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Part III

Statement of Program Service Accomplishments

1 Briefly describe the organization’s mission

SEE SCHEDULE O FOR DESCRIPTION

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

If “Yes,” describe these new services on Schedule O

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

If “Yes,” describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization’s three largest program services by expenses
Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a	(Code) (Expenses \$ 7,276,501 including grants of \$) (Revenue \$ 11,153,219)
	PHYSICAL/CARDIOVASCULAR CARE THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER GRAND RAPIDS' PHYSICAL/CARDIOVASCULAR CARE PROGRAMS ARE PART OF THE YMCA'S OVERALL GOAL OF BUILDING HEALTHY SPIRIT, MIND, AND BODY PROGRAMS ARE DESIGNED TO IMPACT WELLNESS OF THE COMMUNITY AND INCLUDE FREE SEMINARS, BLOOD PRESSURE SCREENINGS, CHOLESTEROL TESTS, AND FITNESS EVALUATIONS EMPHASIS IS ON FAMILY, WITH A FULL COMPLEMENT OF PROGRAMS FOR INDIVIDUALS SIX MONTHS TO SENIOR CITIZENS FINANCIAL ASSISTANCE IS AVAILABLE TO THOSE IN NEED

4b	(Code) (Expenses \$ 2,544,991 including grants of \$) (Revenue \$ 2,626,487)
	CHILD CARE THE YMCA CHILD CARE PROGRAMS PROVIDE HIGH QUALITY CHILD CARE WHILE FOCUSING ON THE YMCA'S FOUR CORE VALUES - CARING, HONESTY, RESPECT, AND RESPONSIBILITY THE YMCA PROGRAMS ARE BASED UPON YEARS OF RESEARCH IN THE FIELD OF CHILD DEVELOPMENT AND ARE DESIGNED TO MEET THE INDIVIDUAL NEEDS OF THE CHILD AND THE FAMILY AS A WHOLE THE YMCA RECOGNIZES A GROWING NUMBER OF FAMILIES FROM EVERY SOCIOECONOMIC LEVEL ARE NEGLECTED, ADRIFT, AND IN TROUBLE THE STRESS AND STRAIN OF BALANCING WORK AND FAMILY IS BECOMING MORE DIFFICULT TO BEAR YMCA ASSISTS IN REDUCING THIS BURDEN THROUGH THE PROVISION OF TUITION ASSISTANCE FOR CHILD CARE SERVICES ADDITIONALLY, WE AID FAMILIES WHO MIGHT NEED OTHER FORMS OF HELP DUE TO FAMILY VIOLENCE, LOSS OF A JOB, SUBSTANCE ABUSE, ETC , BY COLLABORATING WITH OTHER SOCIAL SERVICE AGENCIES WE ALSO FOCUS ON HELPING PARENTS LEARN MORE ABOUT HOW TO RAISE HEALTHY, HAPPY CHILDREN WHO CAN GROW INTO RESPONSIBLE CARING ADULTS









4c	(Code) (Expenses \$ 1,990,599 including grants of \$) (Revenue \$ 689,706)
	AQUATICS PROGRAM YMCAS HAVE BEEN TEACHING PEOPLE TO SWIM FOR MORE THAN A CENTURY IN YMCA AQUATICS PROGRAMS, CHILDREN LEARN TO BE SAFE AROUND WATER AND THEY FEEL THE SENSE OF ACCOMPLISHMENT THAT COMES WITH LEARNING SOMETHING NEW YOUTH PROGRESSIVE SWIMMING IS THE YMCA'S THIRD MOST WIDELY OFFERED PROGRAM NATIONWIDE IT USES A PROBLEM-SOLVING, GUIDE-DISCOVERY TEACHING APPROACH IN A POSITIVE, CARING ENVIRONMENT KIDS CAN DEVELOP LIFELONG SKILLS THAT CAN HELP THEM STAY HEALTHY OTHER YMCA AQUATICS PROGRAMS INCLUDE INFANT-PARENT CLASSES, PRESCHOOL CLASSES, CLASSES FOR PEOPLE WITH DISABILITIES, AND CLASSES FOR TEENS AND ADULTS THESE INCLUDE WATER EXERCISE AND THERAPY AND WATER SPORTS, INCLUDING SYNCHRONIZED SWIMMING AND MASTER COMPETITIVE SWIMMING FOR PEOPLE 18 AND OVER COMPETITIVE PROGRAMS ARE ALSO AVAILABLE FOR YOUTH MANY YMCAS OFFER SPECIAL CLASSES TO HELP CHILDREN AND FAMILIES LEARN HOW TO BE SAFER IN AND AROUND WATER, INCLUDING YMCA SPLASH YSPLASH IS AN AQUATICS ORIENTATION AND SAFETY PROGRAM PROVIDING INSTRUCTION ON SWIMMING SKILLS AND BASIC WATER SAFETY, OFFERED ANNUALLY AT MANY YMCAS THE NEARLY WEEK-LONG EVENT OFFERS WATER FAMILIARIZATION, SWIM LESSONS AND, OFTEN, POOL GAMES, CONTESTS, AND PARENT EDUCATION SESSIONS, USUALLY AT A NOMINAL FEE

4d	Other program services (Describe in Schedule O) See also Additional Data for Description
	(Expenses \$ 4,600,878 including grants of \$) (Revenue \$ 984,941)

4e	Total program service expenses \$ 16,412,969
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Part IV

Checklist of Required Schedules

		Yes	No	
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		No
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II 	7	Yes	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 	10	Yes	
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.	11	Yes	
	• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.			
	• 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.			
	• 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.			
	• 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.			
	• Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	• 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? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII 	12	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?	Yes	No	
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	12A		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Part II	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		No
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	Yes	
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		No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No


Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 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	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25</i> 	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		No
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		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
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 I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, <i>Annual Summary and Transmittal of U.S. Information Returns</i> . Enter -0- if not applicable	1a	7	
		1b	0	
b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			1c	Yes
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?				
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return	2a	1,543	
	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?			3a	No
b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a	No
b If "Yes," enter the name of the foreign country  _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts				
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . .			5a	No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b	No
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?			5c	
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?			6a	No
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b	
7 Organizations that may receive deductible contributions under section 170(c).				
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?			7a	Yes
b If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	Yes
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c	No
d If "Yes," indicate the number of Forms 8282 filed during the year			7d	
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e	Yes
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . .			7f	Yes
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? . . .			7g	
h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?			7h	
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			8	
9 Sponsoring organizations maintaining donor advised funds.				
a Did the organization make any taxable distributions under section 4966?			9a	
b Did the organization make a distribution to a donor, donor advisor, or related person?			9b	
10 Section 501(c)(7) organizations. Enter				
a Initiation fees and capital contributions included on Part VIII, line 12			10a	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			10b	
11 Section 501(c)(12) organizations. Enter				
a Gross income from members or shareholders			11a	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			11b	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?			12a	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year			12b	

Part VI

Governance, Management, and Disclosure

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

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body	1a	42	
b	Enter the number of voting members that are independent	1b	41	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		No
6	Does the organization have members or stockholders?	6		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		No
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No

Section B. Policies

(This Section B requests information about policies not required by the Internal Revenue Code.)

