAL GRANTS							

2017	2018		2019)	2020		2021	TOTAL
\$ 83,139,200.	\$	0.	\$	0.	\$	0.	\$ 66,000,000.	\$ 149,139,200.

Schedule B (Form 990)

PUBLIC DISCLOSURE COPY Schedule of Contributors OMB No. 1545-0047

2	0	21	

Department of the Treasury
Internal Revenue Service

Attach to Form 990 or Form 990-PF. Go to www.irs.gov/Form990 for the latest information.

F GO to www.irs.go

Name of the organization	Employer identification number				
COMMUNITY FOUNDATIO	91-1246778				
Organization type (check one):					
Filers of:	Section:				
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization				
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	on			
	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

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), 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), 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).

BAA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2021)	1	1	Page 2
Name of organization	Employer identification number	r	
COMMUNITY FOUNDATION FOR SW WASHINGTON	91-1246778		
Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.			

	-		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>		\$9,756,724.	PersonXPayrollNoncashX(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$66,000,000.	PersonXPayrollNoncashX(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
	TEE 007021 10/06/21		noncash contributions.)

Schedule B (Form 990) (2021)	1	1	Page 3
Name of organization	Employer ident	ification nu	mber
COMMUNITY FOUNDATION FOR SW WASHINGTON	91-1246	778	

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

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional s	pace is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>1</u>	STOCK	-	
		\$9,756,674.	1/27/21
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
2	BEQUEST RECEIVABLE	-	
		\$65,000,000.	12/31/21
(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
	L	\$	
BAA	TEEA0703L 10/06/21	Schedule I	3 (Form 990) (2021

	B (Form 990) (2021)			1 1 Page 4					
Name of orga	nization ITY FOUNDATION FOR SW WASHIN	GTON		Employer identification number 91-1246778					
Part III	Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of <i>exclusively</i> religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.)								
(a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held					
Part I	N/A								
				+					
		(e) Transfer of gif	t						
	Transferee's name, addres			ationship of transferor to transferee					
(a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held					
Part I									
				+					
		(e) Transfer of gif	t						
	Transferee's name, addres	s, and ZIP + 4	Rela	tionship of transferor to transferee					
(a) No									
(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 gift								
	Transferee's name, addres	s, and ZIP + 4	Rela	ationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held					
	+								
	Transferee's name, addres	(e) Transfer of gif ss, and ZIP + 4		ationship of transferor to transferee					
		·							
	L								
BAA		TEEA0704 10/06/21		Schodula P (Form 990) (2021)					

SCHEDULE C		Political Campaign and L	obbying Activ	vities	OMB No. 1545-0047				
(Form 990)	For	Organizations Exempt From Income Tax	Under section 501(c)	and section 527	2021				
Department of the Treasury Internal Revenue Service	► Com	blete if the organization is described beloder ► Go to www.irs.gov/Form990 for instruct	w. ► Attach to Form tions and the latest	990 or Form 990-EZ. information.	Open to Public Inspection				
 Section 501(c)(3) c Section 501(c) (oth Section 527 organi 	 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. 								
 Section 501(c)(3) or 	 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-B. 								
(Proxy Tax) (See separation 501(c)(4),	rate instruc	,' on Form 990, Part IV, line 5 (Proxy Tax) tions), then rganizations: Complete Part III.	(See separate instru						
Name of organization				Employer identifica					
		FOR SW WASHINGTON rganization is exempt under section	on 501(c) or is a	91-124677					
· · · · ·		organization's direct and indirect political of		•	2411011.				
See instructions	for definition	n of 'political campaign activities.'							
1 0		penditures. See instructions.		•					
		campaign activities. See instructions rganization is exempt under section							
		ise tax incurred by the organization under		► ¢	0.				
		tise tax incurred by organization managers							
		a section 4955 tax, did it file Form 4720 for							
b If 'Yes,' describe	in Part IV.								
		rganization is exempt under section							
	-	pended by the filing organization for section							
2 Enter the amount 527 exempt funct	t of the filing tion activitie	g organization's funds contributed to other	organizations for sec	ction ►\$					
3 Total exempt fun line 17b	ction expen	ditures. Add lines 1 and 2. Enter here and	on Form 1120-POL,	▶\$					
4 Did the filing orga	anization file	e Form 1120-POL for this year?			Yes No				
organization mac amount of political	te payments I contribution	and employer identification number (EIN) s. For each organization listed, enter the a s received that were promptly and directly de l action committee (PAC). If additional spa	mount paid from the livered to a separate p	filing organization's fund olitical organization, such	ds. Also enter the as a separate				
(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				
(1)									
(2)									
(3)									
(4)									
(5)									
(6)	duotien Art		000 57						
BAA For Paperwork Re	eduction Act	Notice, see the Instructions for Form 990 or	990-EZ.	Sched	lule C (Form 990) 2021				

Schedule C (Form 990) 2021	COMMUNITY FO	UNDATION FOR SW	WASHINGTON	91-1246	5778 Page 2
Part II-A Complete if section 501(the organization h)).	is exempt under see	ction 501(c)(3) and	filed Form 5768 (el	ection under
A Check ► if the filin	g organization belongs	to an affiliated group (and	list in Part IV each affilia	ted group member's name	2,
		share of excess lobbying			
		ked box A and 'limited cor			
(The term	Limits on Lobbyin 'expenditures' mean	ng Expenditures is amounts paid or incurr	red.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditu	ures to influence pub	lic opinion (grassroots lob	bying)		
b Total lobbying expenditu	ures to influence a le	gislative body (direct lobb	ying)		
c Total lobbying expenditu	ures (add lines 1a an	d 1b)		0.	0.
d Other exempt purpose e	expenditures			28,377,723.	
e Total exempt purpose e	xpenditures (add line	es 1c and 1d)		28,377,723.	0.
f Lobbying nontaxable an	nount Enter the amo	unt from the following tab	ole in both		
				1,000,000.	
If the amount on line 1e, colu	umn (a) or (b) is: 1	he lobbying nontaxable	amount is:		
Not over \$500,000	2	0% 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 o	over \$1,500,000.		
Over \$17,000,000	\$	1,000,000.			
g Grassroots nontaxable a	amount (enter 25% o	f line 1f)		250,000.	0.
h Subtract line 1g from lir	ne 1a. If zero or less,	enter -0		0.	0.
i Subtract line 1f from line	e 1c. If zero or less,	enter -0		0.	0.
j If there is an amount othe section 4911 tax for this	er than zero on either I s year?	ine 1h or line 1i, did the org	anization file Form 4720	reporting	Yes No
(Som	e organizations that	-Year Averaging Period L made a section 501(h) el w. See the separate inst	ection do not have to c	complete all of the five rough 2f.)	
	Lobby	ing Expenditures During	4-Year Averaging Perio	bd	
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total
2 a Lobbying nontaxable amount	1,000,000	. 953,671.	1,000,000.	1,000,000.	3,953,671.

amount	1,000,000.	953,671.	1,000,000.	1,000,000.	3,953,671.
b Lobbying ceiling amount (150% of line 2a, column (e))					5,930,507.
c Total lobbying expenditures					0.
d Grassroots nontaxable amount	250,000.	238,418.	250,000.	250,000.	988,418.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,482,627.
f Grassroots lobbying expenditures					0.

Schedule C (Form 990) 2021

Schedule	С	(Form	990)	2021

91-1246778 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)).

		(a)		(b)	
For each 'Yes' response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	Yes	No	Am	ount	
1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
a Volunteers?					
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
c Media advertisements?					
 d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements?					
f Grants to other organizations for lobbying purposes?					
g Direct contact with legislators, their staffs, government officials, or a legislative body?h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i Other activities?					
j Total. Add lines 1c through 1i					
2 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?b If 'Yes,' enter the amount of any tax incurred under section 4912.					
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912					
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501 section 501(c)(6).	(c)(5)	, or			
				Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?			1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the	prior y	ear?	3		
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501 (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b)	(c)(5) Part	, or s III-A,	ection 5 line 3, is	01(c)	

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

Part IV Supplemental Information

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

SCHEDULE D (Form 990) 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.												
Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.												
	Name of the organization Employer identification number COMMUNITY FOUNDATION FOR SW WASHINGTON											
COM	MONILI FOON	DAIION FOR SW WASH	INGION		91-124	6778						
Par	t I Organizat Complete	tions Maintaining Dong if the organization ans	or Advised Funds or Other Si wered 'Yes' on Form 990, Par	nilar Funds or A t IV, line 6.	counts.							
			(a) Donor advised funds	(b)	Funds and	other acco	unts					
1	Total number at e	end of year		156			214					
2		tributions to (during year)		4,399.			179,086.					
3		ints from (during year)		3,071.			906,898.					
4	00 0	at end of year				99,4	409,296.					
5	are the organizati	ion's property, subject to the	nor advisors in writing that the assets organization's exclusive legal contro	?	Σ	∑Yes	No					
6	for charitable pur	poses and not for the benefit	rs, and donor advisors in writing that of the donor or donor advisor, or for	r any other purpose c	onferring _	∑ Yes	□No					
Dev						1 105						
Par		tion Easements.	wered 'Yes' on Form 990, Par	t IV line 7								
1			the organization (check all that app									
		f land for public use (for exam		Preservation of a his	torically imp	ortant land	d area					
		natural habitat		Preservation of a cer	5 1							
	Preservation	of open space										
2	Complete lines 2a last day of the tax		neld a qualified conservation contributio	n in the form of a cons	ervation ease	ement on th	e					
					Held at the	End of the	e Tax Year					
				-								
	-	-	ments									
c	Number of conser	rvation easements on a certi	fied historic structure included in (a)	2c								
C	structure listed in	the National Register	n (c) acquired after 7/25/06, and not	2 d								
3	Number of conserv tax year ►	ation easements modified, trar	nsferred, released, extinguished, or tern	ninated by the organiza	tion during th	ie						
4		where property subject to conse										
5			garding the periodic monitoring, insp		olations,							
6			nts it holds?		easements du	Yes uring the ye	No ar					
-			ation boudling of violations, and approx		nanta durina	the week						
7	Amount of expense ►\$		ecting, handling of violations, and enfor	cing conservation ease	nents during	the year						
8	and section 170(h	ı)(4)(B)(ii)?	n line 2(d) above satisfy the requiren			Yes	No					
9	In Part XIII, descr include, if applica conservation ease	able, the text of the footnote	ports conservation easements in its r to the organization's financial statem	evenue and expense lents that describes the	statement a le organizat	nd balance ion's accou	e sheet, and unting for					
Par	t III Organizat Complete	tions Maintaining Colle if the organization ans	ctions of Art, Historical Treas wered 'Yes' on Form 990, Par	s ures, or Other S t IV, line 8.	milar Ass	sets.						
1 a	historical treasure	es, or other similar assets he	r FASB ASC 958, not to report in its Id for public exhibition, education, or I statements that describes these ite	research in furtherar	nd balance s ice of public	sheet works service, p	s of art, rovide in					
Ł	historical treasures following amounts	s, or other similar assets held for s relating to these items:	r FASB ASC 958, to report in its reve or public exhibition, education, or resea	rch in furtherance of pu	blic service,	t works of provide the	art,					
			line 1									
2	If the organization amounts required	received or held works of art, h to be reported under FASB	historical treasures, or other similar asso ASC 958 relating to these items:	ets for financial gain, p	rovide the fol	lowing						
a	Revenue includeo	I on Form 990, Part VIII, line	1		►\$							
<u></u>	Assets included in	n Form 990, Part X	·····		►\$							
BAA	For Paperwork R	eduction Act Notice, see the	Instructions for Form 990.	TEEA3301L 08/30/21	Scheo	lule D (For	m 99 0) 202 1					

		ATION FOR SW			91-1246		Page 2
Part III Organizations Mainta	ining Collecti	ons of Art, Histo	orical Treasure	es, or O	ther Similar Asse	ets (contin	nued)
3 Using the organization's acquisition items (check all that apply):	, accession, and c	_	5 0		significant use of its o	collection	
a Public exhibition			or exchange prog	Iram			
b Scholarly research		e Other					
 c Preservation for future gener 4 Provide a description of the organiz 		and explain how the	y further the organi	zation's ex	empt purpose in		
Part XIII. 5 During the year, did the organiza	tion solicit or rec	eive donations of a	t historical treasu	ures or of	ther similar assets		
to be sold to raise funds rather th	an to be mainta	ined as part of the o	organization's colle	ection?		Yes	No
Part IV Escrow and Custodia line 9, or reported an a	I Arrangemer amount on Fc	rm 990, Part X,	the organizatio line 21.	on answe	ered 'Yes' on For	m 990, Pa	art IV,
1 a Is the organization an agent, trus on Form 990, Part X?	stee, custodian o	r other intermediary	for contributions	or other a	assets not included	Yes	No
b If 'Yes,' explain the arrangement					····· L		
		· · · · · · · ·	3]	Å	Amount	
c Beginning balance					1 c		
d Additions during the year					1 d		
e Distributions during the year					1 e		
f Ending balance					1 f		
2 a Did the organization include an a	mount on Form	990, Part X, line 21,	for escrow or cus	stodial acc	count liability?	Yes	No
b If 'Yes,' explain the arrangement	in Part XIII. Che	ck here if the expla	nation has been p	provided o	n Part XIII	 	Π
Part V Endowment Funds. C							
	(a) Current year				(d) Three years back	(e) Four ye	
1 a Beginning of year balance	74,010,97				61,301,218.	55,008	
b Contributions	1,404,24	4,153,5	550. 665	5,649.	10,196,186.	7,457	7,455.
c Net investment earnings, gains, and losses	8,307,41	.8. 3,484,5	539. 9,114	4,760.	-3,822,732.	5,217	7,350.
d Grants or scholarships	3,050,77	78. 2,596,0	3,185	5,972.	2,743,364.	5,569	9,497.
e Other expenditures for facilities and programs	3,500,50	57.			0.		
f Administrative expenses	863,88	34. 792,8	92	7,311.	836,713.		3,051.
g End of year balance	76,307,41	.6. 74,010,9	978. 69,761	1,721.	64,094,595.	61,301	.,218.
2 Provide the estimated percentage	e of the current y	ear end balance (lir	ne 1g, column (a))) held as:			
a Board designated or quasi-endowm	ent 🕨	00					
b Permanent endowment	100.00 %						
c Term endowment	010						
The percentages on lines 2a, 2b, ar	nd 2c should equa	100%.					
3a Are there endowment funds not in t	he possession of	he organization that	are held and admin	nistered for	the		
organization by:						Yes	
(i) Unrelated organizations						3a(i)	X
(ii) Related organizations						3a(ii)	Х
b If 'Yes' on line 3a(ii), are the rela	-					3b	
4 Describe in Part XIII the intended		anization's endowm	ent funds. SEE	PART 2	XIII		
Part VI Land, Buildings, and							
Complete if the organi	zation answe	red 'Yes' on For	m 990, Part IV	/, line 11	la. See Form 990), Part X,	line 10.
Description of property	(a)	Cost or other basis (investment)	(b) Cost or oth basis (other)	ner)	(c) Accumulated depreciation	(d) Book	value
1 a Land		36,500.				3	6,500.
b Buildings							
c Leasehold improvements							
d Equipment							
e Other							
Total. Add lines 1a through 1e. (Column	n (d) must equa	Form 990, Part X,	column (B), line 1	10c.)			6,500.
BAA					Schedu	ıle D (Form 9	90) 2021

Schedule D (Form 990) 2021

Schedule D (Form 990) 2021 COI	ΜΜΙΙΝΤΤΎ ΓΟΙΙΝΟΔΤΤΟΝ	FOR	NOTONTH2 AW W2	
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(a) Description of scartpr or disput (heading new of security) (b) Book value (c) Method of valuation: Dot or end of year market value (b) Financial diversities. (c) Method of valuation: Dot or end of year market value (c) Method of valuation: Dot or end of year market value (c) Outer PRIVATE EQUITY PARTNERSHIPS (c) PRIVATE PLACEMENTS (c) Method of valuation: Dot or end of year market value (c) Outer PRIVATE PLACEMENTS (c) Method of valuation: Dot or end of year market value (c) Outer PRIVATE PLACEMENTS (c) Method of valuation: Dot or end of year market value (c) Outer PRIVATE PLACEMENTS (c) Method of valuation: Dot or end of year market value (c) Outer (c) mark equal from 900. Part X, column (c) me (2). (c) Method of valuation: Cost or end-of-year market value (c) Outer (c) mark equal from 900. Part X, column (c) me (2). (c) Method of valuation: Cost or end-of-year market value (c) Outer (c) mark equal from 900. Part X, column (c) me (2). (c) Method of valuation: Cost or end-of-year market value (c) Outer (c) mark equal from 900. Part X, column (c) me (2). (c) Method of valuation: Cost or end-of-year market value (c) Outer (c) mark equal from 900. Part X, column (c) me (2). (c) Method of valuation: Cost or end-of-year market value (c) Outer (c) mark equal from 900. Part X, column (c) me (2). (c) Method of valuation: Cost or end-of-year market value	Part VII Investments – Other Securities. Complete if the organization answered	1 'Yes' on Form 99() Part IV line 11b See Form 9	990 Part X line 12
(2) Closely hild quity interests				
(2) Closely hild quity interests	(1) Financial derivatives			
(A) PRIVATE PLACEMENTS 184,867,580. END OF YEAR MARKET VALUE (B) 184,867,580. END OF YEAR MARKET VALUE (C) 214,552,861. END OF YEAR MARKET VALUE (C) (D) Book value (NA (C) (D) Book value (O) Book value (C) (D) Book value (O) Book value (C) (D) End Sests. End (D) EN (3). (D) EN (3). (D) EN (4). (D) EN	(2) Closely held equity interests.			
[9]	(3) Other PRIVATE EQUITY PARTNERSHIPS &	29,695,281.	END OF YEAR MARKET VALU	E
(C) (C) (C) ((A) PRIVATE PLACEMENTS			E
(C) (C) (C) ((B)			
(9)	 (C)			
(a) (b) (b) (c) (c) ((D)			
(G) 214, 562, 861. Part VIII [Investments - Program Related. Complete if the organization answered Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13 (a) Description of investment (b) Book value (c) (c) Method of valuation: Cost or end-of-year market value (c) (c) (d) Description of investment (c) Method of valuation: Cost or end-of-year market value (d) (c) (e) (c) (f) (c) (g) (c) <td< td=""><td> (E)</td><td></td><td></td><td></td></td<>	 (E)			
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0 214. (20/umm (0) must equal Form 90, Part X, column (8) line 12)	(G)			
Total. (Column (c) must equal Form 980, Part X, column (B) line 12). 214, 562, 861. N/A N/A N/A	(H)			
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(1) Image: Control of Contrel of Control of Control	Complete if the organization answered	d 'Yes' on Form 99	0, Part IV, line 11d. See Form 9	
(2) (3) (3) (4) (4) (5) (5) (7) (6) (7) (7) (7) (8) (9) (10) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 15.) (10) Part X Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 1. (a) Description of liability (1) Federal income taxes (b) Book value (2) AGENCY ENDOWMENT AGMNTS 5, 386, 922. (3) LIAB FOR SPLIT INTRST AGMNTS 2, 153, 558. (4) (5) (5) (6) (7) (8) (9) (10) (10) (10) (11) Federal Form 990, Part X, column (B) line 25. 7, 540, 480.		escription		(b) Book value
(3) (4) (4) (5) (5) (7) (8) (7) (9) (7) (10) (7) Total. (Column (b) must equal Form 990, Part X, column (B) line 15.) (7) (10) (7) Part X Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 1. (a) Description of liability (1) Federal income taxes 5, 386, 922. (2) AGENCY ENDOWMENT AGMNTS 5, 386, 922. (3) LIAB FOR SPLIT INTRST AGMNTS 2, 153, 558. (4) (6) (7) (8) (9) (9) (10) (11) Total. (Column (b) must equal Form 990, Part X, column (B) line 25). 7, 540, 480.				
(4) (5) (5) (6) (7) (7) (8) (7) (9) (7) (10) (7) Total. (Column (b) must equal Form 990, Part X, column (B) line 15.) (7) Part X Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. (b) Book value (1) Federal income taxes (a) Description of liability (b) Book value (1) Federal income taxes 5, 386, 922. (3) LIAB FOR SPLIT INTRST AGMNTS 2, 153, 558. (4) (5) (6) (7) (6) (6) (7) (7) (7) (10) (8) (9) (10) (11) (11) Total. (Column (b) must equal Form 990, Part X, column (B) line 25). 7, 540, 480. 7, 540, 480.				
(5) (6) (7) (7) (8) (9) (10) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 15,)				
(6) (7) (8) (9) (10) (10) Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. (b) Book value (1) Federal income taxes (b) Book value (2) AGENCY ENDOWMENT AGMNTS 5, 386, 922. (3) LIAB FOR SPLIT INTRST AGMNTS 5, 386, 922. (4) (5) (6) (7) (7) (10) (7) (10) (7) (10) (10) (11) (11) Fotal. (Column (b) must equal Form 990, Part X, column (B) line 25). 7, 540, 480.				
(7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 15.)				
(8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 15.) ► Part X Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. ► 10) (a) Description of liability (b) Book value (1) Federal income taxes (b) Book value (2) AGENCY ENDOWMENT AGMNTS 5, 386, 9222. (3) LIAB FOR SPLIT INTRST AGMNTS 2, 153, 558. (4) (5) (6) (6) (7) (10) (10) (11) Total. (Column (b) must equal Form 990, Part X, column (B) line 25 7, 540, 480.	•••			
(10) Total. (Column (b) must equal Form 990, Part X, column (B) line 15.)				
Total. (Column (b) must equal Form 990, Part X, column (B) line 15.)				
Part X Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. I. (a) Description of liability (b) Book value (1) Federal income taxes 5, 386, 922. (2) AGENCY ENDOWMENT AGMNTS 5, 386, 922. (3) LIAB FOR SPLIT INTRST AGMNTS 2, 153, 558. (4) (5) (6) (7) (8) (9) (10) (10) (11) (2) Total. (Column (b) must equal Form 990, Part X, column (B) line 25.) 7, 540, 480.				
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes 5, 386, 922. 5, 386, 922. (2) AGENCY ENDOWMENT AGMNTS 5, 386, 922. 2, 153, 558. (4) 2, 153, 558. (4) (5) (6) (7) (8) (9) (10) (11) Total. (Column (b) must equal Form 990, Part X, column (B) line 25.) 7, 540, 480.		Έ) line 15.)	<u></u>	•
I. (a) Description of liability (b) Book value (1) Federal income taxes	Part X Other Liabilities.			
(1) Federal income taxes (1) (2) AGENCY ENDOWMENT AGMNTS 5,386,922. (3) LIAB FOR SPLIT INTRST AGMNTS 2,153,558. (4) (2) (5) (2) (6) (2) (7) (2) (8) (2) (9) (2) (10) (11) Total. (Column (b) must equal Form 990, Part X, column (B) line 25.) 7,540,480.			Te or TH. See Form 990, Part X, line 25	
(2) AGENCY ENDOWMENT AGMNTS 5, 386, 922. (3) LIAB FOR SPLIT INTRST AGMNTS 2, 153, 558. (4) (5) (5) (6) (7) (8) (9) (10) (11) (11) Total. (Column (b) must equal Form 990, Part X, column (B) line 25.) 7, 540, 480.		ription of liability		(D) BOOK Value
(3) LIAB FOR SPLIT INTRST AGMNTS 2,153,558. (4) (5) (5) (6) (7) (7) (8) (9) (10) (11) Total. (Column (b) must equal Form 990, Part X, column (B) line 25.) 7,540,480.				5 386 922
(4) (4) (5) (7) (6) (7) (8) (7) (9) (10) (10) (11) Total. (Column (b) must equal Form 990, Part X, column (B) line 25.) 7, 540, 480.				
(5)				2,100,000.
(6) (7) (7) (8) (9) (10) (11) (11) Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)				
(8) (9) (10) (11) Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)				
(9) (10) (11) (11) Total. (Column (b) must equal Form 990, Part X, column (B) line 25.) 7,540,480.				
(10) (11) Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)► 7,540,480.				
(11) Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)				
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.). 7,540,480.				
	· · ·			
2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain				· · · · ·

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

Schedule D (Form 990) 2021 COMMUNITY FOUNDATION FOR SW WASHINGTON	91-1246	5778 Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per	er Return.	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	1	121,492,276.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments 2a 30, 512, 1	.88.	
b Donated services and use of facilities 2b		
c Recoveries of prior year grants 2c d Other (Describe in Part XIII.) SEE PART XIII 2d 55,1		
d Other (Describe in Part XIII.) SEE PART XIII 2d 55,1	14.	
e Add lines 2a through 2d	2e	30,567,302.
3 Subtract line 2e from line 1.	3	90,924,974.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b	4c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	90,924,974.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses	per Return	າ.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	-	
1 Total expenses and losses per audited financial statements	1	28,377,723.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities 2a		
b Prior year adjustments 2b		
c Other losses		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d	2e	
3 Subtract line 2e from line 1	3	28,377,723.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b	-	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	28,377,723.
Part XIII Supplemental Information.		

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

PART V, LINE 4 - INTENDED USES OF ENDOWMENT FUND

ALL ENDOWMENT FUNDS WILL BE USED TO FUND THE ORGANIZATION'S MISSION THROUGH

GRANTMAKING.

SCHEDULE D, PART XI, LINE 2D **OTHER REVENUE INCLUDED IN F/S BUT NOT INCLUDED ON FORM 990**

CHANGE	IN	CHAR	TRUSTS,	GIFT ANNUITIES	\$ 55,114.
				TOTAL	\$ 55,114.

BAA

Schedule D (Form 990) 2021

SCHEDULE I		G	rants and Ot	her Assistance	to Organization	IS.	1	OMB No. 1545-0047		
(Form 990)		Governments, and Individuals in the United States Complete if the organization answered 'Yes' on Form 990, Part IV, line 21 or 22.								
Department of the Treasury		Comple	ete if the organization	Attach to Form 99	orm 990, Part IV, line 2 0.	21 or 22.		Open to Public		
Internal Revenue Service			► Go to www.i	rs.gov/Form990 for the	latest information.			Inspection		
Name of the organization							Employer identifie			
COMMUNITY FOUN							91-12467	78		
Part I General Ir										
1 Does the organiza the selection crite	tion maintain records eria used to award tl	to substantiate the am he grants or assistant	ount of the grants or ce?	assistance, the grantees	' eligibility for the grants			X Yes No		
	°		<u> </u>	inds in the United States.			PART IV			
				and Domestic Gov more than \$5,000. I						
1 (a) Name and add or gove	ress of organization ernment	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance		
(1) SEE SCHEDULE AT	TACHED									
610 ESTHER STRE	ET_#201									
VANCOUVER, WA S	98660			24,956,529.	0.					
(2)										
(3)										
(4)										
<u>(4)</u>										
(5)										
<u>()</u>										
(6)										
<u>``</u>										
(7)										
(8)										
				in the line 1 table				303		
-	0							1		
BAA For Paperwork R	eduction Act Notice	e, see the Instruction	s for Form 990.		TEEA3901L	07/12/21	Sched	lule I (Form 990) 2021		

Schedule I (Form 990) 2021 COMMUNITY FOUNDATION FOR SW WASHINGTON Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered 'Yes' on Form 990, Part IV, line 22. Part III

can be duplicated if additional space is needed. (a) Type of grant or assistance (c) Amount of cash grant (e) Method of valuation (book, (b) Number of (d) Amount of (f) Description of noncash assistance recipients noncash assistance FMV, appraisal, other) 1 FINANCIAL SUPPORT STRUGGLING WOMEN 52 65,200 **2** FINANCIAL ASSISTANCE FOR STUDENTS 339 855,384 3 4 5 6 7

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

PART I, LINE 2 - PROCEDURES FOR MONITORING USE OF GRANTS FUNDS IN U.S.

WE GRANT PRIMARILY TO ORGANIZATIONS EXEMPT FROM INCOME TAX UNDER IRC SECTION

501(C)(3) AND ELIGIBLE TO RECEIVE CHARITABLE GRANTS. WE CONDUCT PERIODIC SITE VISITS

AND COLLECT PROGRAM INFORMATION SUCH AS BUDGETS AND REPORTS OF COMMUNITY IMPACT

RESULTING FROM GRANTS.



91-1246778

Community Foundation for Southwest Washington		1	
F.E.I.N. 91-1246778			
2021 Form 990	1		
Schedule I, Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments			
(a)	(b)	(c)	(d) (h)
Name, address, and zip	EIN	IRC Code	Cash Grant Purpose of Grant or Assistance
1st Infantry Division Foundation,PO Box 607 Ambler, PA 19002	20-1722471	501(C)(3)	10,000 Scholarships for descendants of Big Red One veterans
4shayj Foundation,84573 Anchor Way Indio, CA 92203	47-4092232	501(C)(3)	20,000 Program support
All Classical Public Media, Inc.,211 SE Caruthers Street, Suite 200 Portland, OR 97214	93-1042868	501(C)(3)	100 Unrestricted
All Classical Public Media, Inc.,211 SE Caruthers Street, Suite 200 Portland, OR 97214	93-1042868	501(C)(3)	450 Unrestricted
All Classical Public Media, Inc.,211 SE Caruthers Street, Suite 200 Portland, OR 97214	93-1042868 93-1042868	501(C)(3)	500 Unrestricted 1,000 Unrestricted
All Classical Public Media, Inc.,211 SE Caruthers Street, Suite 200 Portland, OR 97214 All Classical Public Media, Inc.,211 SE Caruthers Street, Suite 200 Portland, OR 97214	93-1042868	501(C)(3) 501(C)(3)	1,000 Unrestricted
All Classical Public Media, Inc., 211 SE Caruthers Street, Suite 200 Portland, OR 97214 All Classical Public Media, Inc., 211 SE Caruthers Street, Suite 200 Portland, OR 97214	93-1042868	501(C)(3)	2,000 All Classical FM
All Classical Public Media, Inc.,211 SE Caruthers Street, Suite 200 Portland, OR 97214	93-1042868	501(C)(3)	5,000 General Operating Support
All Classical Public Media, Inc., 211 SE Caruthers Street, Suite 200 Portland, OR 97214	93-1042868	501(C)(3)	20,000 Unrestricted
All Classical Public Media, Inc.,211 SE Caruthers Street, Suite 200 Portland, OR 97214	93-1042868	501(C)(3)	20,000 General Operating Support
Alpha Supported Living Services, 16030 Juanita-Woodinville Way NE Bothell, WA 98011-5477	91-0933802	501(C)(3)	100,000 Home Expansion
Alzheimer's Association,225 N Michigan Ave 17Th Fl Chicago, IL 60601-7652	13-3039601	501(C)(3)	5,000 Unrestricted
American Cancer Society,PO Box 22718 Oklahoma City, OK 73123	13-1788491	501(C)(3)	8,439 Great West Division
American Heart Association of Oregon & SW WA,4380 SW Macadam Avenue #480 Portland, OR 97239	13-5613797	501(C)(3)	8,439 Unrestricted
American Technion Society-Israel Institute Of Technology Inc,55 East 59th Street New York, NY 10022-1112	13-0434195	501(C)(3)	5,000 Mitchner Family Fellowship Fund
Anacortes Schools Foundation,2200 M Ave Anacortes, WA 98221-3728 Arc of Washington State,2638 State Ave NE Olympia, WA 98506-4880	91-1263495 91-0747027	501(C)(3) 501(C)(3)	5,000 Unrestricted 150,000 Realizing the promise of an Integrated Life in the Community for People Experiencing I/DD
Arc of Washington State,2538 State Ave NE Olympia, WA 98506-4880 Archdiocese of Seattle,710 9Th Ave Seattle, WA 98104-2017	91-0747027	501(C)(3) 501(C)(3)	1,000 Annual Catholic Appeal, St. James, Vancouver
Archdiocese of Seattle, 710 9Th Ave Seattle, WA 98104-2017 Archdiocese of Seattle, 710 9Th Ave Seattle, WA 98104-2017	91-1581183	501(C)(3)	30,000 Annual Catholic Appeal
Archdiocese of Seattle,710 9Th Ave Seattle, WA 98104-2017	91-1581183	501(C)(3)	50,000 unrestricted
Area Agency on Aging & Disabilities of Southwest Washington, 201 NE 73rd Street, Suite 201 Vancouver, WA 98665	80-0224907	Government	822 To assist low-income senior citizens
Area Agency on Aging & Disabilities of Southwest Washington, 201 NE 73rd Street, Suite 201 Vancouver, WA 98665	80-0224907	Government	13,262 Assistance for families caring for Alzheimer's patients at home
Assistance League of Columbia Pacific,Po Box 596 Astoria, OR 97103-0596	26-0799085	501(C)(3)	5,000 Unrestricted
Autism Empowerment,PO Box 871676 Vancouver, WA 98687	45-2455219	501(C)(3)	100 Unrestricted
Autism Empowerment,PO Box 871676 Vancouver, WA 98687	45-2455219	501(C)(3)	1,000 Unrestricted
Autism Empowerment,PO Box 871676 Vancouver, WA 98687	45-2455219	501(C)(3)	25,000 Autism Empowerment Multi-media
Babies in Need,C/O All Saints Episcopal Church PO Box 1441 Vancouver, WA 98668 Battle Ground HealthCare Clinic,1910 SW 9th Avenue Battle Ground, WA 98604	91-1049465 27-3148590	501(C)(3)	5,000 Babies in Need 21,914 Taking Back My Life
Battle Ground HealthCare Clinic, 1910 SW 9th Avenue Battle Ground, WA 98604 Battle Ground HealthCare Clinic, 1910 SW 9th Avenue Battle Ground, WA 98604	27-3148590	501(C)(3) 501(C)(3)	30,000 For COVID-19 related support
Battle Ground HealthCare Chinic, 1910 SW 9th Avenue Battle Ground, WA 98604 Battle Ground Public Schools,PO Box 200 Battle Ground, WA 98604	91-6010122	Government	99,253 Educational fields: Agriculture, Horitculture, Dairying and Domestic Science
Berkeley School of Theology, Office of Seminary Advancement 2606 Dwight Way Berkeley, CA 94704	94-1156250	501(C)(3)	7.599 Unrestricted
Best Friends Animal Society,5001 Angel Canyon Road Kanab, UT 84741	23-7147797	501(C)(3)	17,753 Unrestricted
Big Brothers Big Sisters Columbia Northwest,6443 SW Beaverton-Hillsdale Hwy Suite 200 Portland, OR 97221	93-1303640	501(C)(3)	25,000 Unrestricted
Bike Clark County,1604 Main Street Vancouver, WA 98660	45-2591977	501(C)(3)	100 Unrestricted
Bike Clark County,1604 Main Street Vancouver, WA 98660	45-2591977	501(C)(3)	250 Unrestricted
Bike Clark County,1604 Main Street Vancouver, WA 98660	45-2591977	501(C)(3)	2,500 Unrestricted
Bike Clark County,1604 Main Street Vancouver, WA 98660	45-2591977	501(C)(3)	5,000 Unrestricted
Boys & Girls Clubs of Southwest Washington,5109 NE 82nd Ave, Ste 205 Vancouver, WA 98662	91-1978646	501(C)(3)	350 Unrestricted
Boys & Girls Clubs of Southwest Washington,5109 NE 82nd Ave, Ste 205 Vancouver, WA 98662 Boys & Girls Clubs of Southwest Washington,5109 NE 82nd Ave, Ste 205 Vancouver, WA 98662	91-1978646 91-1978646	501(C)(3)	500 Unrestricted 500 Unrestricted
Boys & Girls Clubs of Southwest Washington,5109 NE 82nd Ave, Ste 205 Vancouver, WA 98662 Boys & Girls Clubs of Southwest Washington,5109 NE 82nd Ave, Ste 205 Vancouver, WA 98662	91-1978646	501(C)(3) 501(C)(3)	500 Unrestricted
Boys & Girls Clubs of Southwest Washington,5109 NE 82nd Ave, Ste 205 Vancouver, WA 98662	91-1978646	501(C)(3)	1,000 Unrestricted
Boys & Girls clubs of Southwest Washington,5109 NE 82nd Ave, Ste 205 Vancouver, WA 98662	91-1978646	501(C)(3)	2,233 Unrestricted
Boys & Girls Clubs of Southwest Washington,5109 NE 82nd Ave, Ste 205 Vancouver, WA 98662	91-1978646	501(C)(3)	4,000 Unrestricted
Boys & Girls Clubs of Southwest Washington, 5109 NE 82nd Ave, Ste 205 Vancouver, WA 98662	91-1978646	501(C)(3)	5,000 Unrestricted
Boys & Girls Clubs of Southwest Washington, 5109 NE 82nd Ave, Ste 205 Vancouver, WA 98662	91-1978646	501(C)(3)	5,000 Unrestricted
Boys & Girls Clubs of Southwest Washington,5109 NE 82nd Ave, Ste 205 Vancouver, WA 98662	91-1978646	501(C)(3)	5,000 Annual Fundraiser Gala
Boys & Girls Clubs of Southwest Washington,5109 NE 82nd Ave, Ste 205 Vancouver, WA 98662	91-1978646	501(C)(3)	25,000 Unrestricted
Boys & Girls Clubs of Southwest Washington,5109 NE 82nd Ave, Ste 205 Vancouver, WA 98662	91-1978646	501(C)(3)	31,000 Hiring and support of Director of Human Resources
Boys & Girls Clubs of Southwest Washington,5109 NE 82nd Ave, Ste 205 Vancouver, WA 98662	91-1978646	501(C)(3)	47,068 Unrestricted
Boys & Girls Clubs of Southwest Washington,5109 NE 82nd Ave, Ste 205 Vancouver, WA 98662 Boys & Girls Clubs of Southwest Washington,5109 NE 82nd Ave, Ste 205 Vancouver, WA 98662	91-1978646 91-1978646	501(C)(3) 501(C)(3)	50,000 Unrestricted 75,075 For COVID-19 related support
Boys & Girls Clubs of Southwest Washington,5109 NE 82nd Ave, Ste 205 Vancouver, WA 98662 Bridgeview Housing,505 Omaha Way Vancouver, WA 98661	91-1978646 91-1285201	501(C)(3) 501(C)(3)	150 Unrestricted
Bridgeview Housing,505 Omaha Way Vancouver, WA 98061 Bridgeview Housing,505 Omaha Way Vancouver, WA 98661	91-1285201	501(C)(3)	1,000 GiveMore24! Matching Grant
Bridgeview Housing,505 Omaha Way Vancouver, WA 98661	91-1285201	501(C)(3)	20,020 Unrestricted
BrightSide Animal Center,PO Box 1404 Redmond, OR 97756	93-0976110	501(C)(3)	10,000 Designated for Dog Trainer
Camas Church of the Nazarene, 2204 NE Birch Street Camas, WA 98607	91-6033854	501(C)(3)	7,381 Unrestricted
Camas Church of the Nazarene, 2204 NE Birch Street Camas, WA 98607	91-6033854	501(C)(3)	7,552 American Boy Scout Troop 562
Camas Parks and Recreation, 227 Lake Road Camas, WA 98607		Government	12,892 Skatepark Upgrades
Camas School District #117,841 NE 22nd Avenue Camas, WA 98607	91-6001767	Government	600 Designated for Jack, Will and Rob Awards; see letter
Camas School District #117,841 NE 22nd Avenue Camas, WA 98607	91-6001767	Government	2,984 Jack, Will, and Rob Kids Center, Camas, WA
Camas School District #117,841 NE 22nd Avenue Camas, WA 98607	91-6001767	Government	16,961 Jack, Will, and Rob Kids Center, Camas, WA
Camas School District #117,841 NE 22nd Avenue Camas, WA 98607	91-6001767	Government	16,961 Jack, Will, and Rob Kids Center, Camas, WA
Camas School District #117,841 NE 22nd Avenue Camas, WA 98607 Camas School District #117,841 NE 22nd Avenue Camas, WA 98607	91-6001767 91-6001767	Government Government	16,961 Jack, Will, and Rob Kids Center, Camas, WA 16,961 Jack, Will, and Rob Kids Center, Camas, WA
Camas School District #117,841 NE 22nd Avenue Camas, WA 98607 Camas-Washougal Historical Society,PO Box 204 Washougal, WA 98671	91-6001767	Government 501(C)(3)	16,961 Jack, Will, and Rob Kids Center, Camas, WA 7.935 Unrestricted
Lamas-washougai historicai society,PO BOX 204. Washougal, WA 30071	121-1101203	1201(0)(2)	

Camas-Washougal Historical Society, PO Box 204 Washougal, WA 98671	91-1181503	501(C)(3)	9 / 99	Designated for Two Rivers Heritage Museum
Camp Arrah Wanna,24075 E Arrah Wanna Blvd Welches, OR 97067	26-3098394	501(C)(3)		Unrestricted
Cascade AIDS Project,520 Northwest Davis Street Suite 215 Portland, OR 97209	93-0903383	501(C)(3)		Women of Wisdom Peer Support Group - SW Washington
Cascade AIDS Project,520 Northwest Davis Street Suite 215 Portland, OR 97209	93-0903383	501(C)(3)		Cascade AIDS Project SW Washington: Housing & Employment Services
Cascades Presbyterian Church of Vancouver,9503 NE 86th Street Vancouver, WA 98662	91-1041851	501(C)(3)		For building fund only
Cascades Presbyterian Church of Vancouver,9503 NE 86th Street Vancouver, WA 98662	91-1041851	501(C)(3)	4,363	For Building Fund Only
Cascadia Cares,2717 Terry Ave. Longview, WA 98632	81-1242115	501(C)(3)	5,000	Belly Brigade: For COVID-19 related support
Cascadia Technical Academy Foundation,12200 NE 28th Street Vancouver, WA 98682	91-1530644	501(C)(3)	1,000	Unrestricted
Cascadia Technical Academy Foundation,12200 NE 28th Street Vancouver, WA 98682	91-1530644	501(C)(3)		Unrestricted
CDM Caregiving Services,2300 NE Andresen Rd. Vancouver, WA 98661	91-1057994	501(C)(3)		Unrestricted
CDM Caregiving Services,2300 NE Andresen Rd. Vancouver, WA 98661	91-1057994	501(C)(3)		Unrestricted
CDM Caregiving Services,2300 NE Andresen Rd. Vancouver, WA 98661	91-1057994	501(C)(3)		Unrestricted
CDM Caregiving Services,2300 NE Andresen Rd. Vancouver, WA 98661	91-1057994	501(C)(3)		Unrestricted
CDM Caregiving Services,2300 NE Andresen Rd. Vancouver, WA 98661	91-1057994	501(C)(3)		To support enrichment activities for individuals with developmental disabilities
Children of Promise,PO Box 2316 Anderson, IN 46018-2316 Children of Promise,PO Box 2316 Anderson, IN 46018-2316	36-4490602 36-4490602	501(C)(3) 501(C)(3)		Unrestricted Unrestricted
Children of Promise,PO Box 2316 Anderson, IN 46018-2316 Children of Promise,PO Box 2316 Anderson, IN 46018-2316	36-4490602	501(C)(3)		Unrestricted
Children of Promise,PO Box 2316 Anderson, IN 46018-2316	36-4490602	501(C)(3)		Unrestricted
Children of Promise, PO Box 2316 Anderson, IN 46018-2316	36-4490602	501(C)(3)		Unrestricted
Children of Promise, PO Box 2316 Anderson, IN 46018-2316	36-4490602	501(C)(3)		Unrestricted
Children's Center,13500 SE 7th Street Vancouver, WA 98683	91-1459420	501(C)(3)		Unrestricted
Children's Center, 13500 SE 7th Street Vancouver, WA 98683	91-1459420	501(C)(3)		Unrestricted
Children's Center,13500 SE 7th Street Vancouver, WA 98683	91-1459420	501(C)(3)		Unrestricted
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Children's Center, 13500 SE 7th Street Vancouver, WA 98683	91-1459420	501(C)(3)	5,000	Unrestricted
Children's Center,13500 SE 7th Street Vancouver, WA 98683	91-1459420	501(C)(3)		Unrestricted
Children's Center,13500 SE 7th Street Vancouver, WA 98683	91-1459420	501(C)(3)		Advancement of social justice in southwest Washington
Children's Discovery Museum,PO Box 1481 Longview, WA 98632	81-2875557	501(C)(3)		For the Fun/Safe and Interactive "New" Learning Environment
Children's Home Society of Washington,PO Box 605 Vancouver, WA 98666	91-0575955	501(C)(3)		For COVID-19 related support in Southwest Washington
Children's Justice and Advocacy Center,784 14th Avenue Longview, WA 98632	45-4946456	501(C)(3)		Unrestricted
Children's Justice and Advocacy Center,784 14th Avenue Longview, WA 98632	45-4946456	501(C)(3)		For COVID-19 related support
City of Longview, P.O. Box 128 Longview, WA 98632	91-6001367	Government		Neighborhood Park Grant (NPG) - Mint Valley Racquet Capital Improvements
Clark College Foundation, 1933 Fort Vancouver Way Vancouver, WA 98663-3598	23-7315006	501(C)(3)		Page-Jaeger Scholarships
Clark College Foundation, 1933 Fort Vancouver Way Vancouver, WA 98663-3598	23-7315006 23-7315006	501(C)(3)		Page-Jaeger Scholarships
Clark College Foundation, 1933 Fort Vancouver Way Vancouver, WA 98663-3598	23-7315006	501(C)(3)		Page-Jaeger Scholarships
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Clark College Foundation,1933 Fort Vancouver Way Vancouver, WA 98663-3598	23-7315006	501(C)(3)		Page-Jaeger Scholarships
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Clark College Foundation, 1933 Fort Vancouver Way Vancouver, WA 98663-3598	23-7315006	501(C)(3)	1,000	Ed Lynch Engineering Scholarship
Clark College Foundation,1933 Fort Vancouver Way Vancouver, WA 98663-3598	23-7315006	501(C)(3)		Unrestricted
Clark College Foundation,1933 Fort Vancouver Way Vancouver, WA 98663-3598	23-7315006	501(C)(3)		Unrestricted
Clark College Foundation,1933 Fort Vancouver Way Vancouver, WA 98663-3598	23-7315006	501(C)(3)		Unrestricted
Clark College Foundation,1933 Fort Vancouver Way Vancouver, WA 98663-3598	23-7315006	501(C)(3)		Two \$1,500 scholarships for women concentrating on STEM subjects
Clark College Foundation, 1933 Fort Vancouver Way Vancouver, WA 98663-3598	23-7315006	501(C)(3)		Female students at Clark College with financial need
Clark College Foundation, 1933 Fort Vancouver Way Vancouver, WA 98663-3598	23-7315006 23-7315006	501(C)(3)		Unrestricted
Clark College Foundation,1933 Fort Vancouver Way Vancouver, WA 98663-3598 Clark College Foundation,1933 Fort Vancouver Way Vancouver, WA 98663-3598	23-7315006	501(C)(3) 501(C)(3)		Ann Doyle Endowment at Clark College Jack and Nancy Barry Endowment at Clark College
Clark College Foundation, 1933 Fort Vancouver way Vancouver, WA 98663-3598 Clark College Foundation, 1933 Fort Vancouver Way Vancouver, WA 98663-3598	23-7315006	501(C)(3) 501(C)(3)		Frances Tribe Memorial Nursing Scholarship
Clark College Foundation,1933 Fort Vancouver Way Vancouver, WA 98063-3598	23-7315000	501(C)(3)		Jim and Paula Palmer Scholarship
Clark College Foundation,1933 Fort Vancouver Way Vancouver, WA 98063-3598	23-7315000	501(C)(3)		Veterans' Resource Center; Guided Pathways Program; direct student support
Clark County Executive Horse Council, 7720 NE Highway 99, Suite D #325 Vancouver, WA 98665	91-1238192	501(C)(3)		Unrestricted
Clark County Food Bank,6502 NE 47th Avenue Vancouver, WA 98661	91-1307564	501(C)(3)		Unrestricted
Clark County Food Bank,6502 NE 47th Avenue Vancouver, WA 98661	91-1307564	501(C)(3)		Unrestricted
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Columbia River Mental Health Services,6926 NE Fourth Plain Blvd Vancouver, WA 98661-725491-0609138501(C(3)25,000Great Life MentoringColumbia River Keeper,407 Portway Ave Suite 301 Hood River, OR 9703191-1583492501(C(3)40,000Comunidades: Amplifying Voices for Environmental and Social JusticeColumbia Theatre Association for the Performi,PO Box 1026 Longview, WA 9863291-1186556501(C(3)10,000UnrestrictedColumbia Theatre Association for the Performi,PO Box 1026 Longview, WA 9863291-1186556501(C(3)10,000UnrestrictedCommunity Foundation For Monterey County,2354 Garden Rd Monterey, CA 93940-532694-1615897501(C(3)25,000CoVID 91 Community Outreach Health Clinic ProgramsCommunity Health Partners,PO Box 2853 Longview, WA 9863291-2016542501(C(3)25,000CoVID 91 Community Outreach Health Clinic ProgramsCommunity Health Partners,PO Box 2853 Longview, WA 9863291-2016542501(C(3)25,000CoVID 91 Community Outreach Health Clinic ProgramsCommunity Health Partners,PO Box 2853 Longview, WA 9863291-2016542501(C(3)25,000CoVID 91 Community Or Adults Experiencing I/DDCommunity Health Partners,PO Box 2853 Longview, WA 9863291-2016542501(C(3)10,000UnrestrictedCommunity Homes Inc.,Po Box 1240 Bothell, WA 98041-124091-148016091-148016010,000UnrestrictedCommunity Vision,2475 SE Ladd, Suite 240 Portland, OR 9721420-128169501(C(3)10,000UnrestrictedConfluence Project,1109 E 5th Street Vancouver, WA 9866175-300826501(C(3)8,1			501(C)(3)	
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Congregation Kol Ami,7800 NE 119th Street Vancouver, WA 98662-1104 91-1487789 501(C)(3) 12,000 Capital Campaign				
Council for the Homeless,2500 Main Street Vancouver, WA 98660 91-2001828 501(C)(3) 100 Unrestricted				
Council for the Homeless,2500 Main Street Vancouver, WA 98660 91-2001828 501(C)(3) 100 Unrestricted				
Council for the Homeless,2500 Main Street Vancouver, WA 98660 91-2001828 501(C)(3) 100 Unrestricted				
Council for the Homeless,2500 Main Street Vancouver, WA 98660 91-2001828 501(C)(3) 100 Unrestricted	Council for the Homeless,2500 Main Street Vancouver, WA 98660	91-2001828	501(C)(3)	100 Unrestricted