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line a or b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed▶MI
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply. <input type="checkbox"/> Own website <input checked="" type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶ ROBERT L BRANCH 475 LAKE MICHIGAN DR NW GRAND RAPIDS, MI 49504 (616) 855-9600

1b Total	701,917	0	82,275
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2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **5**

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
DESIGN PLUS 230 EAST FULTON GRAND RAPIDS, MI 49503	ARCHITECTURE	273,543
THE IDEA HOUSE THREE CENTENNIAL PLAZA 3RD FLR CINCINNATI, OH 45202	ADVERTISING	203,990

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

Part VIII

Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a	322,067				
	b	Membership dues	1b					
	c	Fundraising events	1c	155,181				
	d	Related organizations	1d					
	e	Government grants (contributions)	1e	1,218,301				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	2,886,470				
	g	Noncash contributions included in lines 1a-1f \$ _____						
	h	Total. Add lines 1a-1f						4,582,019
Program Service Revenue			Business Code					
	2a	MEMBERSHIP DUES & ASSE	713,940	10,731,092	10,731,092			
	b	PROGRAM FEES	713,940	2,724,977	2,724,977			
	c	CHILD CARE	624,410	1,830,567	1,830,567			
	d	USE OF FACILITIES	624,410	167,717	167,717			
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f			15,454,353			
Other Revenue	3	Investment income (including dividends, interest and other similar amounts)		63,367			63,367	
	4	Income from investment of tax-exempt bond proceeds . . .						
	5	Royalties						
	6a	(i) Real		(ii) Personal				
	b	Less rental expenses						
	c	Rental income or (loss)						
	d	Net rental income or (loss)						
	7a	(i) Securities		(ii) Other				
		7,385,375		1,675				
		7,556,503		247,506				
		-171,128		-245,831				
	d	Net gain or (loss)			-416,959			-416,959
	8a	Gross income from fundraising events (not including \$ 155,181 of contributions reported on line 1c) See Part IV, line 18		a	16,475			
	b	Less direct expenses		b	39,425			
	c	Net income or (loss) from fundraising events . . .			-22,950			
	9a	Gross income from gaming activities See Part IV, line 19		a				
	b	Less direct expenses		b				
c	Net income or (loss) from gaming activities . . .							
10a	Gross sales of inventory, less returns and allowances		a					
b	Less cost of goods sold		b					
c	Net income or (loss) from sales of inventory . . .							
Miscellaneous Revenue			Business Code					
11a	MISCELLANEOUS INCOME		713,940	163,686			163,686	
b								
c								
d	All other revenue							
e	Total. Add lines 11a-11d			163,686				
12	Total revenue. See Instructions			19,823,516	15,454,353	0	-212,856	

Part IX

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21				
2	Grants and other assistance to individuals in the U S See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	364,971		244,825	120,146
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	8,640,581	7,149,842	1,068,784	421,955
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	380,111	281,371	70,448	28,292
9	Other employee benefits	841,557	690,299	120,564	30,694
10	Payroll taxes	668,965	539,398	93,324	36,243
11	Fees for services (non-employees)				
a	Management				
b	Legal	8,354		8,354	
c	Accounting	92,480	22,898	35,752	33,830
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other	322,834	238,039	79,583	5,212
12	Advertising and promotion				
13	Office expenses	999,049	875,530	115,738	7,781
14	Information technology				
15	Royalties				
16	Occupancy	1,147,407	1,140,632	6,775	
17	Travel	159,489	116,973	38,492	4,024
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	151,445	64,082	62,858	24,505
20	Interest	355,215	355,215		
21	Payments to affiliates	194,000	154,674	31,100	8,226
22	Depreciation, depletion, and amortization	2,127,024	2,010,917	116,107	
23	Insurance	136,828	107,790	21,311	7,727
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a	SUPPLIES	1,170,495	1,051,600	70,246	48,649
b	REPAIR AND MAINTENANCE	863,033	835,711	23,145	4,177
c	PRINTING & PUBLICATIONS	582,059	481,511	1,012	99,536
d	BAD DEBT EXPENSE	188,733		188,733	
e					
f	All other expenses	306,098	296,487	9,611	
25	Total functional expenses. Add lines 1 through 24f	19,700,728	16,412,969	2,406,762	880,997
26	Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing			1,198,557	1	2,396,191
	2	Savings and temporary cash investments			14,778	2	197,900
	3	Pledges and grants receivable, net			4,966,914	3	4,493,349
	4	Accounts receivable, net			547,218	4	789,643
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L				5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use			25,029	8	13,972
	9	Prepaid expenses and deferred charges			109,497	9	119,992
	10a	Land, buildings, and equipment, cost or other basis. Complete Part VI of Schedule D	10a	55,297,523			
	b	Less accumulated depreciation	10b	13,351,424	41,807,833	10c	41,946,099
	11	Investments—publicly traded securities			3,488,337	11	3,691,483
	12	Investments—other securities. See Part IV, line 11				12	
	13	Investments—program-related. See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			893,777	15	551,570
	16	Total assets. Add lines 1 through 15 (must equal line 34)			53,051,940	16	54,200,199
Liabilities	17	Accounts payable and accrued expenses			1,093,204	17	1,656,866
	18	Grants payable				18	
	19	Deferred revenue			547,119	19	619,213
	20	Tax-exempt bond liabilities			19,430,000	20	18,815,000
	21	Escrow or custodial account liability. Complete Part IV of Schedule D				21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties			3,895,805	23	2,985,573
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities. Complete Part X of Schedule D			0	25	996,158
	26	Total liabilities. Add lines 17 through 25			24,966,128	26	25,072,810
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets			22,832,292	27	22,157,622
	28	Temporarily restricted net assets			4,273,941	28	5,913,582
	29	Permanently restricted net assets			979,579	29	1,056,185
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			28,085,812	33	29,127,389
	34	Total liabilities and net assets/fund balances			53,051,940	34	54,200,199

Part XI **Financial Statements and Reporting**

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

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF
GREATER GRAND RAPIDS

Employer identification number

38-1358058

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

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

1

☐

A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**

2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)

8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9

☐

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10

☐

An organization organized and operated exclusively to test for public safety See**section 509(a)(4).**

11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other

e

☐

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box

g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i)

a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?