Council for the Homeless,2500 Main Street Vancouver, WA 98660	91-2001828	501(C)(3)	100 Unrestricted
Council for the Homeless,2500 Main Street Vancouver, WA 98660	91-2001828	501(C)(3)	500 Unrestricted
Council for the Homeless,2500 Main Street Vancouver, WA 98660	91-2001828	501(C)(3)	1,000 Unrestricted
Council for the Homeless,2500 Main Street Vancouver, WA 98660	91-2001828	501(C)(3)	1,500 Unrestricted
Council for the Homeless,2500 Main Street Vancouver, WA 98660	91-2001828	501(C)(3)	2,131 Unrestricted
Council for the Homeless,2500 Main Street Vancouver, WA 98660	91-2001828	501(C)(3)	2,500 Housing Relief Fund
Council for the Homeless,2500 Main Street Vancouver, WA 98660	91-2001828	501(C)(3)	5,000 Unrestricted
Council for the Homeless,2500 Main Street Vancouver, WA 98660	91-2001828	501(C)(3)	5,000 Unrestricted
Council for the Homeless,2500 Main Street Vancouver, WA 98660	91-2001828	501(C)(3)	5,681 Unrestricted
Council for the Homeless,2500 Main Street Vancouver, WA 98660	91-2001828	501(C)(3)	15,000 Unrestricted
Council for the Homeless,2500 Main Street Vancouver, WA 98660	91-2001828	501(C)(3)	25,000 Family Assistance Community Engagement (FACE) Program
Council for the Homeless,2500 Main Street Vancouver, WA 98660	91-2001828	501(C)(3)	50,000 Housing Initiative LLC operating support
Council for the Homeless,2500 Main Street Vancouver, WA 98660	91-2001828	501(C)(3)	75,000 \$25,000 annual fundraiser; \$50,000 Rapid Response Project
Cowlitz County Child Advocates,1024 Broadway Street Longview, WA 98632	91-1644688	501(C)(3)	1,000 Unrestricted
Cowlitz County Child Advocates, 1024 Broadway Street Longview, WA 98632	91-1644688	501(C)(3)	2,500 Unrestricted
Cowlitz County Child Advocates, 1024 Broadway Street Longview, WA 98632	91-1644688	501(C)(3)	5,000 Unrestricted
Cowlitz County Historical Society,405 Allen Street Kelso, WA 98626	23-7049683	501(C)(3)	5,000 Unrestricted
Cowlitz Economic Development Council,PO Box 1278 Longview, WA 98632	91-1154753	501(C)(4)	25,000 Flexible supports to small business owners
Cowlitz Economic Development Council, PO Box 1278 Longview, WA 98632	91-1154753	501(C)(4)	225,000 For COVID-19 related support
Cowlitz Indian Tribe - Healing of the Canoe Program, Accounting Department PO Box 2006 Longview, WA 98632	60-7700478	Government	30,000 For COVID-19 related support
Cowlitz Indian Tribe - Healing of the Canoe Program, Accounting Department PO Box 2006 Longview, WA 98632	60-7700478	Government	50,000 For COVID-19 related support
Cowlitz Indian Tribe, Garden Program 1055 9th Avenue Longview, WA 98632	60-7700478	Government	100,000 Emergency assistance for individuals
Cowlitz Wahkiakum Legal Aid,1338 Commerce Avenue, Suite C Longview, WA 98632	91-1945347	501(C)(3)	50,000 For COVID-19 related support
Cowlitz Wahkiakum Legal Aid, 1338 Commerce Avenue, Suite C Longview, WA 98632	91-1945347	501(C)(3)	52,000 Southwest Washington Tribal Legal Clinic, in partnership with the Cowlitz Indian Tribe
Craft3,54 SW Yamhill Street Portland, OR 97204	91-1662698	501(C)(3)	125,000 For COVID-19 related support in Southwest Washington
CultureSeed,37 Nestor Peak Road White Salmon, WA 98672	20-3027110	501(C)(3)	32,000 Skamania's Outdoor Immersion and Youth Cohort & Outdoor Mentorship
CYO Camp Howard, Attn: Development 825 NE 20th Ave, Suite 120 Portland, OR 97232	93-0386803	501(C)(3)	10,000 Capital Campaign Phase 2
Daybreak Youth Services,11910 NE 154th Street Brush Prairie, WA 98606	91-1083936	501(C)(3)	100 Unrestricted
Daybreak Youth Services,11910 NE 154th Street Brush Prairie, WA 98606	91-1083936	501(C)(3)	15,000 Unrestricted
Daybreak Youth Services, 11910 NE 154th Steete Brush Prairie, WA 50506	91-1083936	501(C)(3)	20,000 Enrichment Programming
Daybreak Youth Services,11910 NE 154th Street Brush Prairie, WA 98000	91-1083936	501(C)(3)	50,000 Unrestricted
Davbreak Youth Services,11910 NE 154th Street Brush Prairie, WA 98000	91-1083936	501(C)(3)	75.000 Unrestricted
Daybreak Youth Services,11910 NE 154th Street Brush Prairie, WA 98606	91-1083936	501(C)(3)	250,000 Unrestricted
Disability Rights Washington, 315 5th Ave S Ste 850 Seattle, WA 98104-2691	91-1085956	501(C)(3)	150,000 Realizing the Promise of an Integrated Life in the Community for People Experiencing I/DD
Disability Rights Washington, 315 5th Ave 5 Ste 850 Seattle, WA 98104-2691 Disabled American Veterans Charitable Service Trust,860 Dolwick Drive Erlanger, KY 41018	52-1521276		5,000 Unrestricted
		501(C)(3)	
Doctors Without Borders - Medecins Sans Frontieres, PO Box 5030 Attn: Planned Giving Hagerstown, MD 21741-5030	13-3433452	501(C)(3)	2,500 Unrestricted
Doctors Without Borders - Medecins Sans Frontieres, PO Box 5030 Attn: Planned Giving Hagerstown, MD 21741-5030	13-3433452	501(C)(3)	3,000 Unrestricted
Doernbecher Children's Hospital Foundation,1121 SW Salmon Street, Suite 100 Portland, OR 97205	93-0579589	501(C)(3)	5,000 Unrestricted
DoveLewis Emergency Animal Hospital, Inc., 1945 NW Pettygrove St. Portland, OR 97209	93-0621534	501(C)(3)	7,534 Velvet Assistance Fund - Feline Care
DoveLewis Emergency Animal Hospital, Inc., 1945 NW Pettygrove St. Portland, OR 97209	93-0621534	501(C)(3)	15,000 Velvet Assistance Fund
Dylan Jude Harrell DIPG Foundation,Po Box 1635 Long Beach, WA 98631-1635	84-3575791	501(C)(3)	1,000 Dylan Jude Harrell Community Center
Dylan Jude Harrell DIPG Foundation, Po Box 1635 Long Beach, WA 98631-1635	84-3575791	501(C)(3)	4,000 Dylan Jude Harrell Community Center
Easterseals Washington, Attn: Philanthropy Department 200 W. Mercer Street, Suite 210E Seattle, WA 98119	91-0575956	501(C)(3)	5,000 Unrestricted
Educational Opportunities for Children and Fa,17800 SE Mill Plain Boulevard, Suite 150 Vancouver, WA 98683	91-0820018	501(C)(3)	25,000 For COVID-19 related support
Edwards Center Inc.,PO BOX 6269 Aloha, OR 97007-0269	93-0630002	501(C)(3)	300,000 Edwards Center Expansion
Emergency Support Shelter,1330 11th Avenue Longview, WA 98632	91-1074716	501(C)(3)	100 Unrestricted
Emergency Support Shelter,1330 11th Avenue Longview, WA 98632	91-1074716	501(C)(3)	2,500 Unrestricted
Emergency Support Shelter,1330 11th Avenue Longview, WA 98632	91-1074716	501(C)(3)	5,000 Unrestricted
Emergency Support Shelter,1330 11th Avenue Longview, WA 98632	91-1074716	501(C)(3)	6,000 For scholarships for female survivors of domestic violence
Emergency Support Shelter,1330 11th Avenue Longview, WA 98632	91-1074716	501(C)(3)	10,000 Unrestricted
Emergency Support Shelter, 1330 11th Avenue Longview, WA 98632	91-1074716	501(C)(3)	15,000 Scholarships for women survivors of domestic violence
Emergency Support Shelter, 1330 11th Avenue Longview, WA 98632	91-1074716	501(C)(3)	20,000 Unrestricted
Emergency Support Shelter, 1330 11th Avenue Longview, WA 98632	91-1074716	501(C)(3)	20,000 For COVID-19 related support
Emergency Support Shelter, 1330 11th Avenue Longview, WA 98632	91-1074716	501(C)(3)	20,000 For scholarships for women survivors of domestic violence
Environmental Defense Fund,257 Park Avenue South New York, NY 10010-7304	11-6107128	501(C)(3)	6,000 Unrestricted
Episcopal Church of the Holy Spirit, PO Box 1117 Battle Ground, WA 98604	91-0200430	501(C)(3)	500 Fort Vancouver Seafarer's Center
Episcopal Church of the Holy Spirit, PO Box 1117 Battle Ground, WA 98604	91-0200430	501(C)(3)	500 Fort Vancouver Seafarer's Center
Episcopal Church of the Holy Spirit, PO Box 1117 Battle Ground, WA 98604	91-0200430	501(C)(3)	500 Fort Vancouver Seafarer's Center
Episcopal Church of the Holy Spirit, PO Box 1117 Battle Ground, WA 98604	91-0200430	501(C)(3)	4,000 Fort Vancouver Seafarer's Center
Episcopal Church of the Holy Spirit, PO Box 1117 Battle Ground, WA 98604	91-0200430	501(C)(3)	4,000 Fort Vancouver Seafarer's Center
Episcopal Church of the Holy Spirit, PO Box 1117 Battle Ground, WA 98604	91-0200430	501(C)(3)	4,000 Fort Vancouver Seafarer's Center
Episcopal Church of the Holy Spirit, PO Box 1117 Battle Ground, WA 98004	91-0200430	501(C)(3)	6,250 Fort Vancouver Seafarer's Center
Ethic Support Council,309 Oak Street Kelso, WA 98626	91-1591153	501(C)(3)	1,500 Unrestricted
Ethnic Support Council,309 Oak Street Kelso, WA 98626	91-1591155	501(C)(3)	20,000 For renovation and move in costs for a new office space
	91-1591153 91-1591153		50,000 For COVID-19 related support
Ethnic Support Council,309 Oak Street Kelso, WA 98626		501(C)(3)	
Evergreen Habitat for Humanity,PO Box 871570 Vancouver, WA 98687	91-1557462	501(C)(3)	500 Unrestricted
Evergreen Habitat for Humanity,PO Box 871570 Vancouver, WA 98687	91-1557462	501(C)(3)	500 Unrestricted
Evergreen Habitat for Humanity,PO Box 871570 Vancouver, WA 98687	91-1557462	501(C)(3)	1,500 Unrestricted
Evergreen Habitat for Humanity,PO Box 871570 Vancouver, WA 98687	91-1557462	501(C)(3)	3,415 Unrestricted
Evergreen Habitat for Humanity,PO Box 871570 Vancouver, WA 98687	91-1557462	501(C)(3)	8,439 Unrestricted
Evergreen Habitat for Humanity,PO Box 871570 Vancouver, WA 98687	91-1557462	501(C)(3)	75,000 Sponsorship of house at Johnson Village
Evergreen State College, Financial Aid Office 2700 Evergreen Pkwy NW Olympia, WA 98505	91-0826533	Government	7,600 Unrestricted
Family Promise of Cowlitz County, Po Box 1152 Kelso, WA 98626-0119		501(C)(3)	5,000 Unrestricted

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Farmers Ending Hunger, PO Box 7361 Salem, OR 97303	80-0505305	501(C)(3)		Unrestricted
Fellowship for Performing Arts,630 9Th Ave Ste 1409 New York, NY 10036-3741	52-1739276	501(C)(3)		Unrestricted
Fellowship for Performing Arts,630 9Th Ave Ste 1409 New York, NY 10036-3741	52-1739276 91-6002006	501(C)(3)		Unrestricted
First Christian Church,2000 E Kessler Boulevard Longview, WA 98632 First Presbyterian Church,4300 Main Street Vancouver, WA 98663	91-6002006	501(C)(3) 501(C)(3)		Unrestricted Unrestricted
First Presbyterian Church,4300 Main Street Vancouver, WA 98663	-	501(C)(3)		ADA Compliancy - building entrance doors
First United Methodist Church,401 E 33rd Street Vancouver, WA 98663-2297	91-0593487	501(C)(3)		Unrestricted
FISE Onited Methodist Charter, 401 E SSId Street Valicouver, WA 98605-2297	23-7452250	501(C)(3)		Unrestricted
FISH of County, PO Box 153 Congview, WA 98660 FISH of Vancouver, PO Box 585 Vancouver, WA 98660	91-1166344	501(C)(3)		Unrestricted
FISH of Vancouver,PO Box 555 Vancouver, WA 98660	91-1166344	501(C)(3)		
FISH of Vancouver,PO Box 585 Vancouver, WA 98660	91-1166344	501(C)(3) 501(C)(3)	10,000	
FISH of Vancouver,PO Box 555 Vancouver, WA 98660 FISH of Vancouver,PO Box 585 Vancouver, WA 98660	91-1166344	501(C)(3)		Unrestricted
FISH of Vancouver,PO Box 555 Vancouver, WA 98660 FISH of Vancouver,PO Box 585 Vancouver, WA 98660	91-1166344	501(C)(3)		Unrestricted
Food Bank of Northern Nevada,550 Italy Drive Sparks, NV 89434	94-2924979	501(C)(3) 501(C)(3)		Spring Mobile Harvest Campaign, to fund matching campaign
Food Lifeline,815 S 96th Street Seattle, WA 98108	91-1090450			
Food Lifeline, 815 S 96th Street Seattle, WA 98108 Fort Vancouver Regional Library Foundation, PO Box 2384 Vancouver, WA 98668	91-1090450	501(C)(3) 501(C)(3)		For COVID-19 related support in Southwest Washington Unrestricted
Fort Vancouver Regional Library Foundation,PO Box 2384 Vancouver, WA 98668	91-1456753	501(C)(3)		Unrestricted
Fort Vancouver Regional Library Foundation,PO Box 2364 Vancouver, WA 98668	91-1456753	501(C)(3)		Woodland Library building project
Fort Vancouver Regional Library Foundation, PO Box 2384 Vancouver, WA 98668				
	91-1456753	501(C)(3)		Ridgefield Community Library "Technology Area"
Fort Vancouver Regional Library Foundation, PO Box 2384 Vancouver, WA 98668	91-1456753	501(C)(3)		Ridgefield Community Library building
Fosterful,101 E. 8th Street, Suite 270 Vancouver, WA 98660	32-0476680	501(C)(3)		Unrestricted
Fosterful,101 E. 8th Street, Suite 270 Vancouver, WA 98660	32-0476680	501(C)(3)		Unrestricted
Fosterful,101 E. 8th Street, Suite 270 Vancouver, WA 98660	32-0476680	501(C)(3)		Unrestricted
Fosterful,101 E. 8th Street, Suite 270 Vancouver, WA 98660	32-0476680	501(C)(3)		Organizational Equity and Inclusion Initiatives and Support for Children Entering Foster Care in SW Washington
Foundation for the Challenged dba Options for Supported Housing,5970 Wilcox PI Ste D Dublin, OH 43016-6808	01-0619670	501(C)(3)		FCC Homes Expansion
Foundation for Vancouver Public Schools,PO Box 6039 Vancouver, WA 98668	91-0971800	501(C)(3)		Unrestricted
Foundation for Vancouver Public Schools,PO Box 6039 Vancouver, WA 98668	91-0971800	501(C)(3)		Unrestricted
Foundation for Vancouver Public Schools,PO Box 6039 Vancouver, WA 98668	91-0971800	501(C)(3)		Unrestricted
Foundation for Vancouver Public Schools,PO Box 6039 Vancouver, WA 98668	91-0971800	501(C)(3)		Unrestricted
Foundation for Vancouver Public Schools,PO Box 6039 Vancouver, WA 98668	91-0971800	501(C)(3)		Administrative Fund
Foundation for Vancouver Public Schools,PO Box 6039 Vancouver, WA 98668	91-0971800	501(C)(3)		Unrestricted
Foundation for Vancouver Public Schools,PO Box 6039 Vancouver, WA 98668	91-0971800	501(C)(3)		Disadvantaged schools - family community resource coordinator program
Foundation for Vancouver Public Schools,PO Box 6039 Vancouver, WA 98668	91-0971800	501(C)(3)		Special Education Classes
Foundation for Vancouver Public Schools,PO Box 6039 Vancouver, WA 98668	91-0971800	501(C)(3)		Unrestricted
Foundation for Vancouver Public Schools,PO Box 6039 Vancouver, WA 98668	91-0971800	501(C)(3)		
Foundation for Vancouver Public Schools,PO Box 6039 Vancouver, WA 98668	91-0971800	501(C)(3)		Professional Development Workshops for IB Program teachers at Columbia River High School
Foundation for Vancouver Public Schools,PO Box 6039 Vancouver, WA 98668	91-0971800	501(C)(3)		Vancouver School of Arts & Academics (VSAA) Vancouver Art Coalition Project
Foundation for Vancouver Public Schools,PO Box 6039 Vancouver, WA 98668	91-0971800	501(C)(3)		Inspiring Influencers to Lead with Racial Equity
Foundation for Vancouver Public Schools,PO Box 6039 Vancouver, WA 98668	91-0971800	501(C)(3)		Designated for VSAA Vancouver Art Coalition Project
Foundation for Vancouver Public Schools,PO Box 6039 Vancouver, WA 98668	91-0971800	501(C)(3)		Unrestricted
Fourth Plain Forward,5107 E Fourth Plain Blvd, Suite 111 Vancouver, WA 98661	82-2923189	501(C)(3)		Unrestricted
Fourth Plain Forward, 5107 E Fourth Plain Blvd, Suite 111 Vancouver, WA 98661	82-2923189	501(C)(3)	.,	Unrestricted
Fourth Plain Forward,5107 E Fourth Plain Blvd, Suite 111 Vancouver, WA 98661	82-2923189	501(C)(3)		Multi-year capacity building proposal
Fourth Plain Forward,5107 E Fourth Plain Blvd, Suite 111 Vancouver, WA 98661	82-2923189	501(C)(3)		For COVID-19 related support
Fred Hutchinson Cancer Research Center, Philanthropy, Mail Stop J5-200 PO Box 19024 Seattle, WA 98109	23-7156071	501(C)(3)		Unrestricted
Fred Hutchinson Cancer Research Center, Philanthropy, Mail Stop J5-200 PO Box 19024 Seattle, WA 98109	23-7156071	501(C)(3)		Detecting & subtyping lung cancer through analysis of gene expression from circulating tumor DNA
Free Clinic of Southwest Washington,4100 Plomondon Street Vancouver, WA 98661	91-1707542	501(C)(3)		Unrestricted
Free Clinic of Southwest Washington,4100 Plomondon Street Vancouver, WA 98661	91-1707542	501(C)(3)		Unrestricted
Free Clinic of Southwest Washington,4100 Plomondon Street Vancouver, WA 98661	91-1707542	501(C)(3)		Unrestricted
Free Clinic of Southwest Washington,4100 Plomondon Street Vancouver, WA 98661	91-1707542	501(C)(3)		Unrestricted
Free Clinic of Southwest Washington,4100 Plomondon Street Vancouver, WA 98661	91-1707542	501(C)(3)		Unrestricted
Free Clinic of Southwest Washington,4100 Plomondon Street Vancouver, WA 98661	91-1707542	501(C)(3)		Unrestricted
Free Clinic of Southwest Washington,4100 Plomondon Street Vancouver, WA 98661	91-1707542	501(C)(3)		Unrestricted
Free Clinic of Southwest Washington,4100 Plomondon Street Vancouver, WA 98661	91-1707542	501(C)(3)		Patient Care
Free Clinic of Southwest Washington,4100 Plomondon Street Vancouver, WA 98661	91-1707542	501(C)(3)		Unrestricted
Free Clinic of Southwest Washington,4100 Plomondon Street Vancouver, WA 98661	91-1707542	501(C)(3)		Project Access
Freedom Foundation,PO Box 552 Olympia, WA 98507	94-3136961	501(C)(3)		Litigation
Freedom Foundation,PO Box 552 Olympia, WA 98507	94-3136961	501(C)(3)		Unrestricted
Friends of Hospice Southwest Washington, PO Box 3116 Vancouver, WA 98668	20-4672767	501(C)(3)		Unrestricted
Friends of Hospice Southwest Washington,PO Box 3116 Vancouver, WA 98668	20-4672767	501(C)(3)		Unrestricted
Friends of Hospice Southwest Washington, PO Box 3116 Vancouver, WA 98668	20-4672767	501(C)(3)		Unrestricted
Friends of the Carpenter,PO Box 61654 Vancouver, WA 98666	91-1932953	501(C)(3)		Unrestricted
Friends of the Carpenter,PO Box 61654 Vancouver, WA 98666	91-1932953	501(C)(3)		Unrestricted
Friends of the Children-SW Washington,PO Box 61882 Vancouver, WA 98666	93-1098105	501(C)(3)		Unrestricted
Friends of the Children-SW Washington,PO Box 61882 Vancouver, WA 98666	93-1098105	501(C)(3)		Unrestricted
Friends of the Children-SW Washington,PO Box 61882 Vancouver, WA 98666	93-1098105	501(C)(3)		Unrestricted
Friends of the Children-SW Washington,PO Box 61882 Vancouver, WA 98666	93-1098105	501(C)(3)		Unrestricted
Friends of the Children-SW Washington,PO Box 61882 Vancouver, WA 98666	93-1098105	501(C)(3)		Unrestricted
Friends of the Children-SW Washington,PO Box 61882 Vancouver, WA 98666	93-1098105	501(C)(3)		Unrestricted
Friends of the Children-SW Washington,PO Box 61882 Vancouver, WA 98666	93-1098105	501(C)(3)	5,000	Clark County Expansion
				Extends Table Elleks succes
Friends of the Children-SW Washington,PO Box 61882 Vancouver, WA 98666	93-1098105	501(C)(3)	5,000	Friends Take Flight event
Friends of the Children-SW Washington,PO Box 61882 Vancouver, WA 98666 Friends of the Children-SW Washington,PO Box 61882 Vancouver, WA 98666	93-1098105 93-1098105	501(C)(3) 501(C)(3)		Unrestricted

Friends of the Children-SW Washington, PO Box 61882 Vancouver, WA 98666	93-1098105	501(C)(3)	20,000 Clark County Program
Friends of the Children-SW Washington,PO Box 01882 Vancouver, WA 98666	93-1098105	501(C)(3)	25,000 Eliminating Generational Poverty: A 2Gen Professional Mentoring Model
Friends of the Children-SW Washington, PO Box 61882 Vancouver, WA 98666	93-1098105	501(C)(3)	30,000 Unrestricted
Friends of the Columbia Gorge,123 NE 3rd Ave Suite 108 Portland, OR 97232	93-0782467	501(C)(3)	1,000 Unrestricted
Friends of the Columbia Gorge,123 NE 3rd Ave Suite 108 Portland, OR 97232	93-0782467	501(C)(3)	2,000 Unrestricted
Friends of the Columbia Gorge,123 NE 3rd Ave Suite 108 Portland, OR 97232	93-0782467	501(C)(3)	7,935 Unrestricted
Friends of the Ridgefield National Wildlife Refuge, PO Box 1022 Ridgefield, WA 98642	91-2018749	501(C)(3)	500 Unrestricted
Friends of the Ridgefield National Wildlife Refuge, PO Box 1022 Ridgefield, WA 98642	91-2018749	501(C)(3)	6,055 Plankhouse maintenance
Furry Friends,6715 NE 63rd Street, Suite 450 Vancouver, WA 98661	91-2002817	501(C)(3)	26,880 Unrestricted
George Fox University, Financial Aid Office 414 North Meridian Street #6068 Newberg, OR 97132	93-0386839	501(C)(3)	7,381 Unrestricted
Georgian Court University,Office of Institutional Advancement 900 Lakewood Ave Lakewood, NJ 08701-2600	21-0634981	501(C)(3)	5,000 Unrestricted/Lions Fund
Girls Inc. of the Pacific Northwest, 4800 S Macadam Avenue, Suite 309 Portland, OR 97239	54-2073930	501(C)(3)	25,000 Girls Groups
Goodwill Work Opportunity Center of Cowlitz County,714 S 27th Street Tacoma, WA 98409	91-0573106	501(C)(3)	25,000 Operating Support for Youth & Adult Job Seekers in Cowlitz County
Gordon House Conservancy, PO Box 1207 Silverton, OR 97381-0056	93-1310134	501(C)(3)	11,000 Unrestricted
Grace Foursquare Church,717 SE Everett Rd. Camas, WA 98607	91-1397528	501(C)(3)	2,000 Unrestricted
Grace Foursquare Church,717 SE Everett Rd. Camas, WA 98607	91-1397528	501(C)(3)	7,381 Unrestricted
Grace Institute,1535 Ne 17Th Ave Portland, OR 97232-1417	20-0529892	501(C)(3)	50,000 Community Arts Building Pre-Development
Guide Dogs For The Blind, 350 Los Ranchitos Road San Rafael, CA 94903	94-1196195	501(C)(3)	5,000 Unrestricted
Guide Dogs of the Desert,PO Box 1692 Palm Springs, CA 92263		501(C)(3)	5,000 Unrestricted
Harper's Playground,1477 NW Everett Street Portland, OR 97209	46-4451148	501(C)(3)	20,000 Marshall Park
Harper's Playground,1477 NW Everett Street Portland, OR 97209	46-4451148	501(C)(3)	50,000 Harper's Playground at Marshall Park
Harper's Playground,1477 NW Everett Street Portland, OR 97209	46-4451148	501(C)(3)	55,074 Harper's Playground Marshall Park
Harper's Playground,1477 NW Everett Street Portland, OR 97209	46-4451148	501(C)(3)	100,000 Harper's Playground Marshall Park
Hearing, Speech & Deaf Center, Attn: Development 1625 19th Avenue Seattle, WA 98122	91-0681207	501(C)(3)	33,719 Unrestricted
Hello Life Eating Disorder Recovery Services,1105d 15th Ave. #192 Longview, WA 98632	47-4360126	501(C)(3)	25,000 Eating Disorder Recovery and Prevention Program
Hispanic Metropolitan Chamber, 333 SW 5th Avenue, Suite 100 Portland, OR 97204	93-1156358	501(C)(3)	25,000 For COVID-19 related support in Southwest Washington
Hispanic Metropolitan Chamber, 333 SW 5th Avenue, Suite 100 Portland, OR 97204	93-1156358	501(C)(3)	25,000 Latino Small Business Development Program
Holy Redeemer Catholic Parish,17010 NE 9th Street Vancouver, WA 98684	91-1979268	501(C)(3)	5,200 Unrestricted
Home Life Incorporated,2068 Nw Fillmore Ave. Corvallis, OR 97330-5659	23-7230042	501(C)(3)	7,000 Quality Assurance Position
Homeward Bound Pets,PO Box 8 10601 SE Loop Road McMinnville, OR 97128	93-0687293 91-0937147	501(C)(3)	5,000 Unrestricted 5,000 Unrestricted
Hope Alliance,PO Box 857 Centralia, WA 98531	93-0683413	501(C)(3)	
Horizon Project,608 N Russell St Milton Freewater, OR 97862-1741 Horizon Project,608 N Russell St Milton Freewater, OR 97862-1741	93-0683413	501(C)(3) 501(C)(3)	16,666 I/DD Housing Expansion in Rural Oregon 220,000 HPI Step Project
Horizon Project,608 N Russell St. Milton Freewater, OR 97862-1741	93-0683413	501(C)(3)	300,000 Horizon Project Expanded IDD Housing
Hough Foundation,205 E 11th Street, Suite 200 Vancouver, WA 98660-3384	94-3160811	501(C)(3)	6,000 Operating Expenses
Hough Foundation,205 E 11th Street, Suite 200 Vancouver, WA 98060-3384	94-3160811	501(C)(3)	6,000 Operating Expenses
Hough Foundation,205 E 11th Street, Suite 200 Vancouver, WA 98660-3384	94-3160811	501(C)(3)	6,000 Operating Expenses
Hough Foundation, 205 E 11th Street, Suite 200 Vancourer, WA 95060-3384	94-3160811	501(C)(3)	6,000 Operating Expenses
Hough Foundation,205 E 11th Street, Suite 200 Vancouver, WA 96660-3384	94-3160811	501(C)(3)	6,000 Operating Expenses
Hough Foundation,205 E 11th Street, Suite 200 Vancouver, WA 98660-3384	94-3160811	501(C)(3)	6,000 Operating Expenses
Hough Foundation, 205 E 11th Street, Suite 200 Vancouver, WA 98660-3384	94-3160811	501(C)(3)	6,000 Operating Expenses
Hough Foundation,205 E 11th Street, Suite 200 Vancouver, WA 98660-3384	94-3160811	501(C)(3)	6,000 Operating Expenses
Hough Foundation, 205 E 11th Street, Suite 200 Vancouver, WA 98660-3384	94-3160811	501(C)(3)	6,000 Operating Expenses
Hough Foundation,205 E 11th Street, Suite 200 Vancouver, WA 98660-3384	94-3160811	501(C)(3)	6,000 Operating Expenses
Hough Foundation,205 E 11th Street, Suite 200 Vancouver, WA 98660-3384	94-3160811	501(C)(3)	10,000 Unrestricted
Hough Foundation,205 E 11th Street, Suite 200 Vancouver, WA 98660-3384	94-3160811	501(C)(3)	12,000 Operating Expenses
Hough Foundation,205 E 11th Street, Suite 200 Vancouver, WA 98660-3384	94-3160811	501(C)(3)	13,500 Summer Camp-Healthy Snack/After-School Band Program
Hough Foundation,205 E 11th Street, Suite 200 Vancouver, WA 98660-3384	94-3160811	501(C)(3)	17,500 Therapy dog purchase and training
Humane Society for Southwest Washington, 1100 NE 192nd Avenue Vancouver, WA 98684	91-0759124	501(C)(3)	15 Unrestricted
Humane Society for Southwest Washington, 1100 NE 192nd Avenue Vancouver, WA 98684	91-0759124	501(C)(3)	500 Unrestricted
Humane Society for Southwest Washington, 1100 NE 192nd Avenue Vancouver, WA 98684	91-0759124	501(C)(3)	1,500 Unrestricted
Humane Society for Southwest Washington,1100 NE 192nd Avenue Vancouver, WA 98684	91-0759124	501(C)(3)	2,368 Unrestricted
Humane Society for Southwest Washington,1100 NE 192nd Avenue Vancouver, WA 98684	91-0759124	501(C)(3)	2,500 Unrestricted
Humane Society for Southwest Washington,1100 NE 192nd Avenue Vancouver, WA 98684	91-0759124	501(C)(3)	5,000 Unrestricted
Humane Society for Southwest Washington,1100 NE 192nd Avenue Vancouver, WA 98684	91-0759124	501(C)(3)	5,000 Unrestricted
Humane Society for Southwest Washington,1100 NE 192nd Avenue Vancouver, WA 98684	91-0759124	501(C)(3)	5,000 Unrestricted
Humane Society for Southwest Washington,1100 NE 192nd Avenue Vancouver, WA 98684	91-0759124	501(C)(3)	5,681 Unrestricted
Humane Society for Southwest Washington,1100 NE 192nd Avenue Vancouver, WA 98684	91-0759124	501(C)(3)	7,534 Unrestricted
Humane Society for Southwest Washington,1100 NE 192nd Avenue Vancouver, WA 98684	91-0759124	501(C)(3)	17,753 Unrestricted
Humane Society for Southwest Washington, 1100 NE 192nd Avenue Vancouver, WA 98684	91-0759124	501(C)(3)	25,000 Matching funds for the Fall 2021 Special Appeal
Humane Society for Southwest Washington,1100 NE 192nd Avenue Vancouver, WA 98684	91-0759124	501(C)(3)	51,286 Capital improvements
Humane Society for Southwest Washington,1100 NE 192nd Avenue Vancouver, WA 98684	91-0759124	501(C)(3)	125,000 Leaps and Bounds Capital Campaign-Pledge Payment
Identity Clark County,900 Washington Street, Suite 1040 Vancouver, WA 98660-3455	91-1623724	501(C)(3)	10,000 Unrestricted
Identity Clark County,900 Washington Street, Suite 1040 Vancouver, WA 98660-3455	91-1623724	501(C)(3)	25,000 Keep It Open Campaign
Identity Clark County,900 Washington Street, Suite 1040 Vancouver, WA 98660-3455	91-1623724	501(C)(3)	50,000 Safe by Summer Campaign, designated for Marketing Expenses
Immigrant and Refugee Community Organization,10301 NE Glisan Portland, OR 97220	93-0806295	501(C)(3)	500 Rental Assistance Program
Immigrant and Refugee Community Organization,10301 NE Glisan Portland, OR 97220	93-0806295	501(C)(3)	5,000 Unrestricted
IMPACT Immigration, 1130 SW Morrison St., Suite 250 Portland, OR 97205	83-0681234	501(C)(3)	30,000 Immigrant access to mental health evaluations: Evaluation and Training
Impact NW,PO Box 33530 Portland, OR 97292	93-0557964	501(C)(3)	56,959 For COVID-19 related support in Southwest Washington
Indianapolis School of Ballet,502 N Capitol Avenue, Suite B Indianapolis, IN 46204	34-2066059 93-6033853	501(C)(3)	6,000 Unrestricted
Institute for Rehabilitation Research & Recreation, Inc.,PO Box 1025 Pendleton, OR 97801 IUrban Teen,501 NE 108th Street Vancouver, WA 98685	93-6033853 46-5015461	501(C)(3) 501(C)(3)	33,738 Camp Meadowood Springs 50 Unrestricted
IUrban Teen,501 NE 108th Street Vancouver, WA 98685 IUrban Teen,501 NE 108th Street Vancouver, WA 98685	46-5015461 46-5015461	501(C)(3) 501(C)(3)	75 Unrestricted
		2011(2)	

iUrban Teen,501 NE 108th Street Vancouver, WA 98685	46-5015461	501(C)(3)	500	Unrestricted
iUrban Teen,501 NE 108th Street Vancouver, WA 98685	46-5015461	501(C)(3) 501(C)(3)		Unrestricted
iUrban Teen,501 NE 108th Street Vancouver, WA 98685	46-5015461	501(C)(3)		Sponsorship for 12th Annual Dr. Martin Luther King Breakfast
Urban Teen,501 NE 108th Street Vancouver, WA 98685	46-5015461	501(C)(3)		Unrestricted
Japanese American Museum of Oregon,411 NW Flanders St. Portland, OR 97209	94-3098016	501(C)(3)		General operating support
Japanese American Museum of Oregon,411 NW Flanders St. Portland, OR 97209	94-3098016	501(C)(3)		Minoru Yasui Legacy Project
Japanese Ancestral Society of Portland, PO Box 82443 Portland, OR 97282	93-0685710	501(C)(3)		General operating support and scholarships
JD Currie Youth Camp,PO Box 580 618 NE 232nd Avenue Camas, WA 98607	91-6060345	501(C)(3)		Unrestricted
Junior Center of Art and Science,558 Bellevue Ave Oakland, CA 94610	94-1236838	501(C)(3)		Fire Relief Fund
K-LOVE Radio Educational Media Foundation,5700 West Oaks Blvd Rocklin, CA 95765	94-2816342	501(C)(3)		Pledge drive success
La Center Community Scholarship Foundation,PO Box 297 La Center, WA 98629	47-5543848	501(C)(3)	8,238	2021 Scholarships
Latino Community Resource Group,505 W 16th St Vancouver, WA 98660-2800	61-1636821	501(C)(3)	2,600	For interpretation/translation services for the SWEC AREDI Virtual Teach-Ins
Latino Community Resource Group,505 W 16th St Vancouver, WA 98660-2800	61-1636821	501(C)(3)	5,000	Food or housing security for undocumented individuals or families
Latino Community Resource Group,505 W 16th St Vancouver, WA 98660-2800	61-1636821	501(C)(3)	17,550	AREDI project management
Leadership Institute,1101 N Highland St Arlington, VA 22201-2807	51-0235174	501(C)(3)	2,000	Unrestricted
Leadership Institute,1101 N Highland St Arlington, VA 22201-2807	51-0235174	501(C)(3)	3,000	Unrestricted
Legal Counsel for Youth and Children, PO Box 28629 Seattle, WA 98118	27-3006526	501(C)(3)		Clark County Legal Services for Youth and Young Adults
Leukemia and Lymphoma Society,6915 SW Macadam Avenue, Ste 100 Portland, OR 97219	13-5644916	501(C)(3)		Improving targeted adoptive cell therapy of myeloma
Lifeline Connections,PO Box 1678 Vancouver, WA 98668	91-0787084	501(C)(3)		Camp Mariposa
Lifeline Connections,PO Box 1678 Vancouver, WA 98668	91-0787084	501(C)(3)		Scholarships for Camp Mariposa - SW Washington
Lighthouse Financial Foundation,PO Box 1829 1910 W Fourth Plain Blvd Ste 100 Vancouver, WA 98668	83-2331834	501(C)(3)		Unrestricted
Lighthouse Financial Foundation,PO Box 1829 1910 W Fourth Plain Blvd Ste 100 Vancouver, WA 98668	83-2331834	501(C)(3)		Unrestricted
Lighthouse Financial Foundation,PO Box 1829 1910 W Fourth Plain Blvd Ste 100 Vancouver, WA 98668	83-2331834	501(C)(3)		Unrestricted
Lighthouse Financial Foundation, PO Box 1829 1910 W Fourth Plain Blvd Ste 100 Vancouver, WA 98668	83-2331834	501(C)(3)		Unrestricted
Lighthouse Financial Foundation,PO Box 1829 1910 W Fourth Plain Blvd Ste 100 Vancouver, WA 98668	83-2331834	501(C)(3)		For COVID-19 related support
Living for Christ Church,12500 NE 106th Circle Vancouver, WA 98682	83-1873056	501(C)(3)		Advancement of social justice in southwest Washington
Living for Christ Church,12500 NE 106th Circle Vancouver, WA 98682	83-1873056	501(C)(3)		For COVID-19 related support
Living for Christ Church,12500 NE 106th Circle Vancouver, WA 98682	83-1873056	501(C)(3)		For COVID-19 related support
Longview Community Church,2323 Washington Way Longview, WA 98632	91-0573112	501(C)(3)		1/2 for programs; 1/2 for Missions Committee
Longview Public Library,1600 Louisiana Street Longview, WA 98632	91-6001367	Government		For the Small Business Hub and Education/Jobs Information Center Renewal
Longview Public Schools,2715 Lilac Street Longview, WA 98632	91-6001605	Government		Dennis Dietz Memorial Scholarships for RA Long High School Graduating Seniors
Longview Public Schools, 2715 Lilac Street Longview, WA 98632	91-6001605	Government		Danny L. Evans Scholarships, benefiting RA Long High School seniors
Longview Public Schools, 2715 Lilac Street Longview, WA 98632	91-6001605	Government		Programs serving middle school students
Love Overwhelming,PO Box 1670 Longview, WA 98632 Lower Columbia CAP,1526 Commerce Avenue Longview, WA 98632	46-4721592 91-0814141	501(C)(3) 501(C)(3)		Cowlitz County Severe Weather Shelter Unrestricted
Lower Columbia CAP,1526 Commerce Avenue Longview, WA 98632 Lower Columbia CAP,1526 Commerce Avenue Longview, WA 98632	91-0814141 91-0814141	501(C)(3) 501(C)(3)		Unrestricted
Lower Columbia CAP, 1526 Commerce Avenue Longview, WA 98632 Lower Columbia CAP, 1526 Commerce Avenue Longview, WA 98632	91-0814141 91-0814141	501(C)(3) 501(C)(3)		GiveMore24! Matching Grant
Lower Columbia CAP,1526 Commerce Avenue Longview, WA 96652 Lower Columbia CAP,1526 Commerce Avenue Longview, WA 98632	91-0814141 91-0814141	501(C)(3)		Cowlitz Care2Home
Lower Columbia CAP,1526 Commerce Avenue Longview, WA 98632	91-0814141	501(C)(3)		CAP DEI Learning and Dialogue, Coaching Accompaniment
Lower Columbia Cellege Foundation,1600 Maple Street Longview, WA 98632	91-0975957	501(C)(3)		Nursing Program
Lower Columbia College Foundation,1600 Maple Street Longview, WA 98632	91-0975957	501(C)(3)		James A. Nelson Woodland Friends of LCC scholarship
Lower Columbia College Foundation,1600 Maple Street Longview, WA 98632	91-0975957	501(C)(3)		Harvey J. and Marcella M. Mashinter Endowed Scholarship Fund
Lower Columbia School Gardens,PO Box 785 Longview, WA 98632	46-4549009	501(C)(3)		Unrestricted
Lower Columbia School Gardens, PO Box 785 Longview, WA 98632	46-4549009	501(C)(3)		Unrestricted
Lower Columbia School Gardens, PO Box 785 Longview, WA 98632	46-4549009	501(C)(3)		Unrestricted
Lower Columbia School Gardens, PO Box 785 Longview, WA 98632	46-4549009	501(C)(3)	1,500	Unrestricted
Lower Columbia School Gardens, PO Box 785 Longview, WA 98632	46-4549009	501(C)(3)	50,000	For COVID-19 related support
Lutheran Community Services Northwest, 3600 Main Street, Suite 200 Vancouver, WA 98663	93-0386860	501(C)(3)	2,500	Unrestricted
Lutheran Community Services Northwest, 3600 Main Street, Suite 200 Vancouver, WA 98663	93-0386860	501(C)(3)		Unrestricted
Lutheran Community Services Northwest, 3600 Main Street, Suite 200 Vancouver, WA 98663	93-0386860	501(C)(3)	40,000	Afghan Refugee Intensive Case Management Program
Make a Wish Foundation of Oregon,5901 S Macadam Ave. Suite 200 Portland, OR 97239	82-0385049	501(C)(3)	5,000	Unrestricted
March Of Dimes Inc, Donation Processing Center PO Box 18819 Atlanta, GA 31126	13-1846366	501(C)(3)		Unrestricted
MarriageTeam,1400 NE 136th Ave, Suite 201 Vancouver, WA 98684	20-4517269	501(C)(3)		Unrestricted
Meals on Wheels People,PO Box 19477 Portland, OR 97280	93-0584318	501(C)(3)	350	Unrestricted
Meals on Wheels People,PO Box 19477 Portland, OR 97280	93-0584318	501(C)(3)		Unrestricted
Meals on Wheels People,PO Box 19477 Portland, OR 97280	93-0584318	501(C)(3)		Unrestricted
Meals on Wheels People,PO Box 19477 Portland, OR 97280	93-0584318	501(C)(3)		Unrestricted
Meals on Wheels People,PO Box 19477 Portland, OR 97280	93-0584318	501(C)(3)		Vancouver, WA
Meals on Wheels People,PO Box 19477 Portland, OR 97280	93-0584318	501(C)(3)		Unrestricted
Meals on Wheels People,PO Box 19477 Portland, OR 97280	93-0584318	501(C)(3)		Unrestricted
Meals on Wheels People,PO Box 19477 Portland, OR 97280	93-0584318	501(C)(3)		Unrestricted
Medical Teams International,PO Box 4288 Portland, OR 97208	93-0878944	501(C)(3)		Unrestricted
Medical Teams International,PO Box 4288 Portland, OR 97208	93-0878944	501(C)(3)		Unrestricted
Medical Teams International,PO Box 4288 Portland, OR 97208	93-0878944	501(C)(3)		For COVID-19 related support in Southwest Washington
Mercy Corps Northwest,43 SW Ankeny Street Portland, OR 97204	91-1148123	501(C)(3)		For COVID-19 related support in Southwest Washington
Mercy Corps Northwest,43 SW Ankeny Street Portland, OR 97204	91-1148123	501(C)(3)		For COVID-19 related support in Southwest Washington
Mercy Corps Northwest,43 SW Ankeny Street Portland, OR 97204	91-1148123	501(C)(3)		Haiti and Afghanistan relief efforts
Metropolitan Youth Symphony, 4800 S Macadam Avenue, Suite 105 Portland, OR 97239	23-7447279	501(C)(3)		Unrestricted
Milagro Theater,425 SE 6th Avenue Portland, OR 97214	93-0907543	501(C)(3)		Milagro UNIDAD Programs for Clark County Schools
Mossyrock Viking Scholarship Foundation Association, PO Box 438 Mossyrock, WA 98564	91-1175938	501(C)(3)		5 Scholarships of \$5,000 each
Mt. Hood Community College Foundation, 26000 SE Stark Street Gresham, OR 97030	23-7061622	501(C)(3)	i 5.000	Greatest Need Fund
Mullen-Polk Foundation,1104 Main St. Suite M110 Vancouver, WA 98660 Multnomah County Animal Services,1700 W Historic Columbia River Highway Troutdale, OR 97060	47-4784317 93-6002309	501(C)(3) Government	30,000	Our Next Generation II Expansion Unrestricted

National Inventors Hall Of Fame Inc, 3701 Highland Park NW North Canton, OH 44720-4535	34-1580038	501(C)(3)	24,000 NIHF national; Camp Invention, Salmon Creek
National World War II Museum, Inc.,945 Magazine Street New Orleans, LA 70130	72-1200790	501(C)(3)	100 Unrestricted
National World War II Museum, Inc.,945 Magazine Street New Orleans, LA 70130	72-1200790	501(C)(3)	10,000 Hurricane relief for museum staff
Nature Conservancy, Attn: Treasury 4245 N. Fairfax Drive, Suite 100 Arlington, VA 22203	53-0242652	501(C)(3)	7,935 Unrestricted
New Heights Church,8000 NE 58th Avenue Vancouver, WA 98665	91-0864632	501(C)(3)	9,888 Unrestricted
New Heights Church,8000 NE 58th Avenue Vancouver, WA 98665	91-0864632	501(C)(3)	10,000 Unrestricted
New Heights Church,8000 NE 58th Avenue Vancouver, WA 98665	91-0864632	501(C)(3)	10,000 Unrestricted
Nichiren Buddhist Temple of Portland,2025 SE Yamhill Street Portland, OR 97214	80-0386380	501(C)(3)	13,000 General operating support
Nordic Northwest,8800 SW Oleson Rd. Portland, OR 97223	93-0901132	501(C)(3)	25,000 Board Challenge Campaign
North Central Kiwanis Memorial Fund, PO Box 31033 Seattle, WA 98103-1033	91-6034455	501(C)(3)	27,444 Unrestricted
North County Community Food Bank, PO Box 2106 Battle Ground, WA 98604	91-1715580	501(C)(3)	25,000 Unrestricted
Northwest Association for Blind Athletes,PO Box 65265 Vancouver, WA 98665	26-0244283	501(C)(3)	100 Unrestricted
Northwest Association for Blind Athletes,PO Box 65265 Vancouver, WA 98665	26-0244283	501(C)(3)	3,000 Unrestricted
Northwest Association for Blind Athletes,PO Box 65265 Vancouver, WA 98665	26-0244283	501(C)(3)	3,000 Unrestricted
Northwest Association for Blind Athletes,PO Box 65265 Vancouver, WA 98665	26-0244283	501(C)(3)	3,000 Unrestricted
Northwest Association for Blind Athletes,PO Box 65265 Vancouver, WA 98665	26-0244283	501(C)(3)	5,000 Unrestricted
Northwest Association for Blind Athletes,PO Box 65265 Vancouver, WA 98665	26-0244283	501(C)(3)	5,000 Unrestricted
Northwest Association for Blind Athletes,PO Box 65265 Vancouver, WA 98665	26-0244283	501(C)(3)	15,000 Unrestricted
Northwest Association for Blind Athletes,PO Box 65265 Vancouver, WA 98665	26-0244283	501(C)(3)	66,667 Unrestricted
NW Furniture Bank, 13503 S.E. Mill Plain Blvd., Suite 114 Vancouver, WA 98684	22-3939593	501(C)(3)	300 Unrestricted
NW Furniture Bank, 13503 S.E. Mill Plain Blvd., Suite 114 Vancouver, WA 98684	22-3939593	501(C)(3)	5,000 Unrestricted
NW Furniture Bank, 13503 S.E. Mill Plain Blvd., Suite 114 Vancouver, WA 98684	22-3939593	501(C)(3)	25,000 For COVID-19 related support in Southwest Washington
OakGrove Community Church, PO Box 496 McMinnville, OR 97128	47-4672237	501(C)(3)	15,000 Unrestricted
Odyssey World International Education Services,555 West 8th Street #306 Vancouver, WA 98660	20-3905057	501(C)(3)	25,000 Youth Development & Community Conversations
Onalaska Scholarship Fund,PO Box 194 Onalaska, WA 98570	94-3068730	501(C)(3)	20,000 5 Scholarships of \$5,000 each
Open Doors For Multicultural Families,24437 Russell Rd Ste 110 Kent, WA 98032-1786	27-1206272	501(C)(3)	50,000 ODMF Village
Open House Ministries,PO Box 242 Vancouver, WA 98666-0242	94-3028685	501(C)(3)	500 Unrestricted
Open House Ministries,PO Box 242 Vancouver, WA 98666-0242	94-3028685	501(C)(3)	509 Unrestricted
Open House Ministries, PO Box 242 Vancouver, WA 98666-0242	94-3028685	501(C)(3)	583 Unrestricted
Open House Ministries, PO Box 242 Vancouver, WA 98666-0242	94-3028685	501(C)(3)	1,000 Unrestricted
Open House Ministries,PO Box 242 Vancouver, WA 98666-0242	94-3028685	501(C)(3)	1,000 Unrestricted
Open House Ministries.PO Box 242 Vancouver. WA 98666-0242	94-3028685	501(C)(3)	1.500 Unrestricted
Open House Ministries, PO Box 242 Vancouver, WA 98666-0242	94-3028685	501(C)(3)	2,000 Unrestricted
Open House Ministries, P0 Box 242 Vancouver, WA 98666-042	94-3028685	501(C)(3)	5,000 Unrestricted
Open House Ministries, PO Box 242 Vancouver, WA 98666-0242	94-3028685	501(C)(3)	5,000 Unrestricted
Open House Ministries,PO Box 242 Vancouver, WA 98060-0242 Open House Ministries,PO Box 242 Vancouver, WA 98666-0242	94-3028685	501(C)(3)	5,000 Unrestricted
Open House Ministries,PO Box 242 Vancouver, WA 98666-0242	94-3028685	501(C)(3)	5,000 Community of Hope Fundraiser
Open House Ministries,PO Box 242 Vancouver, WA 96666-0242 Open House Ministries,PO Box 242 Vancouver, WA 98666-0242	94-3028685	501(C)(3)	5,000 Unrestricted
Open House Ministries,PO Box 242 Vancouver, WA 98666-0242 Open House Ministries,PO Box 242 Vancouver, WA 98666-0242	94-3028685	501(C)(3)	5,120 Unrestricted
Open House Ministries,PO Box 242 Vancouver, WA 98666-0242 Open House Ministries,PO Box 242 Vancouver, WA 98666-0242	94-3028685		5,120 Unrestricted
Open House Ministries,PO Box 242 Vancouver, WA 98666-0242 Open House Ministries,PO Box 242 Vancouver, WA 98666-0242	94-3028685	501(C)(3)	5,120 Unrestricted
Open House Ministries,PO Box 242 Vancouver, WA 98666-0242 Open House Ministries,PO Box 242 Vancouver, WA 98666-0242	94-3028685	501(C)(3)	5,120 Unrestricted
Open House Ministries,PO Box 242 Vancouver, WA 98666-0242 Open House Ministries,PO Box 242 Vancouver, WA 98666-0242	94-3028685	501(C)(3)	5,120 Unrestricted
		501(C)(3)	
Open House Ministries,PO Box 242 Vancouver, WA 98666-0242	94-3028685	501(C)(3)	5,341 Unrestricted
Open House Ministries,PO Box 242 Vancouver, WA 98666-0242	94-3028685	501(C)(3)	5,341 Unrestricted
Open House Ministries,PO Box 242 Vancouver, WA 98666-0242	94-3028685	501(C)(3)	5,341 Unrestricted
Open House Ministries,PO Box 242 Vancouver, WA 98666-0242	94-3028685	501(C)(3)	8,439 Unrestricted
Open House Ministries,PO Box 242 Vancouver, WA 98666-0242	94-3028685	501(C)(3)	10,000 Unrestricted
Open House Ministries,PO Box 242 Vancouver, WA 98666-0242	94-3028685	501(C)(3)	10,000 Unrestricted
Open House Ministries,PO Box 242 Vancouver, WA 98666-0242	94-3028685	501(C)(3)	10,000 Unrestricted
Open House Ministries, PO Box 242 Vancouver, WA 98666-0242	94-3028685	501(C)(3)	10,000 Case Manager Position
Open House Ministries, PO Box 242 Vancouver, WA 98666-0242	94-3028685	501(C)(3)	20,000 Community of Hope - Annual Fundraiser on June 3, 2021
Open House Ministries,PO Box 242 Vancouver, WA 98666-0242	94-3028685	501(C)(3)	50,000 Capital Campaign to build Open House West
Options360 Women's Clinic,PO Box 61545 Vancouver, WA 98666	27-0059405	501(C)(3)	500 Unrestricted
Options360 Women's Clinic,PO Box 61545 Vancouver, WA 98666	27-0059405	501(C)(3)	500 Unrestricted
Options360 Women's Clinic,PO Box 61545 Vancouver, WA 98666	27-0059405	501(C)(3)	500 Unrestricted
Options360 Women's Clinic,PO Box 61545 Vancouver, WA 98666	27-0059405	501(C)(3)	1,000 Unrestricted
Options360 Women's Clinic,PO Box 61545 Vancouver, WA 98666	27-0059405	501(C)(3)	1,500 Unrestricted
Options360 Women's Clinic,PO Box 61545 Vancouver, WA 98666	27-0059405	501(C)(3)	5,000 Unrestricted
Options360 Women's Clinic,PO Box 61545 Vancouver, WA 98666	27-0059405	501(C)(3)	5,000 Unrestricted
Oregon Buddhist Temple,3720 SE 34th Ave Portland, OR 97202	93-0615601	501(C)(3)	15,000 General operating support
Oregon Food Bank,7900 NE 33rd Drive Portland, OR 97211	93-0785786	501(C)(3)	500 Mudbone Farm
Oregon Food Bank,7900 NE 33rd Drive Portland, OR 97211	93-0785786	501(C)(3)	1,250 Mudbone Grown
Oregon Food Bank, 7900 NE 33rd Drive Portland, OR 97211	93-0785786	501(C)(3)	2,000 Unrestricted
Oregon Food Bank, 7900 NE 33rd Drive Portland, OR 97211	93-0785786	501(C)(3)	2,000 Unrestricted
Oregon Food Bank, 7900 NE 33rd Drive Portland, OR 97211	93-0785786	501(C)(3)	3,000 Unrestricted
Oregon Food Bank, 7900 NE 33rd Drive Portland, OR 97211	93-0785786	501(C)(3)	4,500 Unrestricted
Oregon Health & Science University Foundation,2020 SW 4th Avenue, Suite 900 Portland, OR 97201	23-7083114	501(C)(3)	1,000 Knight Cancer Institute
Oregon Health & Science University Foundation,2020 SW 4th Avenue, Suite 900 Portland, OR 97201	23-7083114	501(C)(3)	1,000 Virtually Freestyle event for Doernbecher Children's Hospital
Oregon Health & Science University Foundation, 2020 SW 4th Avenue, Suite 900 Portland, OR 97201	23-7083114	501(C)(3)	3,454 Multiple Sclerosis Research
Oregon Health & Science University Foundation,2020 SW 4th Avenue, Suite 900 Fortland, OK 97201 Oregon Health & Science University Foundation,2020 SW 4th Avenue, Suite 900 Portland, OK 97201	23-7083114	501(C)(3)	50,000 Building an Autism Center of Excellence at OHSU
Oregon Health & Science University Foundation,2020 SW 4th Avenue, Suite 900 Fortland, OK 97201 Oregon Health & Science University Foundation,2020 SW 4th Avenue, Suite 900 Portland, OK 97201	23-7083114	501(C)(3)	74,988 ctDNA Biomarker to improve organ-preserving strategies in patients with rectal cancer
Oregon Health & Science University Foundation,2020 SW 4th Avenue, Suite 900 Portland, OR 97201 Oregon Health & Science University Foundation,2020 SW 4th Avenue, Suite 900 Portland, OR 97201		501(C)(3)	75,000 Circulating tumor DNA as a non-invasive method of monitoring uterine leiomyosarcoma
	23-7003114	JU1(U)(3)	7.5,000 Tenediating tumor DINA as a non-invasive method or monitoring uterine leiomyosarcoma