(ii)

a family member of a person described in (i) above?

(iii)

a 35% controlled entity of a person described in (i) or (ii) above?

h

☐

Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

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

Part II

Support Schedule for Organizations Described in IRC 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.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	4,623,896	3,558,532	3,601,058	4,539,703	4,582,019	20,905,208
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	4,623,896	3,558,532	3,601,058	4,539,703	4,582,019	20,905,208
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						260,264
6 Public Support. Subtract line 5 from line 4						20,644,944

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	4,623,896	422,511	3,601,058	4,539,703	4,582,019	20,905,208
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	270,912	422,511	284,141	-56,975	63,367	983,956
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets				174,080	180,161	354,241
11 Total support (Add lines 7 through 10)						22,243,405
12 Gross receipts from related activities, etc (See instructions)					12	82,739,212

13 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here

☐

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f))	14	92 810 %
15 Public Support Percentage for 2008 Schedule A, Part II, line 14	15	89 560 %

- 16a 33 1/3% support test—2009. 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
- ☒
- b 33 1/3% support test—2008. If the organization did not check the 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—2009. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization
- ☒
- b 10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization
- ☒
- 18 Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions
- ☒

Part IIISupport Schedule for Organizations Described in IRC 509(a)(2)
(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3Gross receipts from activities that are not an unrelated trade or business under section 513						
4Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5The value of services or facilities furnished by a governmental unit to the organization without charge						
6Total. Add lines 1 through 5						
7aAmounts included on lines 1, 2, and 3 received from disqualified persons						
bAmounts 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						
cAdd lines 7a and 7b						
8Public Support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9Amounts from line 6						
10aGross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
bUnrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
cAdd lines 10a and 10b						
11Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13Total support (Add lines 9, 10c, 11 and 12.)						
14First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage

15Public Support Percentage for 2009 (line 8 column (f) divided by line 13 column (f))	15	
16Public support percentage from 2008 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17Investment income percentage for 2009 (line 10c column (f) divided by line 13 column (f))	17	
18Investment income percentage from 2008 Schedule A, Part III, line 17	18	
19a33 1/3% support tests—2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		
b33 1/3% support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		
20Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions		

Part IV

Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Explanation	
Schedule A, Part IV, Supplemental Information	SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME 2008 OTHER INCOME \$174,080 2009 OTHER INCOME \$163,686 2009 SPECIAL EVENTS GROSS REVENUE \$16,475

SCHEDULE D

(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization
THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF
GREATER GRAND RAPIDS

Employer identification number

38-1358058

Part I

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

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <div><input type="checkbox"/> Yes<input type="checkbox"/> No</div>	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit <div><input type="checkbox"/> Yes<input type="checkbox"/> No</div>	

Part II

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

1

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

☐ Preservation of land for public use (e g , recreation or pleasure)

☐ Preservation of an historically importantly land area

☒ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2

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

	Held at the End of the Year	
a	Total number of conservation easements	1
b	Total acreage restricted by conservation easements	71
c	Number of conservation easements on a certified historic structure included in (a)	0
d	Number of conservation easements included in (c) acquired after 8/17/06	0

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ 0

4

Number of states where property subject to conservation easement is located ▶ 1

5

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

☒ Yes☐ No

6

Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ▶ 0 00

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ 0

8

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

☐ Yes☒ No

9

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

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a

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

b

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

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

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

2

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

a

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

b

Assets included in Form 990, Part X▶ \$

For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

Cat No 52283D

Schedule D (Form 990) 2009

Part III

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

3

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

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

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

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

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

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV and complete the following table

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a	Beginning of year balance	979,579	1,204,773		
b	Contributions				
c	Investment earnings or losses	76,606	-225,194		
d	Grants or scholarships				
e	Other expenditures for facilities and programs				
f	Administrative expenses				
g	End of year balance	1,056,185	979,579		

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶ %

b

Permanent endowment ▶ 100 000 % %

c

Term endowment ▶ %

3a

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

(i) unrelated organizations

3a(i)

Yes

No

(ii) related organizations

3a(ii)

No

b

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

3b

4

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

Part VI

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

Description of investment	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		5,610,044		5,610,044
b Buildings		41,048,305	7,486,559	33,561,746
c Leasehold improvements				
d Equipment		7,298,884	5,462,981	1,835,903
e Other		1,340,290	401,884	938,406
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				41,946,099

Schedule D (Form 990) 2009

Part XI

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	19,823,516
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	19,700,728
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	122,788
4	Net unrealized gains (losses) on investments	4	647,675
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	271,114
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	918,789
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	1,041,577

Part XII

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	20,510,616
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	647,675
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	39,425
e	Add lines 2a through 2d	2e	687,100
3	Subtract line 2e from line 1	3	19,823,516
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	19,823,516

Part XIII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	19,740,153
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	39,425
e	Add lines 2a through 2d	2e	39,425
3	Subtract line 2e from line 1	3	19,700,728
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	19,700,728

Part XIV

Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Identifier	Return Reference	Explanation
Part II, Line 9	Description of How Organization Reports Conservation Easements	ACCOUNTING FOR CONSERVATION EASEMENTS A CONSERVATION EASEMENT EXISTS ON 0.71 ACRES OF AN 18.192 PARCEL OF LAND OWNED BY THE YMCA GRANTED BY THE DEPARTMENT OF ENVIRONMENTAL QUALITY (MDEQ). THE EASEMENT WAS RECORDED WITH THE KENT COUNTY REGISTER OF DEEDS ON DECEMBER 10, 2002. THE PURPOSE OF THIS EASEMENT IS TO PROTECT THE WETLAND FUNCTIONS AND VALUES EXISTING (OR ESTABLISHED ON THE PROPERTY FOR MDEQ PERMIT 02-41-003-P) ON THE EASEMENT PREMISES. THE CONSERVATION EASEMENT DOES NOT GRANT OR CONVEY ANY RIGHT OF OWNERSHIP, POSSESSION, OR USE OF THE EASEMENT PREMISES TO THE MDEQ OR ANY MEMBER OF THE GENERAL PUBLIC, AND REPRESENTS AN IMMATERIAL PORTION OF THE LAND PURCHASED, THEREFORE NO SPECIAL ACCOUNTING FOR THIS EASEMENT WAS REQUIRED.
Part V, Line 4	Description of Intended Use of Endowment Funds	INTENDED USES FOR ENDOWMENT FUNDS. ENDOWMENT FUNDS ARE USED TO PROVIDE LOW-INCOME INDIVIDUALS WITH AN OPPORTUNITY TO HAVE A CAMP EXPERIENCE, TO SUPPORT INNER-CITY PROGRAMMING, AND SUPPORT OTHER PROGRAM NEEDS.
Part XII, Line 2d - Other Adjustments		SPECIAL EVENT EXPENSES INCLUDED IN EXPENSES IN AUDITED FINANCIAL STATEMENTS 39,425.
Part XIII, Line 2d - Other Adjustments		SPECIAL EVENT EXPENSES INCLUDED IN EXPENSES IN AUDITED FINANCIAL STATEMENTS 39,425.

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding
Fundraising or Gaming Activities

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

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization
THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF
GREATER GRAND RAPIDS

Employer identification number

38-1358058

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

1

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

a

☐ Mail solicitations

e

☐ Solicitation of non-government grants

b

☐ Internet and e-mail solicitations

f

☐ Solicitation of government grants

c

☐ Phone solicitations

g

☐ Special fundraising events

d

☐ In-person solicitations

2a

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

☐ Yes ☐ No

b

If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table.

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total ▶						

3

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

Part II Fundraising Events.

Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

Revenue			(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
			SERVICE CLUB AUCTION	GOLF OUTING	3	(Add col (a) through col (c))
			(event type)	(event type)	(total number)	
	1	Gross receipts	56,064	37,775	77,817	171,656
	2	Less Charitable contributions	56,064	21,300	77,817	155,181
	3	Gross income (line 1 minus line 2)		16,475		16,475
Direct Expenses	4	Cash prizes				
	5	Non-cash prizes		4,909		4,909
	6	Rent/facility costs	3,230	17,414		20,644
	7	Food and beverages	533	113	1,291	1,937
	8	Entertainment				
	9	Other direct expenses	9,938	1,351	646	11,935
	10	Direct expense summary Add lines 4 through 9 in column (d)				39,425
	11	Net income summary Combine lines 3, column d, and line 10.				-22,950

Part III Gaming.

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

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

			Yes	No
9	Enter the state(s) in which the organization operates gaming activities _____			
a	Is the organization licensed to operate gaming activities in each of these states?	9a		
b	If "No," Explain _____ _____			
10a	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	10a		
b	If "Yes," Explain _____ _____			
11	Does the organization operate gaming activities with nonmembers?	11		
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	12		

		Yes	No
13	Indicate the percentage of gaming activity operated in		
a	The organization's facility 13a		
b	An outside facility 13b		
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records		
Name ►			
Address ►			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a	
b	If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____		
c	If "Yes," enter name and address		
Name ►			
Address ►			
16	Gaming manager information		
Name ►			
Gaming manager compensation ► \$ _____			
Description of services provided ►			
<input type="checkbox"/> Director/officer <input type="checkbox"/> Employee <input type="checkbox"/> Independent contractor			
17	Mandatory distributions		
a	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	17a	
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$		

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2009

Open to Public Inspection

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

▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization
THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER GRAND RAPIDS

Employer identification number
38-1358058

Part I

Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items		
	<div><div><input type="checkbox"/> First-class or charter travel</div><div><input type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Tax idemnification and gross-up payments</div><div><input type="checkbox"/> Discretionary spending account</div></div> <div><div><input type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div>		
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain	1b	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply		
	<div><div><input checked="" type="checkbox"/> Compensation committee</div><div><input type="checkbox"/> Independent compensation consultant</div><div><input checked="" type="checkbox"/> Form 990 of other organizations</div></div> <div><div><input type="checkbox"/> Written employment contract</div><div><input checked="" type="checkbox"/> Compensation survey or study</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div>		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization		
a	Receive a severance payment or change-of-control payment?	4a	No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III		
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.		
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of		
a	The organization?	5a	No
b	Any related organization?	5b	No
	If "Yes," to line 5a or 5b, describe in Part III		
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of		
a	The organization?	6a	No
b	Any related organization?	6b	No
	If "Yes," to line 6a or 6b, describe in Part III		
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	No
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	8	No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9	

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

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

[illegible]

Part III

Supplemental Information

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

Identifier	Return Reference	Explanation
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Schedule K
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax Exempt Bonds

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

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF
GREATER GRAND RAPIDS

Employer identification number
38-1358058

Part I Bond Issues

(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Price	(f) Description of Purpose	(g) Defeased		(h) On Behalf of Issuer	
						Yes	No	Yes	No
A MICHIGAN STRATEGIC FUND	52-1417332	59469C7W7	06-30-2004	15,500,000	SEE SCHEDULE O		X		X
B MICHIGAN STRATEGIC FUND	52-1417332	59469C8S5	03-03-2005	5,000,000	SEE SCHEDULE O		X		X

Part II Proceeds

	A		B		C		D		E	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1 Total proceeds of issue			15,071,009		4,862,000					
2 Gross proceeds in reserve funds										
3 Proceeds in refunding or defeasance escrows										
4 Other unspent proceeds										
5 Issuance costs from proceeds			428,991		138,000					
6 Working capital expenditures from proceeds										
7 Capital expenditures from proceeds			15,500,000		5,000,000					
8 Year of substantial completion			2005		2005					
9 Were the bonds issued as part of a current refunding issue?		X		X						
10 Were the bonds issued as part of an advance refunding issue?		X		X						
11 Has the final allocation of proceeds been made?	X		X							
12 Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X							

Part III Private Business Use

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

Part III

Private Business Use (Continued)

		A		B		C		D		E	
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts with respect to the financed property which may result in private business use?		X		X						
3b	Are there any research agreements with respect to the financed property which may result in private business use?		X		X						
3c	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?		X		X						
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government	0 900 %		0 %							
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government	0 %		0 %							
6	Total of lines 4 and 5	0 900 %		0 %							
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	X		X							

Part IV

Arbitrage

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

SCHEDULE O

(Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990

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

▶ Attach to Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization

THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER GRAND RAPIDS

Employer identification number

38-1358058

Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 2		H M 'SKIP' BAXTER III AND DOUGLAS M HOOGERHY DE ARE VOTING BOARD MEMBERS RELATED BY MARRIAGE (BROTHER-IN-LAWS)