Oregon Health & Science University Foundation, 2020 SW 4th Avenue, Suite 900 Portland, OR 97201	23-7083114	501(C)(3)	100.000	Pediatric Gastroenterology; Children's medical care and research
Oregon Health & Science University Foundation,2020 SW 4th Avenue, Suite 900 Portland, OR 97201	23-7083114	501(C)(3)	250,000	
Oregon Health & Science University Foundation, 2020 SW 4th Avenue, Suite 900 Portland, OR 97201	23-7083114	501(C)(3)		Development of DRQ for treatment of advanced cancer
Oregon Health & Science University Foundation,2020 SW 4th Avenue, Suite 900 Portland, OR 97201	23-7083114	501(C)(3)		A preclinical approach to targeting cell state in aggressive metastatic breast cancer
Oregon Health & Science University Foundation,2020 SW 4th Avenue, Suite 900 Portland, OR 97201	23-7083114	501(C)(3)		Knight Scholars Program: Expansion to Promote a More Diverse Cancer Research Workforce
Oregon Health & Science University Foundation,2020 SW 4th Avenue, Suite 900 Portland, OR 97201	23-7083114	501(C)(3)		Blood Biopsies as a Cost-Effective Approach to Democratizing Personalized Therapy in OR & WA Patients
Oregon Health & Science University Foundation,2020 SW 4th Avenue, Suite 900 Portland, OR 97201	23-7083114	501(C)(3)		Overcoming Chemo Resistance in ovarian cancer
Oregon Parks Forever,1501 SW Jefferson St. Portland, OR 97201	93-1177836	501(C)(3)		Unrestricted
Oregon Public Broadcasting (OPB),7140 SW Macadam Avenue Portland, OR 97219-3099	93-0814638	501(C)(3)		Unrestricted
Oregon Public Broadcasting (OPB),7140 SW Macadam Avenue Portland, OR 97219-3099	93-0814638	501(C)(3)		Unrestricted
Oregon Public Broadcasting (OPB),7140 SW Macadam Avenue Portland, OR 97219-3099 Oregon Public Broadcasting (OPB),7140 SW Macadam Avenue Portland, OR 97219-3099	93-0814638 93-0814638	501(C)(3) 501(C)(3)	450	Unrestricted Unrestricted
Oregon Public Broadcasting (OPB), 7140 SW Macadam Avenue Portland, OK 97219-3099 Oregon Public Broadcasting (OPB), 7140 SW Macadam Avenue Portland, OK 97219-3099	93-0814638	501(C)(3)		Unrestricted
Oregon Public Broadcasting (OPB), 7140 SW Macadam Avenue Portland, OK 97219-3099	93-0814638	501(C)(3)	450	
Oregon Public Broadcasting (OPB),7140 SW Macadam Avenue Portland, OR 97219-3099	93-0814638	501(C)(3)	450	
Oregon Public Broadcasting (OPB),7140 SW Macadam Avenue Portland, OR 97219-3099	93-0814638	501(C)(3)	450	
Oregon Public Broadcasting (OPB),7140 SW Macadam Avenue Portland, OR 97219-3099	93-0814638	501(C)(3)		Unrestricted
Oregon Public Broadcasting (OPB),7140 SW Macadam Avenue Portland, OR 97219-3099	93-0814638	501(C)(3)		Unrestricted
Oregon Public Broadcasting (OPB),7140 SW Macadam Avenue Portland, OR 97219-3099	93-0814638	501(C)(3)	450	Unrestricted
Oregon Public Broadcasting (OPB),7140 SW Macadam Avenue Portland, OR 97219-3099	93-0814638	501(C)(3)	450	Unrestricted
Oregon Public Broadcasting (OPB),7140 SW Macadam Avenue Portland, OR 97219-3099	93-0814638	501(C)(3)		Unrestricted
Oregon Public Broadcasting (OPB),7140 SW Macadam Avenue Portland, OR 97219-3099	93-0814638	501(C)(3)		Unrestricted
Oregon Public Broadcasting (OPB),7140 SW Macadam Avenue Portland, OR 97219-3099	93-0814638	501(C)(3)		Unrestricted
Oregon Public Broadcasting (OPB),7140 SW Macadam Avenue Portland, OR 97219-3099	93-0814638	501(C)(3)		Unrestricted
Oregon Public Broadcasting (OPB),7140 SW Macadam Avenue Portland, OR 97219-3099	93-0814638	501(C)(3)		Unrestricted
Oregon Public Broadcasting (OPB),7140 SW Macadam Avenue Portland, OR 97219-3099	93-0814638	501(C)(3)		Matching funds for Ratzlaff Challenge
Oregon Public Broadcasting (OPB),7140 SW Macadam Avenue Portland, OR 97219-3099 Oregon State University Foundation,4238 SE Research Way Corvallis, OR 97333-1068	93-0814638 93-6022772	501(C)(3)		Unrestricted
Oregon State University Foundation,4238 SE Research Way Corvallis, OR 97333-1068	93-6022772	501(C)(3) 501(C)(3)		Abeson Family Endowed Scholarship Fund Scholarship Match; OSU Women Giving; OSU Library Discretionary Fund
Oregon Symphony Orchestra,921 SW Washington Street, Suite 200 Portland, OR 97205	93-0446527	501(C)(3)	22,500	
Oregon symphony Orchestra, 521 SW Washington Street, Suite 200 Fortland, OK 57205	93-1124364	501(C)(3)	20,000	
Pacific Foundation for Blind Children,2214 East 13th Street Vancouver, WA 98661	31-1561247	501(C)(3)	870	
Pacific Foundation for Blind Children,2214 East 13th Street Vancouver, WA 98661	31-1561247	501(C)(3)	12,000	
Pacific Islander Community Association of Washington, 33710 9th Ave. South, Suite 1 Federal Way, WA 98003	84-2470123	501(C)(3)	100	
Pacific Islander Community Association of Washington, 33710 9th Ave. South, Suite 1 Federal Way, WA 98003	84-2470123	501(C)(3)	500	
Pacific Islander Community Association of Washington, 33710 9th Ave. South, Suite 1 Federal Way, WA 98003	84-2470123	501(C)(3)	1,000	For the Mana - Spiritual/Cultural Power Sponsor Level of Twelve Days of Pasifika Kirisimasi Sponsorship Request
Pacific Islander Community Association of Washington, 33710 9th Ave. South, Suite 1 Federal Way, WA 98003	84-2470123	501(C)(3)		Advancement of social justice in southwest Washington
Pacific Islander Community Association of Washington, 33710 9th Ave. South, Suite 1 Federal Way, WA 98003	84-2470123	501(C)(3)	15,000	
Pacific Islander Community Association of Washington, 33710 9th Ave. South, Suite 1 Federal Way, WA 98003	84-2470123	501(C)(3)	125,000	
Pacific Legal Foundation,930 G Street Sacramento, CA 95814	94-2197343	501(C)(3)	5,000	
Pacific Lutheran University,Office of Student Financial Services 12180 Park Avenue S. Tacoma, WA 98447	91-0565571	501(C)(3)		Fuesler Family Scholarship for Chemistry/Biochemistry
Paid In Full Oregon,5244 SE Pine St Hillsboro, OR 97123-7682 Paid In Full Oregon,5244 SE Pine St Hillsboro, OR 97123-7682	81-5371204 81-5371204	501(C)(3) 501(C)(3)	3,500	Laptops Unrestricted
Paid In Full Oregon,5244 SE Pine St. Hillsboro, OR 97123-7682 Paid In Full Oregon,5244 SE Pine St. Hillsboro, OR 97123-7682	81-5371204	501(C)(3)	5,000	
Parasol Tahoe Community Foundation, 948 Incline Way Incline Village, NV 89451-9527	880362053	501(C)(3)	500,000	
Parks Foundation of Clark County, PO Box 993 Camas, WA 98607	91-1986747	501(C)(3)	1,000	
Parks Foundation of Clark County,PO Box 993 Camas, WA 98607	91-1986747	501(C)(3)	1,500	
Parks Foundation of Clark County, PO Box 993 Camas, WA 98607	91-1986747	501(C)(3)	2,368	Rudy Luepke Senior Center
Parks Foundation of Clark County,PO Box 993 Camas, WA 98607	91-1986747	501(C)(3)	2,500	Unrestricted
Parks Foundation of Clark County,PO Box 993 Camas, WA 98607	91-1986747	501(C)(3)		Booville 2021
Parks Foundation of Clark County,PO Box 993 Camas, WA 98607	91-1986747	501(C)(3)		Senior programs at the Luepke Senior Center
Parks Foundation of Clark County,PO Box 993 Camas, WA 98607	91-1986747	501(C)(3)	65,000	
Partners In Careers,3210 NE 52nd Street Vancouver, WA 98663	91-1537912	501(C)(3)		Prep-Cook Short-Term Training Program
Partners In Careers,3210 NE 52nd Street Vancouver, WA 98663	91-1537912	501(C)(3)		Short Term Training Pilot to Sharpen the Saw for Low Income Job Seekers
Pathways Clinic,PO Box 1036 Camas, WA 98607	91-1689705	501(C)(3)	1,000	
Pathways Clinic, PO Box 1036 Camas, WA 98607	91-1689705	501(C)(3)		Unrestricted
PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600	91-1231436 91-1231436	501(C)(3) 501(C)(3)		Unrestricted Unrestricted
PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600	91-1231436	501(C)(3) 501(C)(3)		Hospice Southwest
PeaceHealth Southwest Medical Center Foundati,FO Box 1000 Vancouver, WA 98003-1000 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600	91-1231436	501(C)(3)		Scholarship fund
PeaceHealth Southwest Medical Center Foundati, PO Box 1600 Vancouver, WA 98668-1600	91-1231436	501(C)(3)		Healthy Steps Women's and Children's Endowment
PeaceHealth Southwest Medical Center Foundati, PO Box 1600 Vancouver, WA 98668-1600	91-1231436	501(C)(3)		McGough Rehab Unit
PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600	91-1231436	501(C)(3)		Palliative Care and Hospice Endowed Fund
PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600	91-1231436	501(C)(3)	5,000	
	91-1231436	501(C)(3)		Health Career Scholarship Fund, Veterans preferred
PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600		501(C)(3)	7,500	Advanced Imaging for Uninsured & Underinsured Women
PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600	91-1231436	(-/(-/		
PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600	91-1231436	501(C)(3)		Hospice Southwest
PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600	91-1231436 91-1231436	501(C)(3) 501(C)(3)	8,439	Unrestricted
PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 9868-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 9868-1600 PeaceHealth PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 9868-1600 PeaceHealth PeaceHea	91-1231436 91-1231436 91-1231436	501(C)(3) 501(C)(3) 501(C)(3)	8,439 20,000	Unrestricted Inpatient Physical Rehab
PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1	91-1231436 91-1231436 91-1231436 91-1231436	501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3)	8,439 20,000 50,000	Unrestricted Inpatient Physical Rehab Cancer Campaign, Floor 3-North
PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98689-0156 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98689-0156 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98689-0156 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98689-0156 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 9869-0156 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 9869-0156 PeaceHealth Southwest Medical Center Foundati,PO Box 160	91-1231436 91-1231436 91-1231436 91-1231436 91-1231436 91-1156962	501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3)	8,439 20,000 50,000 25,000	Unrestricted Inpatient Physical Rehab Cancer Campaign, Floor 3-North Coalition Building
PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 98668-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 1600 Vancouver, WA 9868-1600 PeaceHealth Southwest Medical Center Foundati,PO Box 16	91-1231436 91-1231436 91-1231436 91-1231436	501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3)	8,439 20,000 50,000 25,000 25,000	Unrestricted Inpatient Physical Rehab Cancer Campaign, Floor 3-North

Planned Parenthood Columbia Willamette, Attn: Development 3727 NE Martin Luther King Jr. Boulevard Portland, OR 97212	93-6031270	501(C)(3)	500 Unrestricted
Planned Parenthood Columbia Willamette, Attn: Development 3727 NE Martin Luther King Jr. Boulevard Portland, OR 97212	93-6031270	501(C)(3)	500 Unrestricted
Planned Parenthood Columbia Willamette, Attn: Development 3727 NE Martin Luther King Jr. Boulevard Portland, OR 97212	93-6031270	501(C)(3)	1,000 Unrestricted
Planned Parenthood Columbia Willamette,Attn: Development 3727 NE Martin Luther King Jr. Boulevard Portland, OR 97212	93-6031270	501(C)(3)	1,500 Unrestricted
Planned Parenthood Columbia Willamette, Attn: Development 3727 NE Martin Luther King Jr. Boulevard Portland, OR 97212	93-6031270	501(C)(3)	3,000 Unrestricted
Planned Parenthood Columbia Willamette, Attn: Development 3727 NE Martin Luther King Jr. Boulevard Portland, OR 97212	93-6031270	501(C)(3)	3,000 Unrestricted
Play Frontier,PO Box 4 1111 Hemlock Road Carson, WA 98610	83-1439158	501(C)(3)	25,000 Play Frontier
Police Activities League,605 E Evergreen Boulevard Vancouver, WA 98661	91-2072283	501(C)(3)	17,500 To support board equity, diversity and inclusion training
Portland Columbia Symphony Orchestra, PO Box 6559 Portland, OR 97228	93-0928813	501(C)(3)	25,000 Unrestricted
Portland Japanese American Citizens League, PO Box 86310 Portland, OR 97286	20-1116631	501(C)(3)	5,000 For the Nisei WWI Veterans' Stamp Dedication on Flag Day 2021
Portland Japanese American Citizens League, PO Box 86310 Portland, OR 97286	20-1116631	501(C)(3)	20,000 General operating support and scholarships
Portland Japanese Gardens, 611 SW Kingston Avenue Portland, OR 97205	93-0511171	501(C)(3)	12,000 General operating support
Portland Opera, The Hampton Opera Center 211 SE Caruthers Street Portland, OR 97214	93-6034321	501(C)(3)	5,000 Resident Artist Program
Portland Taiko,3728 SE 34th Avenue Portland, OR 97202	93-1309882	501(C)(3)	16,000 General operating support
Portland Youth Philharmonic,9320 SW Barbur Boulevard, Suite 140 Portland, OR 97219	93-0386902	501(C)(3)	5,000 Unrestricted
Proud Ground,5288 N Interstate Avenue Portland, OR 97217	93-1290320	501(C)(3)	15,000 Homeownership Education and Counseling Program
Providence Portland Medical Foundation, 4805 NE Glisan Street Portland, OR 97213	93-1231494	501(C)(3)	200,000 Enhancing T-cell Transfer Immunotherapy Against Cancer
Providence Southwest Washington Foundation, 413 Lilly Road NE Olympia, WA 98506-5166	91-1097056	501(C)(3)	8,439 Unrestricted
PurityWorks,PO Box 5363 Deltona, FL 32728	03-0568872	501(C)(3)	500 COVID Help
PurityWorks, PO Box 5363 Deltona, FL 32728	03-0568872	501(C)(3)	2,400 Discipleship support
PurityWorks,PO Box 5363 Deltona, FL 32728	03-0568872	501(C)(3)	3,000 Granada Nicaragua Church
PurityWorks,PO Box 5363 Deltona, FL 32728	03-0568872	501(C)(3) 501(C)(3)	3,000 Nicaragua Ministry
PurityWorks,PO Box 5363 Deltona, FL 32728	03-0568872	501(C)(3)	5,000 Unrestricted
R.A. Long Booster Club,2903 Nichols Blvd Longview, WA 98632	26-4791330	501(C)(3)	10,000 Boys Tennis; Girls Golf; Unrestricted
Rainbow Advocacy Inclusion Networking Services,PO Box 2165 Longview, WA 98632-9380	841875608		25,000 Cowlitz County Rainbow Community Center
Range Conservation Foundation, PO Box 1595 Carson City, NV 89702	20-1601536	501(C)(3)	5,000 Unrestricted
Reach Out and Read Northwest, 2400 NW 80th St. #315 Seattle, WA 98117	04-3481253	501(C)(3)	100 Cowlitz County, Washington
Reach Out and Read Northwest, 2400 NW 80th St. #315 Seattle, WA 98117	04-3481253	501(C)(3)	5,000 Unrestricted
Reach Out and Read Northwest,2400 NW 80th St. #315 Seattle, WA 98117	04-3481253	501(C)(3)	7,500 Unrestricted
Reach Out and Read Oregon, 16400 SW Nighthawk Dr. Beaverton, OR 97007	04-3481253	501(C)(3)	5,000 Unrestricted
Reach Out and Read Oregon, 10400 SW Nighthawk Dr, Beaverton, OR 97007	04-3481253	501(C)(3)	7,500 Unrestricted
Rivkin Center for Ovarian Cancer,1801 Lind Ave Sw Attn Tax Dept Renton, WA 98057-3368	91-2054035	501(C)(3)	10,000 Unrestricted
Ryther,2400 Ne 95Th St Seattle, WA 98115-2499	91-0564983	501(C)(3)	292,000 Stepping Stones
Salmon Creek Hospital Foundation,PO Box 4484 Portland, OR 97208	83-0433165	501(C)(3)	3,000 Salmon Creek Cancer Center
Salmon Creek Hospital Foundation, PO Box 4484 Portland, OR 97208	83-0433165	501(C)(3)	5,000 Cardiac Rehabilitation Services
Salmon Creek Hospital Foundation,PO Box 4484 Portland, OR 97208	83-0433165	501(C)(3)	20,000 Unrestricted
Samaritan's Purse PO Box 3000 Boone. NC 28607	58-1437002	501(C)(3)	1,000 Tornado relief, or where needed most
Samaritan's Purse, PO Box 3000 Boone, NC 28607	58-1437002	501(C)(3)	1,000 Unrestricted
Samaritan's Purse, PO Box 3000 Boone, NC 28607	58-1437002	501(C)(3)	3,000 Unrestricted
Samaritan's Purse,PO Box 3000 Boone, NC 28607	58-1437002		6,000 Afghanistan Refugees and Hurricane Ida recovery
	48-1270906	501(C)(3)	
San Miguel Catholic High School,6601 S. San Fernando Road Tucson, AZ 85756		501(C)(3)	5,000 Scholarships
Santa's Posse,PO Box 410 Vancouver, WA 98666	82-2392689	501(C)(3)	25,000 Brown Memorial Fund
Scholar Fund / Scholarship Junkies,PO Box 45406 Seattle, WA 98145	81-3153433	501(C)(3)	500 LULAC Vancouver
Scholar Fund / Scholarship Junkies,PO Box 45406 Seattle, WA 98145	81-3153433	501(C)(3)	13,500 LULAC Vancouver
Scholar Fund / Scholarship Junkies,PO Box 45406 Seattle, WA 98145	81-3153433	501(C)(3)	14,123 LULAC Vancouver: supporting senior nutrition in Clark County
Scholar Fund / Scholarship Junkies,PO Box 45406 Seattle, WA 98145	81-3153433	501(C)(3)	36,000 LULAC Vancouver: COVID-19 related support
Scholar Fund / Scholarship Junkies,PO Box 45406 Seattle, WA 98145	81-3153433	501(C)(3)	100,000 LULAC Vancouver: From Thoughts to Action - Dreams to Reality
Scottsdale Artists School Inc.,3720 North Marshall Way Scottsdale, AZ 85251	86-0460092	501(C)(3)	5,000 General Fund; Friends Program
Scottsdale Bible Church, 7601 E Shea Blvd Scottsdale, AZ 85260-5551	86-0179808	501(C)(3)	1,500 Shea Campus General Operating Fund
Scottsdale Bible Church,7601 E Shea Bivd. Scottsdale, AZ 85260-5551	86-0179808		
		501(C)(3)	1,500 Shea Campus General Operating Fund
Scottsdale Bible Church,7601 E Shea Blvd Scottsdale, AZ 85260-5551	86-0179808	501(C)(3)	1,500 Shea Campus General Operating Fund
Scottsdale Bible Church,7601 E Shea Blvd Scottsdale, AZ 85260-5551	86-0179808	501(C)(3)	1,500 Shea Campus General Operating Fund
Scottsdale Bible Church,7601 E Shea Blvd Scottsdale, AZ 85260-5551	86-0179808	501(C)(3)	1,500 Shea Campus General Operating Fund
Scottsdale Bible Church,7601 E Shea Blvd Scottsdale, AZ 85260-5551	86-0179808	501(C)(3)	1,500 Shea Campus General Operating Fund
Scottsdale Bible Church,7601 E Shea Blvd Scottsdale, AZ 85260-5551	86-0179808	501(C)(3)	1,500 Shea Campus General Operating Fund
Scottsdale Bible Church,7601 E Shea Blvd Scottsdale, AZ 85260-5551	86-0179808	501(C)(3)	1,500 Shea Campus General Operating Fund
Scottsdale Bible Church,7601 E Shea Blvd Scottsdale, AZ 85260-5551	86-0179808	501(C)(3)	1,500 Shea Campus General Operating Fund
Scottsdale Bible Church,7601 E Shea Bivd Scottsdale, AZ 85260-5551	86-0179808	501(C)(3)	1,500 Shea Campus General Operating Fund
Sea Mar Community Health Centers/Community Services Northwest,6221 NE Fourth Plain Blvd Vancouver, WA 98661	91-1020139	501(C)(3)	50,000 HUD Permanent Supported Housing Programs in Clark County
Seattle Children's Hospital Foundation, Po Box 5371 Msc 818-F Seattle, WA 98145-5005	91-1156519	501(C)(3)	100 Unrestricted
Seattle Children's Hospital Foundation,Po Box 5371 Msc 818-F Seattle, WA 98145-5005	91-1156519	501(C)(3)	15,000 Unrestricted
Second Step Housing,PO Box 61894 Vancouver, WA 98666	91-1691325	501(C)(3)	500 Unrestricted
Second Step Housing,PO Box 61894 Vancouver, WA 98666	91-1691325	501(C)(3)	3,515 Unrestricted
Second Step Housing,PO Box 61894 Vancouver, WA 98666	91-1691325	501(C)(3)	5,000 Unrestricted
See Ya Later Foundation, Inc.,PO Box 1281 McMinnville, OR 97128	20-4525402	501(C)(3)	5,000 Unrestricted
	27-1423723	501(C)(3)	24 Unrestricted
SELF-Support for Early Learning and Families,12214 SE Mill Plain Blvd. Suite 203 Vancouver. WA 98684			
SELF-Support for Early Learning and Families,12214 SE Mill Plain Blvd. Suite 203 Vancouver, WA 98684 SELF-Support for Early Learning and Families,12214 SE Mill Plain Blvd. Suite 203 Vancouver, WA 98684		501(C)(3)	25.000 I Dolly Parton Imagination Library
SELF-Support for Early Learning and Families,12214 SE Mill Plain Blvd. Suite 203 Vancouver, WA 98684	27-1423723	501(C)(3) 501(C)(3)	25,000 Dolly Parton Imagination Library 25,000 Dolly Parton Imagination Library
SELF-Support for Early Learning and Families,12214 SE Mill Plain Blvd. Suite 203 Vancouver, WA 98684 SELF-Support for Early Learning and Families,12214 SE Mill Plain Blvd. Suite 203 Vancouver, WA 98684	27-1423723 27-1423723	501(C)(3)	25,000 Dolly Parton Imagination Library
SELF-Support for Early Learning and Families,12214 SE Mill Plain Blvd. Suite 203 Vancouver, WA 98684 SELF-Support for Early Learning and Families,12214 SE Mill Plain Blvd. Suite 203 Vancouver, WA 98684 SELF-Support for Early Learning and Families,12214 SE Mill Plain Blvd. Suite 203 Vancouver, WA 98684	27-1423723 27-1423723 27-1423723	501(C)(3) 501(C)(3)	25,000 Dolly Parton Imagination Library 96,000 Southwest Washington Child Care Partnership
SELF-Support for Early Learning and Families,12214 SE Mill Plain Blvd. Suite 203 Vancouver, WA 98684 SELF-Support for Early Learning and Families,12214 SE Mill Plain Blvd. Suite 203 Vancouver, WA 98684 SELF-Support for Early Learning and Families,12214 SE Mill Plain Blvd. Suite 203 Vancouver, WA 98684 SELF-Support for Early Learning and Families,12214 SE Mill Plain Blvd. Suite 203 Vancouver, WA 98684	27-1423723 27-1423723 27-1423723 27-1423723	501(C)(3) 501(C)(3) 501(C)(3)	25,000 Dolly Parton Imagination Library 96,000 Southwest Washington Child Care Partnership 64 Pasitos Gigantes - Hispanic Disability Support
SELF-Support for Early Learning and Families,12214 SE Mill Plain Blvd. Suite 203 Vancouver, WA 98684 SELF-Support for Early Learning and Families,12214 SE Mill Plain Blvd. Suite 203 Vancouver, WA 98684 SELF-Support for Early Learning and Families,12214 SE Mill Plain Blvd. Suite 203 Vancouver, WA 98684 SELF-Support for Early Learning and Families,12214 SE Mill Plain Blvd. Suite 203 Vancouver, WA 98684 SELF-Support for Early Learning and Families,12214 SE Mill Plain Blvd. Suite 203 Vancouver, WA 98684 SELF-Support for Early Learning and Families,12214 SE Mill Plain Blvd. Suite 203 Vancouver, WA 98684	27-1423723 27-1423723 27-1423723 27-1423723 27-1423723 27-1423723	501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3)	25,000 Dolly Parton Imagination Library 96,000 Southwest Washington Child Care Partnership 64 Pasitos Gigantes - Hispanic Disability Support 100 Pasitos Gigantes - Hispanic Disability Support
SELF-Support for Early Learning and Families,12214 SE Mill Plain Blvd. Suite 203 Vancouver, WA 98684 SELF-Support for Early Learning and Families,12214 SE Mill Plain Blvd. Suite 203 Vancouver, WA 98684 SELF-Support for Early Learning and Families,12214 SE Mill Plain Blvd. Suite 203 Vancouver, WA 98684 SELF-Support for Early Learning and Families,12214 SE Mill Plain Blvd. Suite 203 Vancouver, WA 98684	27-1423723 27-1423723 27-1423723 27-1423723	501(C)(3) 501(C)(3) 501(C)(3)	25,000 Dolly Parton Imagination Library 96,000 Southwest Washington Child Care Partnership 64 Pasitos Gigantes - Hispanic Disability Support