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		THE FORM 990 WAS PREPARED BY YMCA STAFF WITH THE ASSISTANCE OF OUR AUDIT FIRM, AND SUBSEQUENTLY REVIEWED IN DETAIL AND REVISED AS RECOMMENDED BY THE YMCA'S FINANCE COMMITTEE RESULTS OF THIS REVIEW WERE SUBSEQUENTLY REPORTED TO THE YMCA'S EXECUTIVE COMMITTEE AND BOARD OF DIRECTORS BY THE ASSOCIATION'S TREASURER

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 12c		FORM FILLED OUT ANNUALLY ALL ARE REVIEWED BY THE PRESIDENT/CEO PRESIDENT/CEO REVIEWS ANY ISSUES WITH THE EXECUTIVE COMMITTEE AND THEY DECIDE WHAT ACTION TO TAKE

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		<p>COMPENSATION COMMITTEE THE PURPOSE OF THE COMPENSATION COMMITTEE (THE 'COMMITTEE') OF THE BOARD OF DIRECTORS (THE 'BOARD') OF THE YMCA SHALL BE TO ACT ON BEHALF OF THE BOARD IN FULFILLING THE BOARD'S RESPONSIBILITIES TO OVERSEE THE PRESIDENT/CEO'S COMPENSATION POLICIES, PLANS AND PROGRAMS, AS WELL AS TO REVIEW THE CURRENT COMPENSATION TO BE PAID TO THE PRESIDENT/CEO THE TERM 'COMPENSATION' SHALL INCLUDE SALARY, LONG-TERM INCENTIVES, BONUSES, PERQUISITES AND SEVERANCE ARRANGEMENTS THE POLICY OF THE COMMITTEE SHALL BE AS FOLLOWS</p> <p>COMPENSATION STRUCTURE THE COMMITTEE SHALL SEEK TO MAINTAIN AN OVERALL COMPENSATION STRUCTURE DESIGNED TO ATTRACT, RETAIN AND MOTIVATE BY PROVIDING APPROPRIATE LEVELS OF RISK AND REWARD, ASSESSED ON A RELATIVE BASIS AT ALL LEVELS WITHIN THE ASSOCIATION AND IN PROPORTION TO INDIVIDUAL CONTRIBUTION AND PERFORMANCE LONG TERM FOCUS THE COMMITTEE SHALL SEEK TO ESTABLISH APPROPRIATE INCENTIVES FOR THE PRESIDENT/CEO TO FURTHER THE ASSOCIATION'S LONG-TERM STRATEGIC PLAN AND AVOID UNDUE EMPHASIS ON SHORT-TERM STRATEGIES IN DETERMINING THE LONG-TERM INCENTIVE COMPONENT THE COMMITTEE WILL SEEK TO ACHIEVE AN APPROPRIATE LEVEL OF RISK AND REWARD, TAKING INTO CONSIDERATION THE ASSOCIATION'S PERFORMANCE, THE POTENTIAL BENEFITS AND THE COSTS TO THE ASSOCIATION THE MEMBERS OF THE COMMITTEE AND THE COMMITTEE CHAIRPERSON SHALL BE APPOINTED BY AND SERVE AT THE DISCRETION OF THE BOARD, PROVIDED THAT PERSONS WITH CONFLICTS OF INTEREST WITH RESPECT TO THE COMPENSATION ARRANGEMENT AT ISSUE ARE NOT INVOLVED IN THIS REVIEW AND APPROVAL THE COMPENSATION COMMITTEE SHALL CONSIST OF THE CURRENT BOARD CHAIR, PAST BOARD CHAIR, AND THE FUTURE BOARD CHAIR THE COMMITTEE'S CHAIRPERSON SHALL HAVE FULL ACCESS TO ALL RECORDS AND PERSONNEL OF THE ASSOCIATION AS DEEMED NECESSARY THE COMMITTEE SHALL HAVE THE AUTHORITY TO OBTAIN ADVICE AND ASSISTANCE FROM LEGAL, ACCOUNTING OR OTHER ADVISORS AND CONSULTANTS OVERALL COMPENSATION STRATEGY THE COMMITTEE SHALL BE RESPONSIBLE FOR REVIEWING, MODIFYING AND MAKING RECOMMENDATIONS TO THE FULL BOARD REGARDING THE OVERALL COMPENSATION STRATEGY AND POLICIES FOR THE PRESIDENT/CEO, INCLUDING REVIEWING AND SUGGESTING PERFORMANCE GOALS AND OBJECTIVES, WHICH SUPPORT AND REINFORCE THE ASSOCIATION'S LONG-TERM STRATEGIC GOALS, RELEVANT TO THE COMPENSATION OF THE ASSOCIATION'S PRESIDENT/CEO, EVALUATING AND RECOMMENDING TO THE BOARD THE COMPENSATION PLANS AND PROGRAMS ADVISABLE FOR THE PRESIDENT/CEO AS WELL AS THE MODIFICATION OR TERMINATION OF EXISTING PLANS AND PROGRAMS, REVIEWING REGIONAL AND INDUSTRY-WIDE DATA FOR COMPENSATION PRACTICES AND TRENDS TO ASSESS COMPARABILITY TO SIMILARLY QUALIFIED PERSONS IN FUNCTIONALITY, PROPRIETY, ADEQUACY AND COMPETITIVENESS OF THE ASSOCIATION'S EXECUTIVE COMPENSATION PROGRAMS AMONG COMPARABLE COMPANIES IN THE ASSOCIATION'S INDUSTRY HOWEVER, THE COMMITTEE SHALL EXERCISE INDEPENDENT JUDGMENT IN RECOMMENDING THE APPROPRIATE LEVELS AND TYPES OF COMPENSATION TO BE PAID, REVIEWING AND RECOMMENDING TO THE BOARD THE TERMS OF ANY EMPLOYMENT AGREEMENTS, SEPARATION ARRANGEMENTS, CHANGE-OF-CONTROL PROTECTIONS OR ANY OTHER COMPENSATORY ARRANGEMENTS FOR THE PRESIDENT/CEO, MAINTAINING CONTEMPORANEOUS DOCUMENTATION AND RECORDKEEPING WITH RESPECT TO THE DELIBERATIONS AND DECISIONS REGARDING THE COMPENSATION ARRANGEMENT COMPENSATION OF THE PRESIDENT/CHIEF EXECUTIVE OFFICER THE COMMITTEE SHALL RECOMMEND TO THE BOARD, FOR DETERMINATION AND APPROVAL, THE COMPENSATION AND OTHER TERMS OF EMPLOYMENT FOR THE PRESIDENT/CEO THE COMMITTEE SHALL ALSO EVALUATE THE PERFORMANCE IN LIGHT OF RELEVANT PERFORMANCE GOALS AND OBJECTIVES, TAKING INTO ACCOUNT, AMONG OTHER THINGS, THE POLICY OF THE COMMITTEE AND THE PRESIDENT/CEO'S PERFORMANCE IN FOSTERING A CULTURE THAT PROMOTES THE HIGHEST LEVELS OF INTEGRITY AND THE HIGHEST ETHICAL STANDARDS, DEVELOPING AND EXECUTING THE ASSOCIATION'S LONG-TERM STRATEGIC PLAN AND CONDUCTING THE BUSINESS OF THE ASSOCIATION IN A MANNER APPROPRIATE TO ENHANCE LONG-TERM ASSOCIATION VALUE, ACHIEVING ANY OTHER PERFORMANCE GOALS AND OBJECTIVES DEEMED RELEVANT TO THE PRESIDENT/CEO AS ESTABLISHED BY THE COMMITTEE, AND ACHIEVING THE PRESIDENT/CEO'S INDIVIDUAL PERFORMANCE GOALS AND OBJECTIVES COMPENSATION OF OTHER EXECUTIVE EMPLOYEES THE COMMITTEE SHALL REVIEW REGIONAL AND INDUSTRY-WIDE COMPENSATION PRACTICES AND TRENDS TO ASSESS THE PROPRIETY, ADEQUACY AND COMPETITIVENESS OF THE ASSOCIATION'S EXECUTIVE'S COMPENSATION PROGRAMS AMONG COMPARABLE COMPANIES IN THE ASSOCIATION'S INDUSTRY ADMINISTRATION OF COMPENSATION PLANS THE COMMITTEE SHALL RECOMMEND TO THE BOARD THE ADOPTION, AMENDMENT AND TERMINATION OF THE ASSOCIATION'S INCENTIVE PLANS, BONUS PLANS, DEFERRED COMPENSATION PLANS AND SIMILAR PROGRAMS THE COMMITTEE SHALL HAVE FULL POWER AND AUTHORITY TO ADMINISTER THESE PLANS, ESTABLISH GUIDELINES, INTERPRET PLAN DOCUMENTS, SELECT PARTICIPANTS, APPROVE GRANTS AND AWARDS, AND EXERCISE SUCH OTHER POWER AND AUTHORITY AS REQUIRED UNDER SUCH PLANS</p>

Identifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		THE BY-LAWS AND CONFLICT OF INTEREST POLICY ARE SENT TO THE BETTER BUSINESS BUREAU EVERY YEAR ALL GOVERNING DOCUMENTS AND CONFLICTS OF INTEREST POLICIES ARE AVAILABLE UPON REQUEST FINANCIAL STATEMENTS ARE NOT MADE AVAILABLE TO THE PUBLIC

Identifier	Return Reference	Explanation
FORM 990, PART XI, LINE 2C	FINANCIAL REVIEW PROCESS	THE AUDIT IS REVIEWED IN DETAIL BY THE YMCA'S FINANCE COMMITTEE, ALONG WITH CERTAIN OTHER REQUIRED COMMUNICATIONS PRESENTED BY SENIOR REPRESENTATIVES OF THE AUDIT FIRM. THE FINANCE COMMITTEE MEETS INDEPENDENTLY WITH THE AUDITORS AS PART OF THIS REVIEW. REVISIONS ARE MADE TO THE AUDIT AS RECOMMENDED BY THE YMCA'S FINANCE COMMITTEE AND ARE SUBSEQUENTLY REPORTED TO THE YMCA'S EXECUTIVE COMMITTEE AND BOARD OF DIRECTORS BY THE ASSOCIATION'S TREASURER.

Identifier	Return Reference	Explanation
		SCH K - PURPOSE OF ISSUE DESCRIPTION MICHIGAN STRATEGIC FUND ACQUISITION OF LAND AND CONSTRUCTION AND EQUIPPING OF A NEW HEALTH & FITNESS CENTER LOCATED AT 475 LAKE MICHIGAN DRIVE NW, GRAND RAPIDS, MI 49504 MICHIGAN STRATEGIC FUND ACQUISITION OF LAND AND CONSTRUCTION AND EQUIPPING OF A NEW HEALTH & FITNESS CENTER LOCATED AT 6555 JUPITER AVENUE, BELMONT, MI 49306

Identifier	Return Reference	Explanation
FORM 990, PAGE 1, PART C	DOING BUSINESS AS (CONTINUED)	GREATER GRAND RAPIDS YMCA, GRAND RAPIDS YMCA, YMCA OF GRAND RAPIDS