SELE Support for Factul Lowering and Families 13214 SE Mill Disin Divid Suite 302 Veneouver, WA 08694	27-1423723 501(C)(3)	38,000	Decises Cignetes - Hispania Dischility Support Community Advances and Support
SELF-Support for Early Learning and Families,12214 SE Mill Plain Blvd. Suite 203 Vancouver, WA 98684 Serenity Equine Rescue And Rehabilitation,28818 SE 216Th Way Maple Valley, WA 98038	26-1817306 501(C)(3)		Pasitos Gigantes - Hispanic Disability Support: Community Advocacy and Support Unrestricted
Seton Catholic College Preparatory High Schoo,9000 NE 64th Avenue Vancouver, WA 98665	91-2083459 501(C)(3)		Seton Scholarship Challenge
Secon Catholic College Preparatory High Schoo,9000 NE 64th Avenue Vancouver, WA 98665	91-2083459 501(C)(3) 91-2083459 501(C)(3)		Unrestricted
Secon Catholic College Preparatory High Schoo,9000 NE 64th Avenue Vancouver, WA 98665	91-2083459 501(C)(3) 91-2083459 501(C)(3)		Bleacher expansion / press box
Secon Catholic College Preparatory High Schoo,9000 NE 64th Avenue Vancouver, WA 98665	91-2083459 501(C)(3)		Designated for lighting cost for outdoor fields
Secon Catholic College Preparatory High Schoo,9000 NE 64th Avenue Vancouver, WA 98665	91-2083459 501(C)(3)		Bleachers for outdoor fields
Secon Catholic College Preparatory High Schoo,9000 NE 64th Avenue Vancouver, WA 98665	91-2083459 501(C)(3)		Scholarship Matching Fund
Share Inc.,2306 NE Andresen Road Vancouver, WA 98661	91-1205119 501(C)(3)		Unrestricted
Share Inc.,2306 NE Andresen Road Vancouver, WA 98661	91-1205119 501(C)(3)		Unrestricted
Share Inc.,2306 NE Andresen Road Vancouver, WA 98661	91-1205119 501(C)(3)		Unrestricted
Share Inc., 2306 NE Andresen Road Vancouver, WA 98661	91-1205119 501(C)(3)		Unrestricted
Share Inc.,2306 NE Andresen Road Vancouver, WA 98661	91-1205119 501(C)(3)		Backpack Program
Share Inc.,2306 NE Andresen Road Vancouver, WA 98661	91-1205119 501(C)(3)		Unrestricted
Share Inc.,2306 NE Andresen Road Vancouver, WA 98661	91-1205119 501(C)(3)		Unrestricted
Share Inc.,2306 NE Andresen Road Vancouver, WA 98661	91-1205119 501(C)(3)		Unrestricted
Share Inc., 2306 NE Andresen Road Vancouver, WA 98661	91-1205119 501(C)(3)		Unrestricted
Share Inc., 2306 NE Andresen Road Vancouver, WA 98661	91-1205119 501(C)(3)		Unrestricted
Share Inc.,2306 NE Andresen Road Vancouver, WA 98661	91-1205119 501(C)(3)		Unrestricted
Share Inc.,2306 NE Andresen Road Vancouver, WA 98661	91-1205119 501(C)(3)		Unrestricted
Share Inc.,2306 NE Andresen Road Vancouver, WA 98661	91-1205119 501(C)(3) 91-205119 501(C)(3)		Unrestricted
Share Inc.,2306 NE Andresen Road Vancouver, WA 98661	91-1205119 501(C)(3) 91-205119 501(C)(3)		Underwriting sponsor for 2021 virtual fundraiser
Share Inc.,2306 NE Andresen Road Vancouver, WA 98661	91-1205119 501(C)(3) 91-205119 501(C)(3)		Unrestricted
Share Inc.,2306 NE Andresen Road Vancouver, WA 98661	91-1205119 501(C)(3) 91-1205119 501(C)(3)		Unrestricted
Share Inc.,2306 NE Andresen Road Vancouver, WA 98661	91-1205119 501(C)(3) 91-1205119 501(C)(3)		Unrestricted
Share Inc.,2306 NE Andresen Road Vancouver, WA 98661	91-1205119 501(C)(3) 91-1205119 501(C)(3)		Share Gala support
Share Inc.,2306 NE Andresen Road Vancouver, WA 98661	91-1205119 501(C)(3)		Unrestricted
Share Inc.,2306 NE Andresen Road Vancouver, WA 98661	91-1205119 501(C)(3) 91-1205119 501(C)(3)		Lincoln Place Support Staffing
Share Hope International,PO Box 65337 Vancouver, WA 98665	91-1938635 501(C)(3)		Unrestricted
Silaren Holpe International, PO Box 65557 Valicouver, WA 96665 Sierra Club Foundation, 2101 Webster Street, Suite 1250 Oakland, CA 94612	94-6069890 501(C)(3)		Unrestricted
Sierra Club Foundation,2101 Webster Street, Suite 1250 Oakland, CA 94612	94-6069890 501(C)(3) 94-6069890 501(C)(3)		Unrestricted
Skemania Economic Development Council,PO Box 436 Stevenson, WA 98648-0436	91-1302610 501(C)(3)		Rhapsody Outdoor Musical Instruments
Skamania Economic Development Council, PO Box 436 Stevenson, WA 98648-0436 Sound Equine Options, PO Box 1150 Gresham, OR 97030	27-1064431 501(C)(3)		Unrestricted
South Pacific County Humane Society, PO Box 101 Long Beach, WA 98631	91-1187417 501(C)(3)		Unrestricted
South Pacific County Humane Society,PO Box 101 Long Beach, WA 98631 Southwest Washington Center for the Arts,PO Box 61909 Vancouver, WA 98666	20-0598676 501(C)(3)		Operating Expenses
Southwest Washington Center for the Arts,PO Box 61909 Vancouver, WA 98666	20-0598676 501(C)(3)		Operating Expenses
Southwest Washington Center for the Arts,PO Box 61909 Vancouver, WA 98666 Southwest Washington Center for the Arts,PO Box 61909 Vancouver, WA 98666	20-0598676 501(C)(3) 20-0598676 501(C)(3)		Operating Expenses
			Operating Expenses
Southwest Washington Center for the Arts,PO Box 61909 Vancouver, WA 98666	20-0598676 501(C)(3) 20-0598676 501(C)(3)		Operating Expenses
Southwest Washington Center for the Arts,PO Box 61909 Vancouver, WA 98666		17,000	Operating Expenses
Southwest Washington Center for the Arts,PO Box 61909 Vancouver, WA 98666	20-0598676 501(C)(3) 20-0598676 501(C)(3)		Operating Expenses
Southwest Washington Center for the Arts,PO Box 61909 Vancouver, WA 98666 Southwest Washington Center for the Arts,PO Box 61909 Vancouver, WA 98666			Operating Expenses
			Operating Expenses
Southwest Washington Center for the Arts,PO Box 61909 Vancouver, WA 98666	20-0598676 501(C)(3)	17,000	Operating Expenses
Southwest Washington Center for the Arts,PO Box 61909 Vancouver, WA 98666	20-0598676 501(C)(3)		Operating Expenses
Southwest Washington Symphony,PO Box 1011 Longview, WA 98632	91-1078525 501(C)(3)		Scholarships
Southwest Washington Symphony,PO Box 1011 Longview, WA 98632	91-1078525 501(C)(3)		Cowlitz Children's Concerts
Southwest Washington Symphony,PO Box 1011 Longview, WA 98632	91-1078525 501(C)(3)		Unrestricted
SPCA of Northern Nevada,4950 Spectrum Blvd. Reno, NV 89512-3902	88-0386601 501(C)(3)		Sweats Campaign-Matching Dollars
Special Olympics Oregon,8313 SW Cirrus Dr. Beaverton, OR 97008-5900	93-0752969 501(C)(3)		Unrestricted
Special Olympics Oregon, 8313 SW Cirrus Dr. Beaverton, OR 97008-5900	93-0752969 501(C)(3)		Unrestricted
Special Olympics Washington, 2815 2nd Avenue, Suite 370 Seattle, WA 98121	91-0962383 501(C)(3)		Unrestricted
Special Olympics Washington, 2815 2nd Avenue, Suite 370 Seattle, WA 98121	91-0962383 501(C)(3)		Unrestricted
Special Olympics Washington, 2815 2nd Avenue, Suite 370 Seattle, WA 98121	91-0962383 501(C)(3)		Unrestricted
St. Andrew Lutheran Church,5607 NE Gher Road Vancouver, WA 98662-6152	91-1034819 501(C)(3)		Homeless Shelter Needs
St. Andrew Lutheran Church,5607 NE Gher Road Vancouver, WA 98662-6152	91-1034819 501(C)(3)		Homeless Shelter Needs
St. Andrew Lutheran Church, 5607 NE Gher Road Vancouver, WA 98662-6152	91-1034819 501(C)(3)		Homeless Shelter Needs
St. Andrew Lutheran Church,5607 NE Gher Road Vancouver, WA 98662-6152	91-1034819 501(C)(3)		Homeless Shelter Needs
St. Andrew Lutheran Church,5607 NE Gher Road Vancouver, WA 98662-6152	91-1034819 501(C)(3)		Homeless Shelter Needs
St. Andrew Lutheran Church,5607 NE Gher Road Vancouver, WA 98662-6152	91-1034819 501(C)(3)		Homeless Shelter Needs
St. Andrew Nativity School,PO Box 11127 Portland, OR 97212	93-1291049 501(C)(3)		Unrestricted
St. Francis of Assisi Catholic Church, 2450 NE 27th Street Bend, OR 97701	56-2302037 501(C)(3)		Historic church
St. James' Episcopal Church, PO Box 278 Kamuela, HI 96743	99-0287244 501(C)(3)		Building Fund
St. Joseph Catholic School,6500 Highland Drive Vancouver, WA 98661	91-0602266 501(C)(3)		Tuition Assistance
St. Joseph Catholic School,6500 Highland Drive Vancouver, WA 98661	91-0602266 501(C)(3)		Unrestricted
St. Jude Children's Research Hospital,501 St. Jude Place Memphis, TN 38105	35-1044585 501(C)(3)		Unrestricted
St. Jude Children's Research Hospital,501 St. Jude Place Memphis, TN 38105	35-1044585 501(C)(3)		Unrestricted
St. Manu's Home for Pour 16525 SW Tualatin Valloy Huny Popyorton, OD 07002 5142	93-0391626 501(C)(3)	10,000	Unrestricted
St. Mary's Home for Boys,16535 SW Tualatin Valley Hwy Beaverton, OR 97003-5143			
St. Paul Lutheran Church,1309 Franklin Street Vancouver, WA 98660-3509	91-6000852 501(C)(3)		Homeless Shelter Needs
St. Paul Lutheran Church,1309 Franklin Street Vancouver, WA 98660-3509 St. Paul Lutheran Church,1309 Franklin Street Vancouver, WA 98660-3509	91-6000852 501(C)(3) 91-6000852 501(C)(3)	2,500	Homeless Shelter Needs
St. Paul Lutheran Church,1309 Franklin Street Vancouver, WA 98660-3509 St. Paul Lutheran Church,1309 Franklin Street Vancouver, WA 98660-3509 St. Paul Lutheran Church,1309 Franklin Street Vancouver, WA 98660-3509	91-6000852 501(C)(3) 91-6000852 501(C)(3) 91-6000852 501(C)(3)	2,500 2,500	Homeless Shelter Needs Homeless Shelter Needs
St. Paul Lutheran Church,1309 Franklin Street Vancouver, WA 98660-3509 St. Paul Lutheran Church,1309 Franklin Street Vancouver, WA 98660-3509	91-6000852 501(C)(3) 91-6000852 501(C)(3)	2,500 2,500	Homeless Shelter Needs

St. Paul Lutheran Church,1309 Franklin Street Vancouver, WA 98660-3509	91-6000852	501(C)(3)	2 500	Homeless Shelter Needs
St. Paul Lutheran Church,PO Box 847 Castle Rock, WA 98611	91-0000852	501(C)(3)		Support for needy people in Cowlitz County
St. Vincent de Paul,2456 NE Stapleton Road Vancouver, WA 98661	91-1312923	501(C)(3)		Unrestricted
St. Vincent de Paul,2450 NE Stapleton Road Vancouver, WA 98061	91-1312923	501(C)(3)		Unrestricted
St. Vincent de Paul,2456 NE Stapleton Road Vancouver, WA 98661	91-1312923	501(C)(3)		Pantry
St. Vincent de Paul,2456 NE Stapleton Road Vancouver, WA 98661	91-1312923	501(C)(3)		Unrestricted
St. Vincent de Paul, 2456 NE Stapleton Road Vancouver, WA 98661	91-1312923	501(C)(3)		For rental assistance and eviction prevention supports
Stageworks Northwest,PO Box 2034 Longview, WA 98632	91-1995285	501(C)(3)		Unrestricted
Stephen's Place,501 SE Ellsworth Road Vancouver, WA 98664	38-4022173	501(C)(3)		Unrestricted
Stephen's Place,501 SE Ellsworth Road Vancouver, WA 98664	38-4022173	501(C)(3)	2,500	Unrestricted
Stephen's Place,501 SE Ellsworth Road Vancouver, WA 98664	38-4022173	501(C)(3)	10,000	Unrestricted
Stephen's Place,501 SE Ellsworth Road Vancouver, WA 98664	38-4022173	501(C)(3)	163,019	General Operating Support
Stephen's Place,501 SE Ellsworth Road Vancouver, WA 98664	38-4022173	501(C)(3)		General Operating Support
Stephen's Place,501 SE Elisworth Road Vancouver, WA 98664	38-4022173	501(C)(3)		General Operating Support for I/DD Housing
Stephen's Place,501 SE Ellsworth Road Vancouver, WA 98664	38-4022173	501(C)(3)		Stephen's Place General Operating Support
Teach One to Lead One,PO Box 790 Vancouver, WA 98666	58-2272902	501(C)(3)		Unrestricted
Teach One to Lead One,PO Box 790 Vancouver, WA 98666	58-2272902	501(C)(3)		Unrestricted-Clark County
Teach One to Lead One,PO Box 790 Vancouver, WA 98666	58-2272902	501(C)(3)		Unrestricted
Teach One to Lead One,PO Box 790 Vancouver, WA 98666	58-2272902	501(C)(3)		Mill Plain Elementary Project
Teach One to Lead One,PO Box 790 Vancouver, WA 98666	58-2272902	501(C)(3)		Digital Platform - Teach One to Lead One National
Teach One to Lead One,PO Box 790 Vancouver, WA 98666	58-2272902	501(C)(3)		Teach One to Lead One National - Unrestricted
The Arc Of Spokane,320 E 2Nd Ave Spokane, WA 99202-1402 The Carter Center,Attn: Donor Services 453 John Lewis Freedom Parkway NE Atlanta, GA 30307-1406	91-0716160 58-1454716	501(C)(3)		Person-Centered Approach to Community Advocacy Unrestricted
The Carter Center, Atth: Donor Services 433 John Lewis Freedom Parkway NE Atlanta, GA 30307-1406 The Cat's Meow, PO Box 1232 Anacortes, WA 98221	20-0704049	501(C)(3) 501(C)(3)		Unrestricted
The Giving Closet, 2804 A NE 65th Avenue, Bldg A Vancouver, WA 98661	20-0704049	501(C)(3) 501(C)(3)		Unrestricted
The Giving Closet, 2804 A NE 65th Avenue, Bidg A Vancouver, WA 98661	27-3207322	501(C)(3)		Unrestricted
The Giving Closet, 2004 A NE 65th Avenue, Bldg A Vancouver, WA 98661	27-3207322	501(C)(3)		Unrestricted
The Giving Closet, 2804 A NE 65th Avenue, Bldg A Vancouver, WA 98661	27-3207322	501(C)(3)		Unrestricted
The Historic Trust General 0.0. Howard House 750 Anderson Street Vancouver, WA 98661	91-1937645	501(C)(3)		Unrestricted
The Historic Trust, General O.O. Howard House 750 Anderson Street Vancouver, WA 98661	91-1937645	501(C)(3)		
The Historic Trust, General O.O. Howard House 750 Anderson Street Vancouver, WA 98661	91-1937645	501(C)(3)		Unrestricted
The Historic Trust, General O.O. Howard House 750 Anderson Street Vancouver, WA 98661	91-1937645	501(C)(3)	2,000	Unrestricted
The Historic Trust, General 0.0. Howard House 750 Anderson Street Vancouver, WA 98661	91-1937645	501(C)(3)	2,500	WWII Exhibit Fighting for the Right to Fight exhibit
The Historic Trust, General O.O. Howard House 750 Anderson Street Vancouver, WA 98661	91-1937645	501(C)(3)		Saluting Our Heroes
The Historic Trust, General O.O. Howard House 750 Anderson Street Vancouver, WA 98661	91-1937645	501(C)(3)		
The Historic Trust, General O.O. Howard House 750 Anderson Street Vancouver, WA 98661	91-1937645	501(C)(3)		Providence Academy Campaign
The Noble Foundation,PO Box 394 Kelso, WA 98626	20-4683123	501(C)(3)		For COVID-19 related support
The Salvation Army,1500 NE 112th Avenue Vancouver, WA 98684	94-1156347	501(C)(3)		Unrestricted
The Salvation Army,1500 NE 112th Avenue Vancouver, WA 98684	94-1156347	501(C)(3)		Unrestricted
The Salvation Army,1500 NE 112th Avenue Vancouver, WA 98684	94-1156347	501(C)(3)		Unrestricted
The Salvation Army,1500 NE 112th Avenue Vancouver, WA 98684	94-1156347	501(C)(3)		Unrestricted
The Salvation Army,1500 NE 112th Avenue Vancouver, WA 98684 The Salvation Army,1500 NE 112th Avenue Vancouver, WA 98684	94-1156347 94-1156347	501(C)(3) 501(C)(3)		Unrestricted Unrestricted
The Salvation Army,1500 NE 112th Avenue Vancouver, WA 98684	94-1156347			Adopt-A-Family Program
The Wave Foundation 2000 NE 67th Avenue Portland, OR 97213	84-3224211	501(C)(3) 501(C)(3)		NORTHWEST TRIBAL NATION FOOD PROGRAM
Tides Foundation/NAACP Collective Action Fund,PO Box 399389 San Francisco, CA 94139-9389	46-3764546	501(C)(3)		
Trauma Intervention Program of Portland/Vancouver Inc.,4800 NE 122nd Avenue Portland, OR 97230	204757054	501(C)(3)		
Trinity Academy,7424 N Mississippi Avenue Portland, OR 97217	85-0767110	501(C)(3)		Development Office
Unity Center,PO Box 822292 Vancouver, WA 98682	45-4869812	501(C)(3)		Kids in Search of Success (KISS)
Unity Center,PO Box 822292 Vancouver, WA 98682	45-4869812	501(C)(3)		For COVID-19 related support
University Of California Los Angeles Foundation, Athletic Department PO Box 7145 Pasadena, CA 91109-9903	95-2250801	501(C)(3)	10,000	Athletic Department: Designated for Women's Gymnastics Fund #50750C
University Of California Los Angeles Foundation, Athletic Department PO Box 7145 Pasadena, CA 91109-9903	95-2250801	501(C)(3)	10,000	Mo Ostin Basketball Center
University of Washington Foundation, Box 359505 Seattle, WA 98195-9505	94-3079432	501(C)(3)		Do It Scholar; Scholarship specifically for those who are blind and visually impaired
University of Washington Foundation, Box 359505 Seattle, WA 98195-9505	94-3079432	501(C)(3)	75,000	Regional Expansion of Artificial Intelligence-Driven Breast Cancer Screening Efforts
University of Washington Foundation,Box 359505 Seattle, WA 98195-9505	94-3079432	501(C)(3)	75,000	Therapeutic Target and Biomarker Discovery for Adult Rhabdomyosarcoma (RMS)
University of Washington Foundation,Box 359505 Seattle, WA 98195-9505	94-3079432	501(C)(3)		Using spatial genomics to predict progression of lobular carcinoma in situ to invasive breast cancer
University of Washington Foundation,Box 359505 Seattle, WA 98195-9505	94-3079432	501(C)(3)		Why are young patients with no risk factors developing oral tongue squamous cell carcinoma?
University of Washington Foundation,Box 359505 Seattle, WA 98195-9505	94-3079432	501(C)(3)		Predicting Medication-Resistant and Atypical Pituitary Adenomas using A Cell-Free DNA Approach
University of Washington Foundation, Box 359505 Seattle, WA 98195-9505	94-3079432	501(C)(3)		Developing new brain cancer treatments through measurement and modulation of neural activity
University of Washington Foundation, Box 359505 Seattle, WA 98195-9505	94-3079432	501(C)(3)		Defining bladder cancer metastasis at a single cell resolution for therapeutic discovery
University of Washington Foundation, Box 359505 Seattle, WA 98195-9505	94-3079432	501(C)(3)		Optimal dose and frequency of immune checkpoint inhibitors in cancer patients
University of Washington Foundation, Box 359505 Seattle, WA 98195-9505	94-3079432	501(C)(3)		Comprehensive Cancer & Transplant Consult Clinic and National Collaborative Bioregistry
University of Washington Foundation,Box 359505 Seattle, WA 98195-9505	94-3079432 94-3079432	501(C)(3)		Developing the Basis for Precision Modification of Gut Microbiome to Improve Cancer Immunotherapy
University of Washington Foundation,Box 359505 Seattle, WA 98195-9505 University of Washington Foundation,Box 359505 Seattle, WA 98195-9505	94-3079432	501(C)(3) 501(C)(3)		Uncovering the Progression from Clonal Hematopoiesis to Leukemia
University of Washington Foundation, Box 359505 Seattle, WA 98195-9505 University of Washington Foundation, Box 359505 Seattle, WA 98195-9505	94-3079432	501(C)(3) 501(C)(3)		Reactivating epigenetically silenced tumor suppressors to inhibit melanoma growth Targeting metabolic vulnerability of tumor-derived extracellular vesicles
University of Washington Foundation, Box 359505 Seattle, WA 95195-9505	94-3079432	501(C)(3)		Reevaluation of TVUS to Improve Early Detection of Endometrial Cancer Among US Black Women
University of Washington Foundation, box 535305 Seattle, WA 95155-5505 University of Washington Foundation, Box 359505 Seattle, WA 98195-9505	94-3079432	501(C)(3)		Discovery Omics for Targeted Treatment for Orphan Brain Cancers
University of Washington Foundation, Box 359505 Seattle, WA 95155 5555	94-3079432	501(C)(3)		Increasing Native Radiation Oncology Access: Disparities and Solutions
University of Washington Foundation, Box 359505 Scattle, WA 98195-9505	94-3079432	501(C)(3)		Revolutionizing Cancer Treatment with Flash Radiation
Vancouver Audubon Society,PO Box 1966 Vancouver, WA 98668-1966	51-0191929	501(C)(3)		General Operating Support
Vancouver Church,3300 NE 78th Street Vancouver, WA	91-0750397	501(C)(3)		Unrestricted
Vancouver Church, 3300 NE 78th Street Vancouver, WA		501(C)(3)		Yum Truck Ministry
			. 2,500	

ancouver Church,3300 NE 78th Street Vancouver, WA ancouver Housing Authority,2500 Main Street, Suite 200 Vancouver, WA 98660-2697	91-0750397 26-1954068	501(C)(3) Government		VC Church Plant FTE support for HHIP 2021
ancouver Housing Authority,2500 Main Street, Suite 200 Vancouver, WA 98660-2697 ancouver Police Department Headquarters,Attn: VPD Finance Unit for K9 Fund 605 E Evergreen Boulevard Vancouver, WA 98661	20-1954068	Government		FIE support for HHIP 2021 Purchase of dogs, supplies for officers and canines, canine training costs
incouver Police Department Headquarters, Attn: VPD Finance Unit for K9 Fund 605 E Evergreen Boulevard Vancouver, WA 98661 ancouver School of Arts & Academics.3101 Main Street Vancouver. WA 98663	91-6001540	Government		Purchase of dogs, supplies for officers and canines, canine training costs Artists in Residence
ancouver School of Arts & Academics, 3101 Main Street Vancouver, WA 98663	91-6001540	Government		Artists in Residence
ancouver School of Arts & Academics,3101 Main Street Vancouver, WA 98663	91-6001540	Government		Dance, Literary Arts, Moving Image Arts, Music, Technical Theater, Theater, Visual Arts
ancouver Symphony Orchestra, PO Box 525 Vancouver, WA 98666-0525	91-1281734	501(C)(3)		Unrestricted
Ancouver Symphony Orchestra, PO Box 525 Vancouver, WA 98666-0525	91-1281734	501(C)(3)		Unrestricted
ancouver Symphony Orchestra,PO Box 525 Vancouver, WA 98666-0525	91-1281734	501(C)(3)		Unrestricted
ancouver Symphony Orchestra,PO Box 525 Vancouver, WA 98666-0525	91-1281734	501(C)(3)		Unrestricted
ancouver Symphony Orchestra, PO Box 525 Vancouver, WA 98666-0525	91-1281734	501(C)(3)		Unrestricted
ancouver symphony Orchestra, PO Box 525 Vancouver, WA 98666-0255	91-1281734	501(C)(3)		Unrestricted
ancouver symphony Orchestra, PO Box 525 Vancouver, WA 98666-0525	91-1281734	501(C)(3)		Young Artist Concerto Competition
ancouver Symphony Orchestra, PO Box 525 Vancouver, WA 98666-0525	91-1281734	501(C)(3)		2022 VSO Series
ancouver's Downtown Association,811 Main Street Vancouver, WA 98660	91-1816711	501(C)(3)		Designated for Vancouver's Grow 360 Project
enice Theatre Inc,140 Tampa Ave W Venice, FL 34285-1727	59-6005807	501(C)(3)		Jervey Season Sponsor
eterans of Foreign Wars Foundation,406 W. 34th Street Kansas City, MO 64111	43-1758998	501(C)(3)		Unrestricted
eterans of Foreign Wars Foundation,406 W. 34th Street Kansas City, MO 64111	43-1758998	501(C)(3)		Unrestricted
ictory Academy,PO Box 428 Tualatin, OR 97068	36-4642494	501(C)(3)		Hold on Tight event Nov 6, 2021
ietnamese Community of Clark County,2805 NE 184th Ave. Vancouver, WA 98682	59-3795746	501(C)(3)		For COVID-19 related support
isiting Nurses Foundation/Assured Home Health & Hospice Foundation,222 S Pearl Street Centralia, WA 98531	91-1467848	501(C)(3)		Assured Home Health and Hospice Foundation
Vashington Advocates of Deaf and Hard of Hearing,301 SE Hearthwood Blvd Vancouver, WA 98684	91-1467848 94-3144885	501(C)(3) 501(C)(3)		Assured Home Health and Hospice Foundation Case Management for Basic Needs
Vashington Elks Therapy Program for Children, PO Box 110760 Tacoma, WA 98411-0760	91-0647950	501(C)(3)		Unrestricted
Vashington Gorge Action Programs,PO Box 805 Bingen, WA 98605	91-0793062	501(C)(3)		Skamania County Shelter
Vashington State University Foundation, PO Box 641925 Pullman, WA 99164-1925	91-1075542	501(C)(3)		WSU-Vancouver: two \$3,000 scholarships for women concentrating on STEM subjects
Vashington State University Foundation, PO Box 641925 Pullman, WA 99164-1925	91-1075542	501(C)(3)		Unrestricted
Vashington State University Foundation,PO Box 641925 Pullman, WA 99164-1925	91-1075542	501(C)(3)		Enhancing Career and Education Pathways for Opportunity Youth
Vatershed Alliance of Southwest Washington, PO Box 177 Vancouver, WA 98666	26-1506315	501(C)(3)		Unrestricted
VayFM,PO Box 871597 1400 NE 136th Ave. Suite 201 Vancouver, WA 98684	59-2659856	501(C)(3)		Vancouver, WA: Programming
VayFM,PO Box 871597 1400 NE 136th Ave. Suite 201 Vancouver, WA 98684	59-2659856	501(C)(3)		WayFM - Vancouver, WA
Vhy Community,1011 Broadway St Vancouver, WA 98660-3236	82-0601374	501(C)(3)		Unrestricted
Villamette Valley Cancer Foundation,2700 SE Stratus Avenue, Suite A McMinnville, OR 97128	32-0000467	501(C)(3)		Unrestricted
Voodland Presbyterian Church,PO Box 297 Woodland, WA 98674	91-0598804	501(C)(3)		Unrestricted
Voodland Presbyterian Church,PO Box 297 Woodland, WA 98674	91-0598804	501(C)(3)		Unrestricted
Voodland Presbyterian Church,PO Box 297 Woodland, WA 98674	91-0598804	501(C)(3)		Unrestricted
Voodland Presbyterian Church,PO Box 297 Woodland, WA 98674	91-0598804	501(C)(3)		Unrestricted
Voodland School District,800 Second Street Woodland, WA 98674-8467	91-0990036	Government		For COVID-19 related support
Vorkforce Southwest Washington,805 Broadway Street, Suite 412 Vancouver, WA 98660	01-0726348	501(C)(3)		Existing and new youth career development programs in Clark and Cowlitz Counties
Vycliffe Bible Translators,PO Box 628200 Orlando, FL 32862-8200	95-1831097	501(C)(3)		Unrestricted
oung Life Clark County,PO Box 65171 Vancouver, WA 98665-0006	84-0385934	501(C)(3)	250	Support OHM Club
oung Life Clark County,PO Box 65171 Vancouver, WA 98665-0006	84-0385934	501(C)(3)	250	Young Life Clark Co - OHM Club
oung Life Clark County,PO Box 65171 Vancouver, WA 98665-0006	84-0385934	501(C)(3)		Support OHM Club
oung Life Clark County,PO Box 65171 Vancouver, WA 98665-0006	84-0385934	501(C)(3)		Support OHM Club
oung Life Clark County,PO Box 65171 Vancouver, WA 98665-0006	84-0385934	501(C)(3)		Young Life Clark Co
oung Life Clark County,PO Box 65171 Vancouver, WA 98665-0006	84-0385934	501(C)(3)	2,000	Capernaum
oung Life Clark County,PO Box 65171 Vancouver, WA 98665-0006	84-0385934	501(C)(3)		Unrestricted
oung Life Clark County,PO Box 65171 Vancouver, WA 98665-0006	84-0385934	501(C)(3)	3,000	Clark County Young Life
oung Life Clark County,PO Box 65171 Vancouver, WA 98665-0006	84-0385934	501(C)(3)	3,000	Washington Family Young Life
oung Life Clark County,PO Box 65171 Vancouver, WA 98665-0006	84-0385934	501(C)(3)		Annual Banquet Sponsor
oung Life Clark County, PO Box 65171 Vancouver, WA 98665-0006	84-0385934	501(C)(3)		Young Life Washington Family Camp
oung Life Clark County,PO Box 65171 Vancouver, WA 98665-0006	84-0385934	501(C)(3)		Clark Co Young Life-Golf Tournament Sponsor
oung Life McMinnville,PO Box 1273 McMinnville, OR 97128-1273	84-0385934	501(C)(3)		Unrestricted
ung Life McMinnville,PO Box 1273 McMinnville, OR 97128-1273	84-0385934	501(C)(3)		Unrestricted
outh and Family Link,907 Douglas Street Longview, WA 98632	91-0726260	501(C)(3)		For COVID-19 related support
outh and Family Link,907 Douglas Street Longview, WA 98632	91-0726260	501(C)(3)		Neighborhood Resource Coordinaton Council: Emergency supports for families
WCA Clark County, PO Box 2206 Vancouver, WA 98663	91-0569882	501(C)(3)		Educational opportunities for women who are survivors or domestic violence/sexual assault
WCA Clark County, PO Box 2206 Vancouver, WA 98663	91-0569882	501(C)(3)		Unrestricted
WCA Clark County, PO Box 2200 Vancouver, WA 98663	91-0569882	501(C)(3)		Unrestricted
WCA Clark County,PO Box 2206 Vancouver, WA 98663	91-0569882	501(C)(3)		Unrestricted
WCA Clark County,PO Box 2206 Vancouver, WA 98663	91-0569882	501(C)(3)		Unrestricted
WCA Clark County,PO Box 2206 Vancouver, WA 98663	91-0569882	501(C)(3)		Sexual Assault Program
WCA Clark County,PO Box 2206 Vancouver, WA 98663 WCA Clark County,PO Box 2206 Vancouver, WA 98663	91-0569882	501(C)(3) 501(C)(3)		Sexual Assault Program GiveMore24! Matching Grant
WCA Clark County,PO Box 2206 Vancouver, WA 98663 WCA Clark County,PO Box 2206 Vancouver, WA 98663				
	91-0569882	501(C)(3)		Unrestricted
WCA Clark County,PO Box 2206 Vancouver, WA 98663	91-0569882	501(C)(3)		Unrestricted
WCA Clark County, PO Box 2206 Vancouver, WA 98663	91-0569882	501(C)(3)		Y Now Campaign Challenge
WCA Clark County, PO Box 2206 Vancouver, WA 98663	91-0569882	501(C)(3)		SafeChoice Domestic Violence Shelter; Independent Living Skills Program
WCA Clark County,PO Box 2206 Vancouver, WA 98663	91-0569882	501(C)(3)		Y Now Challenge Campaign
WCA Clark County,PO Box 2206 Vancouver, WA 98663	91-0569882	501(C)(3)		Y Now Challenge Campaign
WCA Clark County,PO Box 2206 Vancouver, WA 98663	91-0569882	501(C)(3)		Y Now Challenge Campaign
WCA Clark County,PO Box 2206 Vancouver, WA 98663	91-0569882	501(C)(3)		Y Now Challenge
WCA Clark County,PO Box 2206 Vancouver, WA 98663	91-0569882	501(C)(3)		Advancement of social justice in southwest Washington
	93-0386984	501(C)(3)	84.480	Red Sea Road Consulting for the advancement of social justice in southwest Washington
WCA of Greater Portland,PO Box 4587 Portland, OR 97208	53-0380584	301(0)(3)		