Identifier	Return Reference	Explanation
FORM 990, PART III, LINE 1	BRIEFLY DESCRIBE THE ORGANIZATION'S MISSION	<p>THE MISSION OF THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER GRAND RAPIDS ('YMCA') IS TO PUT CHRISTIAN PRINCIPLES INTO PRACTICE THROUGH PROGRAMS THAT BUILD HEALTHY SPIRIT, MIND, AND BODY FOR ALL. THE VISION OF THE YMCA IS TO BE THE LEADER IN BUILDING STRONG KIDS, STRONG FAMILIES, AND STRONG COMMUNITIES. THE YMCA IS A STRONG, VIBRANT PART OF OUR COMMUNITY. DESPITE TURBULENT TIMES, OUR MEMBERSHIP NUMBERS ARE SOLID, OUR ANNUAL STRONG KIDS CAMPAIGN SET A NEW RECORD RAISING OVER \$1.3 MILLION, AND OUR PROGRAMS ARE FULL OF KIDS, FAMILIES, AND ADULTS. THESE RESULTS SHOW THAT THE COMMUNITY BELIEVES IN OUR MISSION AND THE IMPACT THE YMCA IS HAVING ON BUILDING STRONG KIDS, STRONG FAMILIES, AND STRONG COMMUNITIES. WE HAD A NUMBER OF EXCITING NEW INITIATIVES THIS PAST YEAR. OUR COMMUNITY OUTREACH PROGRAMS, INCLUDING HEALTHY U AND NUTRITION IN ACTION, QUADRUPLLED IN SIZE. OUR AFTERSCHOOL LOOP PROGRAM WITH GRAND RAPIDS PUBLIC SCHOOLS DOUBLED AND OUR ARTS PROGRAMS EXTENDED NEW OPPORTUNITIES FOR PEOPLE TO CONNECT WITH THE YMCA. OUR CORE PROGRAMS IN AQUATICS, HEALTH AND WELLNESS, CAMP, CHILD CARE, AND SPORTS CONTINUE TO THRIVE. WE HAVE CONTINUED OUR COMMITMENT TO UTILIZING THE SEARCH INSTITUTE ASSET MODEL TO HELP US MEASURE OUR PROGRAM OUTCOMES TO DETERMINE THE IMPACT WE ARE HAVING ON THE LIVES OF YOUNG PEOPLE. OUR YMCA IS ABOUT MORE THAN STATISTICS - IT IS ABOUT PEOPLE. OUR VOLUNTEERS, STAFF, MEMBERS, AND PROGRAM PARTICIPANTS ALL COMBINE TO MAKE THE YMCA OF GREATER GRAND RAPIDS A STRONG, VIABLE, COMMUNITY-BASED ORGANIZATION. PHILANTHROPIC GIVING TO THE YMCA HELPED INCREASE OUR CAPACITY TO MAKE A DIFFERENCE IN THE LIVES OF CHILDREN, FAMILIES, AND THE COMMUNITIES WE SERVE. WITH STRONG PHILANTHROPIC SUPPORT, APPROXIMATELY \$5,900,000 IN FINANCIAL ASSISTANCE WAS PROVIDED FOR MEMBERSHIP, PROGRAMS, AND CHILDCARE THROUGH UNITED WAY, OUR ANNUAL STRONG KIDS FUNDRAISING CAMPAIGN, DEPARTMENT OF HUMAN SERVICES FUNDS, GRANTS, AND DONATIONS. 1,600 INDIVIDUALS WERE INVOLVED IN CHILDCARE AND AFTER-SCHOOL PROGRAMS. CHILDCARE IS ESSENTIAL FOR MANY FAMILIES. ACCREDITED CHILDCARE IS AN IMPORTANT PART OF THE YMCA'S MISSION TO BUILD STRONG FAMILIES. PARENTS HAVE THE PEACE OF MIND KNOWING THAT THEIR CHILDREN ARE IN AN ACCREDITED, SAFE, LOVING ENVIRONMENT WITH A CURRICULUM THAT ENSURES THAT EACH CHILD DEVELOPS AT THEIR OWN PACE. 12,500 INDIVIDUALS WERE INVOLVED WITH YMCA CAMP MANITOU-LIN. TEAMWORK, SPORTSMANSHIP, AND FUN ARE THE FORMULA FOR SUCCESSFUL SUMMER PROGRAMS. CAMP MANITOU-LIN'S THERAPEUTIC RIDING PROGRAM STRENGTHENS OUR COMMUNITY WITH PROGRAMS FOR INDIVIDUALS WITH SPECIAL NEEDS. 1,500 KIDS PARTICIPATED IN MID-CITY ADVENTURE CLUB - A COMMUNITY COLLABORATION WITH MULTIPLE DONORS. MID-CITY OFFERS A DAY CAMP EXPERIENCE FOR URBAN CHILDREN WITH AN EMPHASIS ON MENTORING, HEALTHY U, AND FIELD TRIPS. 1,600 INNER-CITY CHILDREN PARTICIPATE IN THE INNER-CITY YOUTH BASEBALL/SOFTBALL PROGRAM IN PARTNERSHIP WITH THE WEST MICHIGAN WHITECAPS AND FIFTH THIRD BANK. THIS COLLABORATION ENSURES THAT EVERY CHILD IN THE INNER-CITY HAS THE OPPORTUNITY TO PLAY BASEBALL IN HIS OR HER OWN NEIGHBORHOOD. THE WORK OF THE YMCA EXTENDS BEYOND ITS FACILITIES INTO EVERY CORNER OF OUR COMMUNITY TO PROMOTE HEALTHY LIFESTYLES. ONE OF OUR MOST EXTENSIVE INITIATIVES IS ACTIVATE WEST MICHIGAN, A COMMUNITY-WIDE PROGRAM DEVELOPING LOCAL SOLUTIONS TO RISING RATES OF OBESITY AND CHRONIC DISEASE. THIS INNOVATIVE RESPONSE IS CHANGING THE WAY WE LIVE, THINK, AND ACT. A COMMUNITY-WIDE BMI STUDY POSITIONED THE YMCA AS A LEADER IN THE COUNTRY IN IDENTIFYING THE NEEDS OF THE COMMUNITY, THEN ACTING TO PROVIDE COLLABORATIVE SOLUTIONS. IN THIS SPIRIT, THE YMCA COLLABORATES WITH OVER 50 PARTNER AGENCIES AND ORGANIZATIONS TO HELP MAKE THIS POSSIBLE. THE HEALTHY U PROGRAM - A KEY COMPONENT OF ACTIVATE WEST MICHIGAN - SERVES 5,000 YOUTH WITH INTERACTIVE HEALTH AND WELLNESS EDUCATION, ADDRESSING THE GROWING NEEDS OF CHILDREN, YOUTH, TEENS, AND FAMILIES IN OUR COMMUNITIES. WITH HEALTHY U AS A FOUNDATION, THE YMCA HAS ALSO DEVELOPED NUTRITION IN ACTION, KIDS IN ACTION, SISTERS IN ACTION, LATINAS IN ACTION, AND CAMP HEALTHY U PROGRAMS. EACH IS TARGETED SPECIFICALLY AT HELPING KIDS AND FAMILIES LEAD HEALTHIER LIVES. HEALTHY U ALSO ADDRESSES CHALLENGES IN ACCESS TO HEALTHY FOODS BY BUILDING COMMUNITY GARDENS AND BRINGING FARMERS' MARKETS TO THE INNER-CITY. RESEARCH FROM THE SEARCH INSTITUTE TELLS US THAT ALL KIDS ARE AT RISK. IT DOESN'T MATTER IF THEY LIVE IN SUBURBS OR THE INNER-CITY, ALL KIDS FACE CHALLENGES AND CHOICES. THE YMCA GIVES KIDS THE TOOLS AND EXPERIENCES THEY NEED TO INCREASE THEIR DEVELOPMENTAL ASSETS SUCH AS COMMON SENSE, POSITIVE EXPERIENCES, AND QUALITIES THAT HELP INFLUENCE CHOICES. YOUNG PEOPLE MAKE AND HELP THEM BECOME CARING, RESPONSIBLE ADULTS. YMCA PROGRAMS BUILD STRONG KIDS BY BUILDING ASSETS. ACCORDING TO THE SEARCH INSTITUTE SURVEY OF OUR YMCA PARTICIPANTS, 91% OF YOUTH & TEENS INVOLVED IN YMCA PROGRAMS STAND UP FOR WHAT THEY BELIEVE, EVEN WHEN IT IS UNPOPULAR TO DO SO. 88% OF TEENS IN YMCA PROGRAMS HAVE CHOSEN NOT TO SMOKE CIGARETTES. 92% OF YOUTH AND TEENS INVOLVED IN YMCA PROGRAMS HAVE CHOSEN TO STAY AWAY FROM DRUGS. 95% OF YOUTH AND TEENS FEEL THAT YMCA STAFF CARE ABOUT THEM AND SERVE AS ROLE MODELS. STRONG FAMILIES ARE THE CORNERSTONE OF THE YMCA. WITH FAMILY MEMBERSHIPS, FAMILY NIGHTS, AND FAMILY-FRIENDLY PROGRAMMING, THE YMCA IS OFTEN A REFUGE FOR FAMILIES SEEKING TO CONNECT IN THE HUSTLE AND BUSTLE OF TODAY'S BUSY WORLD. QUALITY, VALUES-BASED PROGRAMS GIVE FAMILIES A PLACE TO RECONNECT AND ENJOY TIME TOGETHER. AS FAMILIES SEARCH FOR BALANCE, MANY FIND IT AT THE YMCA. STRONG COMMUNITIES ARE BEING BUILT BOTH GLOBALLY AND LOCALLY THROUGH A PARTNERSHIP WITH THE YMCA OF LEON, MEXICO, AS WELL AS JC PENNEY RIGHT HERE IN WEST MICHIGAN. WHETHER IT'S A COMMUNITY OUTREACH PROJECT LIKE FARMERS' MARKETS OR THE AFTER-SCHOOL PROGRAMS IN PARTNERSHIP WITH LOCAL SCHOOLS, THE YMCA IS COMMITTED TO BRINGING COMMUNITIES TOGETHER.</p>