Line 2 Number 501(C)(3) and Govt organizations li	303
Line 3 Number Other organizations listed above	1

SCH	С	OMB No. 1545-0047									
(Forn	d Employees	^{es} 2021									
		Complete if the organization answered 'Yes' on Form 990, Part IV, line 23		One of the Dark line							
Departi Interna	ment of the Treasury I Revenue Service	Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information		Open to Public Inspection							
-	Name of the organization Employer identificat										
		NDATION FOR SW WASHINGTON	91-1246778								
Par	I Question	s Regarding Compensation									
1 a	Check the approp VII, Section A, li	riate box(es) if the organization provided any of the following to or for a person listed on For ne 1a. Complete Part III to provide any relevant information regarding these items.	orm 990, Part		Yes	No					
	First-class or charter travel Housing allowance or residence for personal use										
	Travel for co	mpanions Payments for business use of pers	onal residence								
	Tax indemni	fication and gross-up payments Health or social club dues or initiat	ion fees								
	Discretionary	y spending account Personal services (such as maid, c	hauffeur, chef)								
h	If any of the boxe	s on line 1a are checked, did the organization follow a written policy regarding payment or									
		or provision of all of the expenses described above? If 'No,' complete Part III to expl		1 b							
		tion require substantiation prior to reimbursing or allowing expenses incurred by all icers, including the CEO/Executive Director, regarding the items checked on line 1a ⁻		2							
	Executive Direct	any, of the following the organization used to establish the compensation of the organization or. Check all that apply. Do not check any boxes for methods used by a related organ sation of the CEO/Executive Director, but explain in Part III.	on's CEO/ anization to								
	X Compensatio	on committee Written employment contract									
	Independent	compensation consultant X Compensation survey or study									
	Form 990 of	other organizations X Approval by the board or compens	ation committee								
4	During the year, organization or a	did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the tage a related organization:	filing								
а	Receive a severa	ance payment or change-of-control payment?		4a		Х					
		receive payment from a supplemental nonqualified retirement plan?				X					
		receive payment from an equity-based compensation arrangement? lines 4a-c, list the persons and provide the applicable amounts for each item in Pa		4 c		Х					
	IT TES to any of	intes 4a-c, list the persons and provide the applicable amounts for each term in Pa									
	Only section 50	I(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.									
5	For persons listed contingent on th	l on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compen e revenues of:	sation								
	-	?				Х					
		nization?		5 b		Х					
		or 5b, describe in Part III. I on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compen	sation								
	contingent on th	e net earnings of:									
	Ũ	?				X					
		nization?or 6b, describe in Part III.		6 b		Х					
			1								
/	payments not de	ed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixes scribed on lines 5 and 6? If 'Yes,' describe in Part III.	2u 	7		Х					
	to the initial cont	nts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was s tract exception described in Regulations section 53.4958-4(a)(3)? in Part III		8		Х					
9	If 'Yes' on line 8, section 53.4958-	did the organization also follow the rebuttable presumption procedure described in Regulat 6(c)?	ions	9							
		perwork Reduction Act Notice, see the Instructions for Form 990. Sched									

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 W-2 a	nd/or 1099-MISC and/o	r 1099-NEC compensatio	(D) Nontaxable	(E) Total of columns(B)(i)-(D)	(F) Compensation	
(A) Name and Title	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	benefits	columns(B)(i)-(D)	in column (B) reported as deferred on prior Form 990	
PAM CABANATUAN	(i)	140,338.	0.	0.	9,859.	23,923.	174,120.	0.
1 CFO	(ii)	0.	0.	0.	0.	0.	0.	0.
JENNIFER RHOADS	(i)	195,477.	0.	0.	14,117.	29,778.	239,372.	0.
2 PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.
JANIE SPURGEON	(i)	145,675.	<u> 0.</u>	0.	<u> 10,197.</u>	0.	<u> 155,872.</u>	0.
3 EXEC VP AND CDO	(ii)	0.	0.	0.	0.	0.	0.	0.
4	(i) (ii)						+	
5	(i) (ii)							
	(i)							
6	(ii)							
7	(i) (ii)						+	
8	(i) (ii)							
9	(i) (ii)							
10	(i) (ii)							
11	(i) (ii)							
12	(i) (ii)							
13	(i) (ii)							
14	(i) (ii)							
15	(i) (ii)							
16	(i) (ii)							
ВАА	.,,	I	TEEA4102L 10/27	7/21	1	1	Schedule .	J (Form 990) 2021

91-1246778

Part III Supplemental Information

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

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

► 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.

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

COMMUNITY FOUNDATION FOR SW WASHINGTON Part I Types of Property

Employer identification number
91-1246778

		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Me noncas	(c thod of c h contrib	l) letermir oution a	ing mounts
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	Х	57	1,921,271.	FMV			
10	Securities – Closely held stock	Х	1	9,756,674.				
11	Securities - Partnership, LLC, or trust interests .							
12	Securities – Miscellaneous							
13	Qualified conservation contribution – Historic structures							
14	Qualified conservation contribution – Other							
15	Real estate – Residential							
16	Real estate – Commercial							
17	Real estate – Other							
18	Collectibles							
19	Food inventory.							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts.							
25	Other ► (<u>BEQUEST_RECEIVABLE</u> _)	Х	1	65,000,000.				
26	Other ► (BEQUEST_RECEIVABLE_)	Х	1	428,488.				
27	Other ► (<u>BEQUEST_RECEIVABLE</u> _)	Х	1	462,038.	ESTI	MATE		
28	Other► ()							
29	Number of Forms 8283 received by the organization d				20			
	organization completed Form 8283, Part V, Donee	ACKIIOWIEU	gement		29		Yes	No
30a	During the year, did the organization receive by contri it must hold for at least three years from the date for exempt purposes for the entire holding period?	of the initia	I contribution, and whic	h isn't required to be u		. 30 a	Tes	X
b	If 'Yes,' describe the arrangement in Part II.							
31	Does the organization have a gift acceptance police	cy that requi	ires the review of any n	onstandard contribution	ns?	. 31	Х	
32a	Does the organization hire or use third parties or r contributions?					. 32a		Х
b	If 'Yes,' describe in Part II.							

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

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

Schedule M (Form 990) 2021

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

OMB No. 1545-0047
2021
Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number
91-1246778

COMMUNITY FOUNDATION FOR SW WASHINGTON

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

OUR FORM 990 IS PREPARED BY OUR INDEPENDENT CERTIFIED PUBLIC ACCOUNTANTS USING INFORMATION PROVIDED BY MANAGEMENT AND OBTAINED DURING THEIR AUDIT OF OUR FINANCIAL STATEMENTS. THE FORM 990 IS REVIEWED IN DETAIL BY MANAGEMENT AND SUBMITTED TO THE BOARD FOR REVIEW.

FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS

ANNUALLY, OFFICERS, DIRECTORS AND KEY EMPLOYEES ARE REQUIRED TO SIGN A CONFLICT OF INTEREST DISCLOSURE STATEMENT LISTING ACTUAL AND POTENTIAL CONFLICTS OF INTEREST. ADDITIONALLY, MEMBERS ARE REQUIRED TO CONTEMPORANEOUSLY DISCLOSE ACTUAL AND POTENTIAL CONFLICTS OF INTEREST IN BOARD, COMMITTEE, AND STAFF MEETINGS AS THEY ARISE DURING THE YEAR.

FORM 990, PART VI, LINE 15B - COMPENSATION REVIEW & APPROVAL PROCESS - OFFICERS & KEY EMPLOYEES

AS PART OF THE BUDGETING PROCESS, MANAGEMENT COMPARES CURRENT AND PROPOSED SALARIES AND JOB ACTIVITIES TO LOCAL MARKET RATES, COUNCIL ON FOUNDATION SURVEY RESULTS FOR FOUNDATIONS OUR SIZE, AND OTHER INDEPENDENT INDICATORS. COMPENSATION AND BENEFIT PACKAGES ARE REVIEWED AND APPROVED BY THE FINANCE COMMITTEE AND THE BOARD OF DIRECTORS.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

THE COMMUNITY FOUNDATION PROVIDES OUR 501(C)(3) DETERMINATION LETTER ON OUR WEBSITE AND UPON REQUEST. IN ADDITION, OUR AUDITED FINANCIAL STATEMENTS AND FORM 990 FOR THE PRIOR THREE YEARS ARE AVAILABLE ON OUR WEBSITE AND UPON REQUEST. GUIDESTAR, A NONPROFIT ORGANIZATION, MAKES AVAILABLE THE LAST THREE YEARS OF OUR FORM 990 ON ITS WEBSITE.

Schedule O (Form 990) 2021	Page 2
Name of the organization	Employer identification number
COMMUNITY FOUNDATION FOR SW WASHINGTON	91-1246778

FORM 990, PART XI, LINE 9 OTHER CHANGES IN NET ASSETS OR FUND BALANCES

CHANGES IN TRUSTS,	ANNUITIES	\$ 55,114.
	TOTAL	\$ 55,114.

CONTINUED FROM FORM 990, PART III, 4A

AS A PHILANTHROPIC ADVISOR, WE PROMOTE PHILANTHROPY BY CONNECTING DONORS TO CAUSES THEY CARE ABOUT. IN ADDITION, WE OFFER STRATEGIC ADVICE TO HELP INDIVIDUALS, FAMILIES, AND COMPANIES ACHIEVE THEIR CHARITABLE GOALS. WE PROVIDE OPPORTUNITIES FOR COLLABORATIVE FUNDING AND IMPACT INVESTING THAT APPLY OUR REGION'S CHARITABLE RESOURCES IN EQUITABLE AND EFFECTIVE WAYS. AS A FUNDER, WE INVEST IN AND PARTNER WITH LOCAL NONPROFITS TO ADDRESS PERSISTENT AND EMERGING NEEDS. OUR FOCUS GRANTS PROGRAM IS A CENTRAL PART OF THIS WORK AND OFFERS FUNDING IN THREE IMPACT AREAS: EDUCATIONAL ATTAINMENT, BASIC HUMAN NEEDS AND ASSET BUILDING. THESE GRANTS FOCUS ON ACHIEVING SHARED PROSPERITY BY OPENING UP

OPPORTUNITIES-IN EVERY STAGE OF LIFE-FOR THOSE FACING THE GREATEST BARRIERS AND CHALLENGES IN OUR COMMUNITY.

AS A COMMUNITY PARTNER, WE ENGAGE AND COLLABORATE WITH LOCAL RESIDENTS. WE JOIN, CONVENE AND LEAD COMMUNITY CONVERSATIONS TO DEEPEN OUR KNOWLEDGE OF THOSE WE SERVE AND NURTURE COLLABORATIVE SOLUTIONS THAT TAP INTO OUR RESPECTIVE STRENGTHS.

WORKING IN THESE WAYS, WE FULFILL OUR MISSION AND IMPROVE THE QUALITY OF LIFE FOR EVERYONE IN SOUTHWEST WASHINGTON.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

91-1246778

Department of the Treasury Internal Revenue Service

Name of the organization

^{organization} COMMUNITY FOUNDATION FOR SW WASHINGTON

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

(a) Name, address, and EIN (if applicable) of disregarded en	(b) Primary activity		(c) Legal domicile (state or foreign country)		(d) Total income		(e) End-of-year assets		(f) Direct contro entity		lling	
(1) COMMUNITY_FOUNDSW_WA_CHARITABLE_L 610_ESTHER_STREET_#201 VANCOUVER, WA_98660	CHARITABLE GRANTING		WA		1,406,030.			917,100.	FOU F	MMUNI NDATI OR SV HINGT	EON N	
(2) COMMUNITY_FOUNDSW_WA_CHARITABLE_L 610 ESTHER_STREET_#201 VANCOUVER, WA_98660	CHARITABLE GRANTING			WA		32,838.		275,000.	CON FOU F	MMUNI NDATI OR SV HINGT	TY ION N	
(3) COMMUNITY FOUND. SW WA CHARITABLE LLC #3 610 ESTHER STREET #201 VANCOUVER, WA 98660 Part II Identification of Related Tax-Exempt Organization had one or more related tax-exempt organizations		CHARITABLE GRANTING		Ŵ	WA		0.	0, Part	0.	CON FOU F WAS	MMUNI NDATI OR SV HINGT	TY ION N
(a) Name, address, and EIN of related organization	Prim	(b) Primary activity		(c) Legal domicile (state or foreign country)		Code on	(e) Public charity (if section 501	y status 1(c)(3)) (f) Direct contr entity		olling	(g) Sec 512(controlled	d entity?
(1) SUPPORTING ORGANIZATION OF THE COM 610 ESTHER STREET #201 VANCOUVER, WA 98660 91-6558976		PPORTING		IA	501(C)(3)		12 A		COMMUNI FOUNDAT FOR SI WASHING	ION W	Yes	No X
(2) ROOD FAMILY FOUNDATION 610 ESTHER STREET STE 201 VANCOUVER, WA 98660 82-2345793 (3)		ORGANIZATION SUPPORTING ORGANIZATION		IA	501 (C)							Х
BAA For Paperwork Reduction Act Notice see the Instruct	· · · -				TEE450011 0					tule R (Er		

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

Schedule R (Form 990) 2021 COMMUNITY FOUNDATION FOR SW WASHINGTON

91-1246778 Page 2

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controllir entity	(e) Predominant i (related, unre excluded fror under secti 512-514)	elated, in m tax ons	(f) e of total come	Sha end-c	g) bre of of-year sets	Dispi tior	h) ropor- nate itions? No	(i) Code V-UBI amount in bo 20 of Schedul K-1 (Form 1065)	Gene mana		(k) Percentage ownership
<u>(1)</u>														
<u>(2)</u>	-													
(3) 	-													
Part IV Identification of line 34, because	of Related Organ se it had one or	nizations more rela	Taxable a ated organ	s a Corporationizations treated	on or Trust. d as a corpo	Complete pration or	e if the c trust du	organiza uring the	tion a tax y	nswei vear.	red 'Yes' on	Form 9	90, Pa	rt IV,
(a) Name, address, and EIN	of related organizat	ion Prima	(b) ary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	ntrolling (C corp,		(e) (f) e of entity orp, S corp, or trust)		(g) Share of end-of- year assets		(h) Percentag ownershi	pe Sec contr	(i) 512(b)(13) olled entity? s No
<u>(1)</u>		 												5 110
(2)														

TEEA5002L 09/21/21

(3)

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

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				Yes	No				
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations lis	ted in Parts II-IV?								
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity			. 1a		Х				
b Gift, grant, or capital contribution to related organization(s)									
c Gift, grant, or capital contribution from related organization(s)			. 1c		Х				
d Loans or loan guarantees to or for related organization(s)			. 1 d		Х				
e Loans or loan guarantees by related organization(s)			. 1e		Х				
f Dividends from related organization(s).					Х				
g Sale of assets to related organization(s)					Х				
h Purchase of assets from related organization(s)					Х				
i Exchange of assets with related organization(s)					Х				
j Lease of facilities, equipment, or other assets to related organization(s)			. 1j		Х				
k Lease of facilities, equipment, or other assets from related organization(s)					Х				
Performance of services or membership or fundraising solicitations for related organization(s).					Х				
m Performance of services or membership or fundraising solicitations by related organization(s)				Х	Х				
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)									
o Sharing of paid employees with related organization(s)									
					Х				
p Reimbursement paid to related organization(s) for expenses									
q Reimbursement paid by related organization(s) for expenses.			. 1q		Х				
r Other transfer of cash or property to related organization(s).					Х				
s Other transfer of cash or property from related organization(s)			. 1s	Х					
2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, including cover									
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved) lethod of amount						
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
BAA TEEA50031 09/21/21		Schedul	e R (Forr	n 990)	2021				

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.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unre- lated, excluded from tax under	Are all sec 501(organiz	tion	(f) Share of total income	(g) Share of end-of-year assets	tior	(h) (i) Dispropor- tionate Ilocations? (i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)		(j) General or managing partner?		(k) Percentage ownership
			from tax under sections 512-514)	Yes	No			Yes	No	(Yes	No	t
(1)													
	-												
(2)													
	-												
(3)													
	-												
(4)													
	-												
(5)													
	-												
(6)													
	-												
	1												
	-												
(8)													
··]												
	-												
RAA										Schedu			

BAA

Part VII Supplemental Information

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

Page 5

91-1246778

Continuation Page 1 of 1

2021

Name of filing organization

COMMUNITY FOUNDATION FOR SW WASHINGTON

Employer identification number

91-1246778

Part I Continuation of Identification of Disregarded Entities

(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
COMMUNITY FOUND. SW WA CHARITABLE LLC #4 610 ESTHER STREET #201 VANCOUVER, WA 98660	CHARITABLE GRANTING	WA	0.	0.	COMMUNITY FOUNDATION FOR SW WASHINGTON
	TEEA5101L 09	0/23/21		Schedule R	Cont (Form 990) 2021

Form	8868

(Rev. January 2022) Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

OMB No. 1545-0047

► File a separate application for each return.

Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits*.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

 Name of exempt organization or other filer, see instructions.

		· [··]· · · · · · · · · · · · · · · · ·
Type or print	COMMUNITY FOUNDATION FOR SW WASHINGTON	91-1246778
File by the	Number, street, and room or suite number. If a P.O. box, see instructions.	
due date for filing your	610 ESTHER STREET #201	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
instructions.	VANCOUVER, WA 98660	
Enter the Ret	urn Code for the return that this application is for (file a separate application for each return)	

Application Is For		Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (section 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12
Form 990-T (corporation)	07		

	Telephone No. ► (360) 694-2550 Fax No. ►	_
•	If the organization does not have an office or place of business in the United States, check this box	
•	If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group,	
	check this box	ſS
	the extension is for.	
	1 I request an automatic 6-month extension of time until $11/15$, 20 22 , to file the exempt organization return	
	for the organization named above. The extension is for the organization's return for:	

•	Х	calendar year	20	21	or
	Λ	calenual year	20	2 I	01

►		tax year beginning	, 20	, and ending	, 20	
---	--	--------------------	------	--------------	------	--

2	If the tax year entered in line 1 is for less than 12 months, check reason:	Initial return	Final return
	Change in accounting period		 1

3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	3a	\$ 0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit	3b	\$ 0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	3c	\$0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

BAA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2022)

_	-orm 990-T	Exempt Organization Business Income Tax Return	ļ	OMB No. 1545-0047
ł	-orm 330-1	(and proxy tax under section 6033(e))		2021
		For calendar year 2021 or other tax year beginning, 2021, and ending, ► Go to www.irs.gov/Form9907 for instructions and the latest information.		
Depa	artment of the Treasury nal Revenue Service	 Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3). 		Open to Public Inspection for 501(c)(3) Organizations Only
A	Check box if	Check box if name changed and see instructions.)	D En	nployer identification number
	address changed Exempt under sectio		- c	91-1246778
		or 610 ESTHER STREET #201	FG	roup exemption number ee instructions)
	X 501(C)(3)	Type VANCOUVER, WA 98660	(-	
	408(e) 220(F	Check box if an amended return.
1	408A 530		L	
	529(a) 529/			
		type X 501(c) corporation 501(c) trust 401(a) trust Other trust		
-	Check if filing only t			
		organization filing a consolidated return with a 501(c)(2) titleholding corporation	••••	
		was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group	- 	⊥ ►∏Yes XINo
	0	ame and identifying number of the parent corporation ►	p	► Yes X No
		e of PAM CABANATUAN 610 ESTHER STREET VANCOUVER WA 98660Telephone number	► (2	60) 694-2550
			()	00) 094 200
		elated Business Taxable Income		
1		business taxable income computed from all unrelated trades or businesses (see	1	-54,738.
2	Reserved		2	01/1001
3			3	-54,738.
4		utions (see instructions for limitation rules)	4	
5		siness taxable income before net operating losses. Subtract line 4 from line 3	5	-54,738.
6		operating loss. See instructions	6	
7		business taxable income before specific deduction and section 199A deduction. m line 5	7	-54,738.
8		(generally \$1,000, but see instructions for exceptions).	8	1,000.
9	•	19A deduction. See instructions	9	1,000.
10		Add lines 8 and 9	10	1,000.
11		ss taxable income. Subtract line 10 from line 7. If line 10 is greater than line 7,	11	
D-			11	0.
				I
		able as corporations. Multiply Part I, line 11 by 21% (0.21).	1	0.
2	Trusts taxable at Part I, line 11 from:	trust rates. See instructions for tax computation. Income tax on the amount on Tax rate schedule or Schedule D (Form 1041)	2	
3	,	structions	3	
4	•	s. See instructions	4	<u> </u>
5		um tax (trusts only)	5	
6	Tax on noncompl	iant facility income. See instructions.	6	
7	Total. Add lines 3	3 through 6 to line 1 or 2, whichever applies	7	0.
BA	A For Paperwork Re	eduction Act Notice, see instructions.		Form 990-T (2021)