Identifier	Return Reference	Explanation
FORM 990, PART VI, LINE 15B	COMPENSATION PROCESS FOR OFFICERS	SAME REVIEW AND APPROVAL PROCESS AS FOR CEO, EXECUTIVE DIRECTOR AND TOP MANAGEMENT OFFICIAL

Additional Data

Software ID:
Software Version:
EIN: 38-1358058
Name: THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF
GREATER GRAND RAPIDS

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services					
(Code) (Expenses \$		including grants of \$) (Revenue \$	
SPORTS AND RECREATION	CAMPING PROGRAM	TEEN PROGRAM	OTHER PROGRAMS		

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)							(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former				
RONALD K NELSON PRESIDENT/CEO	52 00	X		X				214,975	0	20,786	
HM SKIP BAXTER III DIRECTOR	50	X						0	0	0	
CHARLES E BENNETT SECRETARY	70	X		X				0	0	0	
JOHN F BUTZER MD DIRECTOR	80	X						0	0	0	
PHILIP N CATLETT DIRECTOR	40	X						0	0	0	
THOMAS R CURRAN JR DIRECTOR	40	X						0	0	0	
JAMES E DUNLAP DIRECTOR	40	X						0	0	0	
BRIAN T HARRIS VICE CHAIR	1 00	X		X				0	0	0	
ROBERT L HERR DIRECTOR	30	X						0	0	0	
JOHN S JACKOBOICE DIRECTOR	60	X						0	0	0	
CAROL J KARR DIRECTOR	50	X						0	0	0	
DIANE C KNIOWSKI DIRECTOR	40	X						0	0	0	
JEFF LAMBERT DIRECTOR	70	X						0	0	0	
BENJAMIN H LOGAN DIRECTOR	30	X						0	0	0	
ROSALYNN BLISS DIRECTOR	30	X						0	0	0	
JOHN H BULTEMA III DIRECTOR	30	X						0	0	0	
CYNTHIA A HAVARD DIRECTOR	30	X						0	0	0	
CARLOS SANCHEZ DIRECTOR	30	X						0	0	0	
SEAN P WELSH DIRECTOR	30	X						0	0	0	
PATRICK MILES JR DIRECTOR	30	X						0	0	0	
KAREN D MORRIS DIRECTOR	40	X						0	0	0	
SAMUEL A OJO DIRECTOR	40	X						0	0	0	
DICK POSTHUMUS DIRECTOR	30	X						0	0	0	
ANA L RAMIREZ-SAENZ DIRECTOR	30	X						0	0	0	
MARSHA RAPPLEY DIRECTOR	30	X						0	0	0	

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)							(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustees	Officer	Key employee	Highest compensated employee	Former				
GREGORY A RHODES DIRECTOR	30	X						0	0	0	
MARY ELLEN RODGERS BOARD CHAIR	1 00	X		X				0	0	0	
WILLIAM SCHOONVELD DIRECTOR	40	X						0	0	0	
NANCY SKINNER DIRECTOR	50	X						0	0	0	
JACQUELINE D TAYLOR DIRECTOR	40	X						0	0	0	
CAROL VAN ANDEL DIRECTOR	30	X						0	0	0	
PETER VARGA DIRECTOR	30	X						0	0	0	
JAMES C WILLIAMS DIRECTOR	40	X						0	0	0	
MICHAEL T WOOLRIDGE DIRECTOR	30	X						0	0	0	
NANCY J AYRES DIRECTOR	60	X						0	0	0	
KEVIN BRIGGS DIRECTOR	1 00	X						0	0	0	
DAVID SMIES DIRECTOR	1 00	X						0	0	0	
ROGER JANSEN DIRECTOR	1 00	X						0	0	0	
JOHN B MOSLEY TREASURER	1 00	X		X				0	0	0	
DOUGLAS M HOOGERHYDE DIRECTOR	1 00	X						0	0	0	
ROBERT DEGROOT DIRECTOR	1 00	X						0	0	0	
JIM BOSSERD DIRECTOR	1 00	X						0	0	0	
ROBERT L BRANCH CFO	50 00			X				112,575	0	16,635	
JAN WIERENGA SENIOR VP	50 00					X		139,000	0	13,452	
DEB MINTON VP DEVELOPMENT	50 00					X		120,367	0	14,531	
DEAN HERRIED VP OPERATION	50 00					X		115,000	0	16,871	