-	990-T (2021) COMMUNITY FOUNDATION FOR SW WASHINGTON	91	-1246778	P	age 2
Par	t III Tax and Payments				
1a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	1a			
		1b			
С		1c			
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	1d			
е	Total credits. Add lines 1a through 1d.		1e		0.
2	Subtract line 1e from Part II, line 7.		2		0.
3	Other amounts due. Check if from: Form 4255 Form 8611 Form 8697				
	Other (attach statement)		3		
4		sly deferred under			
_	section 1294. Enter tax amount here.		4		0.
5	Current net 965 tax liability paid from Form 965-A, Part II, column (k)		5		
		<u>6a</u>	-		
		6b	-		
		6c	-		
		6d			
		6e 6f			
	Credit for small employer health insurance premiums (attach Form 8941) Other credits, adjustments, and payments: Form 2439	10	-		
9		6g			
7	□ Form 4136 □ Other Total ▶ Total payments. Add lines 6a through 6g Total ▶	•	7		0.
8	Estimated tax penalty (see instructions). Check if Form 2220 is attached		8		0.
9	Tax due. If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed .		9		
10			10		
	Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount over Enter the amount of line 10 you want: Credited to 2022 estimated tax ►		10 11		
10 11	Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount over Enter the amount of line 10 you want: Credited to 2022 estimated tax ►	verpaid► Refunded ►	-		
10	Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount over Enter the amount of line 10 you want: Credited to 2022 estimated tax ► t IV Statements Regarding Certain Activities and Other Information	verpaid► Refunded ► ion (see instructions)	11	Yes	No
10 11 Par	Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount over Enter the amount of line 10 you want: Credited to 2022 estimated tax ►	erpaid► Refunded ► ion (see instructions) signature or other authority ov	11 ver a	Yes	No
10 11 Par	Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount over Enter the amount of line 10 you want: Credited to 2022 estimated tax ► t IV Statements Regarding Certain Activities and Other Information At any time during the 2021 calendar year, did the organization have an interest in or a statement of the s	verpaid► Refunded ► ion (see instructions) signature or other authority ov ion may have to file FinCEN	11 ver a	Yes	
10 11 Par	Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount over Enter the amount of line 10 you want: Credited to 2022 estimated tax ► t IV Statements Regarding Certain Activities and Other Information At any time during the 2021 calendar year, did the organization have an interest in or a s financial account (bank, securities, or other) in a foreign country? If 'Yes,' the organization is the organization by the organization count (bank, securities, or other) in a foreign country?	verpaid Refunded > ion (see instructions) signature or other authority ovicon may have to file FinCEN pountry here	11 ver a N Form 114,	Yes	No X X
10 11 Par 1	Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount over Enter the amount of line 10 you want: Credited to 2022 estimated tax IV Statements Regarding Certain Activities and Other Information At any time during the 2021 calendar year, did the organization have an interest in or a s financial account (bank, securities, or other) in a foreign country? If 'Yes,' the organization count of Foreign Bank and Financial Accounts. If 'Yes,' enter the name of the foreign counter of the foreig	verpaid Refunded > ion (see instructions) signature or other authority ovicon may have to file FinCEN pountry here	11 ver a N Form 114,	Yes	X
10 11 Par 1	Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount over Enter the amount of line 10 you want: Credited to 2022 estimated tax t IV Statements Regarding Certain Activities and Other Information At any time during the 2021 calendar year, did the organization have an interest in or a s financial account (bank, securities, or other) in a foreign country? If 'Yes,' the organization Report of Foreign Bank and Financial Accounts. If 'Yes,' enter the name of the foreign country During the tax year, did the organization receive a distribution from, or was it the g	verpaid Refunded ► ion (see instructions) signature or other authority ovion may have to file FinCEN pountry here ► grantor of, or transferor to,	11 ver a N Form 114,	Yes	X
10 11 Par 1	Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount over Enter the amount of line 10 you want: Credited to 2022 estimated tax ► Statements Regarding Certain Activities and Other Information At any time during the 2021 calendar year, did the organization have an interest in or a s financial account (bank, securities, or other) in a foreign country? If 'Yes,' the organization Report of Foreign Bank and Financial Accounts. If 'Yes,' enter the name of the foreign count During the tax year, did the organization receive a distribution from, or was it the g If "Yes," see instructions for other forms the organization may have to file. Enter the amount of tax-exempt interest received or accrued during the tax year	verpaid Refunded > ion (see instructions) signature or other authority ovion may have to file FinCEN pountry here grantor of, or transferor to, \$	er a N Form 114, a foreign trust?. 0.	Yes	X
10 11 Par 1 2 3	Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount over Enter the amount of line 10 you want: Credited to 2022 estimated tax ► Statements Regarding Certain Activities and Other Information At any time during the 2021 calendar year, did the organization have an interest in or a s financial account (bank, securities, or other) in a foreign country? If 'Yes,' the organization Report of Foreign Bank and Financial Accounts. If 'Yes,' enter the name of the foreign count During the tax year, did the organization receive a distribution from, or was it the g If "Yes," see instructions for other forms the organization may have to file. Enter the amount of tax-exempt interest received or accrued during the tax year Enter available pre-2018 NOL carryovers here ►\$ 135, 458. Do not inc	Refunded > Refunded > ion (see instructions) signature or other authority over the file FinCEN pountry here pountry here grantor of, or transferor to, \$	rer a N Form 114, a foreign trust?. 0. arryover	Yes	X
10 11 Par 1 2 3 4	Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount over Enter the amount of line 10 you want: Credited to 2022 estimated tax ► t IV Statements Regarding Certain Activities and Other Information At any time during the 2021 calendar year, did the organization have an interest in or a s financial account (bank, securities, or other) in a foreign country? If 'Yes,' the organization During the tax year, did the organization receive a distribution from, or was it the g If "Yes," see instructions for other forms the organization may have to file. Enter the amount of tax-exempt interest received or accrued during the tax year Enter available pre-2018 NOL carryovers here ►\$ 135, 458. Do not income the NOL carryover shown here by	verpaid Refunded ion (see instructions) signature or other authority ovion may have to file FinCEN pountry here grantor of, or transferor to, signature any post-2017 NOL car poy any deduction reported or	rer a N Form 114, a foreign trust?. 0. arryover in Part1, line 6.	Yes	X
10 11 Par 1 2 3	Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount over Enter the amount of line 10 you want: Credited to 2022 estimated tax ► IV Statements Regarding Certain Activities and Other Information At any time during the 2021 calendar year, did the organization have an interest in or a s financial account (bank, securities, or other) in a foreign country? If 'Yes,' the organization During the tax year, did the organization receive a distribution from, or was it the g If "Yes," see instructions for other forms the organization may have to file. Enter the amount of tax-exempt interest received or accrued during the tax year Enter available pre-2018 NOL carryovers here ►\$ 135, 458. Do not income the NOL carryover shown here by Post-2017 NOL carryovers. Enter available Business Activity Code and post-2017 NOL	verpaid Refunded ion (see instructions) signature or other authority ovion may have to file FinCEN ountry here grantor of, or transferor to, \$ clude any post-2017 NOL ca oy any deduction reported o NOL carryovers. Don't reduction	rer a N Form 114, a foreign trust?. 0. arryover in Part1, line 6.	Yes	X
10 11 Par 1 2 3 4	Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount over Enter the amount of line 10 you want: Credited to 2022 estimated tax ► Statements Regarding Certain Activities and Other Information At any time during the 2021 calendar year, did the organization have an interest in or a s financial account (bank, securities, or other) in a foreign country? If 'Yes,' the organization Report of Foreign Bank and Financial Accounts. If 'Yes,' enter the name of the foreign cound During the tax year, did the organization receive a distribution from, or was it the g If "Yes," see instructions for other forms the organization may have to file. Enter the amount of tax-exempt interest received or accrued during the tax year Enter available pre-2018 NOL carryovers here ►\$ <u>135, 458</u> . Do not inclusion shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by Post-2017 NOL carryovers. Enter available Business Activity Code and post-2017 Nol shown below by any NOL claimed on any Schedule A, Part II, line 17 for the tax year.	verpaid Refunded ion (see instructions) signature or other authority ovion may have to file FinCEN jon may have to file FinCEN jon transferor to, grantor of, or transferor to, \$ clude any post-2017 NOL ca by any deduction reported or NOL carryovers. Don't reductions.	11 ver a N Form 114, a foreign trust?. 0. arryover on Part1, line 6. ce the amounts	Yes	X
10 11 Par 1 2 3 4	Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount over Enter the amount of line 10 you want: Credited to 2022 estimated tax ► t IV Statements Regarding Certain Activities and Other Information At any time during the 2021 calendar year, did the organization have an interest in or a s financial account (bank, securities, or other) in a foreign country? If 'Yes,' the organization Puring the tax year, did the organization receive a distribution from, or was it the g If "Yes," see instructions for other forms the organization may have to file. Enter the amount of tax-exempt interest received or accrued during the tax year Enter available pre-2018 NOL carryovers here >\$ 135,458 Do not inclusion on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by Post-2017 NOL carryovers. Enter available Business Activity Code and post-2017 Not carryovers. Enter available Business Activity Code Business Activity Code	verpaid Refunded ion (see instructions) signature or other authority ovion may have to file FinCEN ountry here grantor of, or transferor to, \$ clude any post-2017 NOL ca oy any deduction reported o NOL carryovers. Don't reduction	rer a N Form 114, a foreign trust?. 0. arryover In Part1, line 6. ce the amounts	Yes	X
10 11 Par 1 2 3 4	Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount over Enter the amount of line 10 you want: Credited to 2022 estimated tax ► Statements Regarding Certain Activities and Other Information At any time during the 2021 calendar year, did the organization have an interest in or a s financial account (bank, securities, or other) in a foreign country? If 'Yes,' the organization Report of Foreign Bank and Financial Accounts. If 'Yes,' enter the name of the foreign cound During the tax year, did the organization receive a distribution from, or was it the g If "Yes," see instructions for other forms the organization may have to file. Enter the amount of tax-exempt interest received or accrued during the tax year Enter available pre-2018 NOL carryovers here ►\$ <u>135, 458</u> . Do not inclusion shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by Post-2017 NOL carryovers. Enter available Business Activity Code and post-2017 Nol shown below by any NOL claimed on any Schedule A, Part II, line 17 for the tax year.	verpaid Refunded ion (see instructions) signature or other authority ovion may have to file FinCEN jon may have to file FinCEN jon transferor to, grantor of, or transferor to, \$ clude any post-2017 NOL ca by any deduction reported or NOL carryovers. Don't reductions.	11 ver a N Form 114, a foreign trust?. 0. arryover on Part1, line 6. ce the amounts	Yes	X
10 11 Par 1 2 3 4	Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount over Enter the amount of line 10 you want: Credited to 2022 estimated tax ► t IV Statements Regarding Certain Activities and Other Information At any time during the 2021 calendar year, did the organization have an interest in or a s financial account (bank, securities, or other) in a foreign country? If 'Yes,' the organization Puring the tax year, did the organization receive a distribution from, or was it the g If "Yes," see instructions for other forms the organization may have to file. Enter the amount of tax-exempt interest received or accrued during the tax year Enter available pre-2018 NOL carryovers here >\$ 135,458 Do not inclusion on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by Post-2017 NOL carryovers. Enter available Business Activity Code and post-2017 Not carryovers. Enter available Business Activity Code Business Activity Code	verpaid Refunded ion (see instructions) signature or other authority ovion may have to file FinCEN jon may have to file FinCEN jon transferor to, grantor of, or transferor to, \$ clude any post-2017 NOL ca by any deduction reported or NOL carryovers. Don't reductions.	rer a N Form 114, a foreign trust?. 0. arryover In Part1, line 6. ce the amounts	Yes	X
10 11 Par 1 2 3 4	Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount over Enter the amount of line 10 you want: Credited to 2022 estimated tax ► t IV Statements Regarding Certain Activities and Other Information At any time during the 2021 calendar year, did the organization have an interest in or a s financial account (bank, securities, or other) in a foreign country? If 'Yes,' the organization Puring the tax year, did the organization receive a distribution from, or was it the g If "Yes," see instructions for other forms the organization may have to file. Enter the amount of tax-exempt interest received or accrued during the tax year Enter available pre-2018 NOL carryovers here >\$ 135,458 Do not inclusion on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by Post-2017 NOL carryovers. Enter available Business Activity Code and post-2017 Not carryovers. Enter available Business Activity Code Business Activity Code	verpaid Refunded ion (see instructions) signature or other authority ovion may have to file FinCEN jon may have to file FinCEN jon transferor to, grantor of, or transferor to, \$ clude any post-2017 NOL ca by any deduction reported or NOL carryovers. Don't reductions.	rer a N Form 114, a foreign trust?. 0. arryover In Part1, line 6. ce the amounts	Yes	X
10 11 Par 1 2 3 4 5	Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount over the amount of line 10 you want: Credited to 2022 estimated tax ► t IV Statements Regarding Certain Activities and Other Information. At any time during the 2021 calendar year, did the organization have an interest in or a s financial account (bank, securities, or other) in a foreign country? If 'Yes,' the organization. Report of Foreign Bank and Financial Accounts. If 'Yes,' enter the name of the foreign conducting the tax year, did the organization receive a distribution from, or was it the g If "Yes," see instructions for other forms the organization may have to file. Enter the amount of tax-exempt interest received or accrued during the tax year Enter available pre-2018 NOL carryovers here ►\$ 135,458 Do not inc shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by Post-2017 NOL carryovers. Enter available Business Activity Code and post-2017 N shown below by any NOL claimed on any Schedule A, Part II, line 17 for the tax year 900099	Refunded Refunded ion (see instructions) signature or other authority ovion may have to file FinCEN puntry here grantor of, or transferor to, \$ clude any post-2017 NOL ca by any deduction reported of NOL carryovers. Don't reductions. Available post-2017 NOL \$ <th>11 ver a N Form 114, a foreign trust?. 0. arryover n Part1, line 6. ce the amounts NOL carryover 177, 610.</th> <th>Yes</th> <th>X X</th>	11 ver a N Form 114, a foreign trust?. 0. arryover n Part1, line 6. ce the amounts NOL carryover 177, 610.	Yes	X X
10 11 Par 1 2 3 4 5	Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount over Enter the amount of line 10 you want: Credited to 2022 estimated tax ► IV Statements Regarding Certain Activities and Other Information. At any time during the 2021 calendar year, did the organization have an interest in or a s financial account (bank, securities, or other) in a foreign country? If 'Yes,' the organization. Report of Foreign Bank and Financial Accounts. If 'Yes,' enter the name of the foreign country? If 'Yes,' see instructions for other forms the organization may have to file. Enter the amount of tax-exempt interest received or accrued during the tax year Enter available pre-2018 NOL carryovers here ►\$ 135, 458. Do not inclustor on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by Post-2017 NOL carryovers. Enter available Business Activity Code and post-2017 NoL carryovers. Enter available Business Activity Code 900099 Business Activity Code 900099 Did the organization change its method of accounting? (see instructions)	Refunded Refunded ion (see instructions) signature or other authority ovion may have to file FinCEN ountry here grantor of, or transferor to, \$	11 /er a N Form 114, a foreign trust?. 0. arryover in Part1, line 6. ce the amounts NOL carryover 177,610.	Yes	X
10 11 Par 1 2 3 4 5	Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount owe Enter the amount of line 10 you want: Credited to 2022 estimated tax ► IV Statements Regarding Certain Activities and Other Informatian At any time during the 2021 calendar year, did the organization have an interest in or a s financial account (bank, securities, or other) in a foreign country? If 'Yes,' the organization Report of Foreign Bank and Financial Accounts. If 'Yes,' enter the name of the foreign counting the tax year, did the organization receive a distribution from, or was it the g If "Yes," see instructions for other forms the organization may have to file. Enter the amount of tax-exempt interest received or accrued during the tax year Enter available pre-2018 NOL carryovers here ►\$ 135, 458. Do not inclusion on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by Post-2017 NOL carryovers. Enter available Business Activity Code and post-2017 N shown below by any NOL claimed on any Schedule A, Part II, line 17 for the tax year Business Activity Code 900099	Refunded Refunded ion (see instructions) signature or other authority ovion may have to file FinCEN ountry here grantor of, or transferor to, \$	11 /er a N Form 114, a foreign trust?. 0. arryover in Part1, line 6. ce the amounts NOL carryover 177,610.	Yes	X X
10 11 Par 1 2 3 4 5	Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount over Enter the amount of line 10 you want: Credited to 2022 estimated tax ► tw Statements Regarding Certain Activities and Other Information at any time during the 2021 calendar year, did the organization have an interest in or a s financial account (bank, securities, or other) in a foreign country? If 'Yes,' the organization Report of Foreign Bank and Financial Accounts. If 'Yes,' enter the name of the foreign country in the tax year, did the organization receive a distribution from, or was it the g If "Yes," see instructions for other forms the organization may have to file. Enter the amount of tax-exempt interest received or accrued during the tax year Enter available pre-2018 NOL carryovers here ►\$ 135,458. Do not inc shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by Post-2017 NOL carryovers. Enter available Business Activity Code and post-2017 NoL carryovers. Enter available Business Activity Code 900099 Business Activity Code 90099 10099 1000099 100099 100	Refunded Refunded ion (see instructions) signature or other authority ovion may have to file FinCEN ountry here grantor of, or transferor to, \$	11 /er a N Form 114, a foreign trust?. 0. arryover in Part1, line 6. ce the amounts NOL carryover 177,610.	Yes	X X

Provide the explanation required by Part IV, line 6b. Also, provide any other additional information. See instructions.

Cian	Under penalties of perjury, I declare that I have belief, it is true, correct, and complete. Declaration	examined this return, including accompanyin ion of preparer (other than taxpayer) is base	g schedules and statements, d on all information of which	and to the best of m preparer has any kn	ny knowledge and owledge.
Sign Here	Signature of officer	Date	CFO Title	the	ay the IRS discuss this return with e preparer shown below (see structions)?
Paid	Print/Type preparer's name	Preparer's signature	Date	Check X if	PTIN
Pre-	RICHARD V. PROULX, CPA	/ marx	10/11/22	self-employed	P00432577
parer	Firm's name KERN & THOMPS	ON LLC		Firm's EIN 🏲 9	3-1157146
Use	Firm's address ► 1800 SW FIRST	AVENUE, SUITE 410			
Only	PORTLAND, OR	97201		Phone no.	(503) 222-3338
BAA	· · ·	TEEA0202 01/31/22			Form 990-T (2021)

Form **990-T** (2021)

SCHEDULE A (Form 990-T)

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

	·			2021					
	► Go to www.irs.gov/Form990T for instructions and the latest information.								
	ent of the Treasury Revenue Service	Open 501(n to Public Inspection for (c)(3) Organizations Only						
	ame of the organiz				B Employer id		ation number		
C	OMMUNITY FO	OUNDATION FOR SW WASHINGTON			91-1246778	3			
C Un	related busines	ss activity code (see instructions) ► 900099			D Sequence	: 1	of 1		
E De	escribe the unre	elated trade or business ► INCOME RECEIVE	D FR	OM PARTNERSHI	P INVESTME	NT			
Part	I Unrelate	d Trade or Business Income		(A) Income	(B) Expenses	5	(C) Net		
	Gross receipts		_						
	Less returns and		1c						
2	•	sold (Part III, line 8)	2						
3		Subtract line 2 from line 1c	3						
	1120)). See ir	et income (attach Sch D (Form 1041 or Form structions	4a						
b	• •) (Form 4797) (attach Form 4797). See	4b						
c		eduction for trusts	40 4c						
5	Income (loss)	from a partnership or an S corporation							
5	(attach statem	nent) SEE STATEMENT 3	5	-8,031.			-8,031.		
6	Rent income ((Part IV)	6						
7	Unrelated deb	t-financed income (Part V)	7						
8		ities, royalties, and rents from a controlled Part VI)	8						
9		come of section 501(c)(7), (9), or (17)							
10	-	(Part VII)	9 10						
10 11		mpt activity income (Part VIII)	10						
11	-	come (Part IX) (see instructions; attach statement)	11						
13		e lines 3 through 12	13	-8,031.			-8,031.		
Part		s Not Taken Elsewhere See instructions for li			Doductions m	uct by	· · · · ·		
Fart		with the unrelated business income	manc		Deductions m	ust De	e unectry		
1		of officers, directors, and trustees (Part X)				1	5,393.		
2		vages				2	5,393.		
3	Repairs and n	•			-	3			
4	Bad debts					4			
5	Interest (attac	h statement). See instructions				5			
6	Taxes and lice	enses			[6			
7	-	attach Form 4562). See instructions							
8		tion claimed in Part III and elsewhere on return				8b			
9						9			
10		to deferred compensation plans				10			
11		hefit programs				11			
12 13		ot expenses (Part VIII) rship costs (Part IX)				12 13			
13 14	Other deduction	ons (attach statement).		SEE ST	ATEMENT 4	14	11 211		
15		ons. Add lines 1 through 14				15	<u>41,314.</u> 46,707.		
16		iness income before net operating loss deduct				-	40,707.		
	line 13, colum	n (C)				16	-54,738.		
17	Deduction for	net operating loss. See instructions		SEE ST.	ATEMENT 5	17			
18	Unrelated bus	siness taxable income. Subtract line 17 from li	ine 16			18	-54,738.		

BAA For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2021

Part	III Cost of Goods Sold Enter method	l of inventory valuatio	n Þ		
1	Inventory at beginning of year				
2	Purchases				
3	Cost of labor				
4	Additional section 263A costs (attach statemer	•			
5	Other costs (attach statement)				
6	Total. Add lines 1 through 5				
7 8	Inventory at end of year Cost of goods sold. Subtract line 7 from line 6				
-	•				
9	Do the rules of section 263A (with respect to property p	roduced or acquired for	resale) apply to the or	ganization?	Yes No
Part	IV Rent Income (From Real Property and	Personal Prope	rty Leased with R	eal Property)	
1	Description of property (property street addres	s, city, state, ZIP c	ode). Check if a dua	al-use. See instruct	ions.
	Α	-			
	в П				
	с П				
	D 🔲				
2	Rent received or accrued	Α	В	С	D
_ a	From personal property (if the percentage of				
u	rent for personal property is more than 10%				
	but not more than 50%).				
b	From real and personal property (if the				
	percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)				
C	Total rents received or accrued by property Add lines 2a and 2b, columns A through D				
2					
3	Total rents received or accrued. Add line 2c column	s A through D. Enter	nere and on Part I, Iir	ne 6, column (A).	
4	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)				
5	Total deductions. Add line 4 columns A through	h D. Entar hara an	d on Dort L ling 6		
			iu on Fait I, line 0,		
Part	· · · · · · · · · · · · · · · · · · ·				
1	Description of debt-financed property (street a	ddress, city, state,	ZIP code). Check if	a dual-use. See ins	structions.
	A 🗌				
	в 🔲				
	с Ц				
	D [_]		P	С	D
2	Gross income from or allocable to debt-	Α	В	ر د	U
	financed property				
3	Deductions directly connected with or				
	allocable to debt-financed property				
	Straight line depreciation (attach statement)				
b	Other deductions (attach statement)				
С					
	columns A through D).				
4	Amount of average acquisition debt on or allocable to debt-financed property (attach statement)				
5	Average adjusted basis of or allocable to				
5	debt-financed property (attach statement)				
6	Divide line 4 by line 5	0\0	00	0\0	0\0
7	Gross income reportable. Multiply line 2 by line 6.				
8	Total gross income (add line 7, columns A through	D) Entor boro and o	n Part I, line 7, colum	n (A) 🕨	

COMMUNITY FOUNDATION FOR SW WASHINGTON

9	Allocable deductions. Multiply line 3c by line 6	
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10 Total allocable deductions. Add line 9, columns A through D. Enter here and on Part I, line 7, column (B)

11 Total dividends-received deductions included in line 10.....

Schedule A (Form 990-T) 2021

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►

91-1246778

Page 2

Sche	dule A (Form 990-T) 2021		MMUNITY F	OUNDATIO	N FOR S	SW WASHINGT	ON	9	1-124	6778	Page 3
Par	t VI Interest, Annu										
						Exempt Cont	rolled	Organizations			
	1 Name of controlled organization	ide	Employer entification number	3 Net unr income (see instru	(loss)	4 Total of specified payments made		d 5 Part of colum that is included the controllin organization gross income		conn	ctions directly lected with e in column 5
(1)											
(1) (2) (3) (4)											
(3)											
(4)											
		-			-	Iled Organization					
	7 Taxable income	in	let unrelated come (loss) e instructions)		f specified nts made	10 Part of included in organizatio	n the d	controlling			ns directly ith income nn 10
(1)											
(2)											
(3)											
(4)						Add columns	- E	d 10. Entor	Add or	Jumpa C.	and 11. Enter
Tota	ls					here and o		I, line 8,			art I, line 8,
Par	t VII Investment Inc	come o	of a Section	501(c)(7),	(9), or (1	17) Organizati	i on (s	ee instructions	S)		
	1 Description of income	9	2 Amount	of income	direct	Deductions tly connected h statement)	(a	4 Set-asides ttach statemen	t)	set-as	ductions and ides (add is 3 and 4)
(1)											
(2)											
(3) (4)							-				
(4) Add amounts in colu Enter here and on l line 9, column (nd on Part I,						nter here	ts in column 5. and on Part I, column (B)	
Par	t VIII Exploited Exer	mpt Ac	ctivity Incor	ne, Other ⁻	Than Ad	vertising Inco	me (see instructior	ıs)		
1	Description of exploite	d activi	ity:								
2	Gross unrelated busin	ess inc	ome from tra	de or busin	ess. Ente	r here and on F	Part I.	line 10, col	(A) 2		
3	Expenses directly con	nected	with product	ion of unrela	ated busir	ness income. E	nter h	ere and on	· · _		
Part I, line 10, column (B)							3				
4	4 Net income (loss) from unrelated trade or business. Subtract line 3 from line 2. If a gain, complete lines 5 through 7							4			
5	Gross income from ac	tivity th	at is not unre	elated busin	iess incor	ne			5		
6	Expenses attributable								-		
7	Excess exempt expension line 4. Enter here and										
BAA			(h) mo 12 .								m 990-T) 2021

Schedule A (Form 990-T) 2021 COMMUNITY FOUNDATION FOR SW WASHINGTON Part IX Advertising Income

Q1 -	-124	67	78
9T-	-124	101	10

F	⊃₂	au	Р	4

Par	t IX Advertising Income							
1	Name(s) of periodical(s). Check box if reportin	g two or more perio	odicals on a co	nsolidated bas	is.			
	A 🗌							
	B							
	с [р П				<u> </u>			
Ent	ter amounts for each periodical listed above in the	o correction col						
			B	C	D			
2	Gross advertising income	A	D	C				
а	Add columns A through D. Enter here and on Pa	art I, line 11, colum	ר (A)		►			
3	Direct advertising costs by periodical	, ,	. ,					
а	Add columns A through D. Enter here and on Pa	art L line 11 colum	n (B)		•			
4	Advertising gain (loss). Subtract line 3 from line 2.			••••••	······			
-	For any column in line 4 showing a gain, complete							
	lines 5 through 8. For any column in line 4 showing							
	a loss or zero, do not complete lines 5 through 7,							
	and enter zero on line 8							
5	Readership costs							
6	Circulation income							
7	Excess readership costs. If line 6 is less than line 5, subtract line 6 from line 5. If line 5 is							
	less than line 6, enter zero							
8	Excess readership costs allowed as a deduction. For each column showing a gain on							
	line 4, enter the lesser of line 4 or line 7							
а	Add line 8, columns A through D. Enter the grea Part II, line 13							
Par	t X Compensation of Officers, Directors,	and Trustees (see	e instructions)					
	1 Name	2 Title	e	3 Percent of time devoted to business	4 Compensation attributable to unrelated business			
	8							
				00				
				0/0				
				00				
_	Total. Enter here and on Part II, line 1							
Par	t XI Supplemental Information (see instruction	ons)						

Schedule A (Form 990-T) 2021

BAA

2021	FEDERAL STATE	MENTS	PAGE 1
	COMMUNITY FOUNDATION FOR	SW WASHINGTON	91-1246778
FOI CH/	ATEMENT 1 RM 990-T, PART I, LINE 4 ARITABLE CONTRIBUTIONS ARITABLE CONTRIBUTIONS COME PERCENT LIMIT ALLOWED CHARITABLE CONT	0.	0.
FO NE PRE PRE TO PRE	ATEMENT 2 RM 990-T, PART I, LINE 6 FOPERATING LOSS DEDUCTION C-2018 NOLS CARRIED FORWARD FROM PRIOR YEAR C-2018 NOLS INCLUDED ON FORM 990-T, PART I, L CAL PRE-2018 NOLS APPLIED C-2018 NOLS EXPIRING THIS TAX YEAR C-2018 NOLS CARRIED OVER TO SUBSEQUENT TAX YEA	INE 6 0. 0.	135,458. 0. 0. 95,161.
CAH SPU BRC ABF	ATEMENT 3 HEDULE A, PART I, LINE 5 FOME (LOSS) FROM PARTNERSHIPS AND S CORPORAT NAME PITAL DYNAMICS GLOBAL SECONDARIES IR VENTURES V, LP DOKE PRIVATE EQUITY IV, LP DOKE PRIVATE EQUITY V, LP EX PARTNERS IX, LP BOTT SECONDARY OPPORTUNITIES II, LP	GROSS INCOME DEDUCTIONS \$ 39. \$ 0. 157. 0. 14,902. 0. -8,718. 0. -16,013. 0. 1,602. 0.	157. 14,902. -8,718. -16,013. 1,602.
SC OT	ATEMENT 4 HEDULE A, PART II, LINE 14 HER DEDUCTIONS VESTMENT ADVISORY FEES. VESTMENT EXPENSES - PRIVATE EQUITY	\$ TOTAL <u>\$</u>	40,269. 1,045. 41,314.

2021

FEDERAL STATEMENTS

PAGE 2

COMMUNITY FOUNDATION FOR SW WASHINGTON

91-1246778

STATEMENT 5 SCHEDULE A, PART II, LINE 17 NET OPERATING LOSS DEDUCTION

LOSS YEAR ENDING		ORIGINAL LOSS	LOSS PREVIOUSLY USED		JOSS ILABLE
12/31/18 12/31/19 12/31/20	\$	26,877. 79,995. 70,738.		0. 0. 0.	\$ 26,877. 79,995. 70,738.
NET OPERATING LOSS . TAXABLE INCOME	AVAILABI	.Е			\$ 177,610. -54,738.
80% OF TAXABLE INCO NET OPERATING LOSS			AXABLE INCOME)		-43,790. 0.