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Department of the Treasury

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

2009

OMB No 1545-0047

Open to Public

Internal F	Revenue	Service Fine o	rganization may have to use	a copy of this return to satisfy s	tate reporting	requirements	Inspection
A Foi	r the	2009 calendar yea		01-2009 and ending 06-30-201	0	D Employer ide	ntification number
		pplicable Please	C Name of organization YOUNG WOMEN'S CHRISTIAN	ASSOCIATION OF YORK			
Add		label or	Doing Business As			23-1360889 E Telephone nu	
Nan	ne cha	nge print or type. See	Joing Business / is			•	
Initi	al retu	rn Specific Instruc-		x if mail is not delivered to street addre	ess) Room/suite	(717) 845-2	
Terr	mınate	d tions.	320 EAST MARKET STREET			G Gross receipts \$	5 6,324,440
Ame	ended	return	City or town, state or country,	and ZIP + 4		1	
— _{App}	lication	n pending	YORK, PA 17403				
		F Na	me and address of principal	officer	H(a) Is th	■ ıs a group return	for
			A STOCK			ates?	⊤Yes ▼ No
			AST MARKET STREET PA 17403		11/h) A		Ev. Ev.
					1	II affiliates include	ed? Yes No (see instructions)
I Tax	-exen	npt status 🔽 501(c	c) (3) ◀ (insert no)	a)(1) or	I	o, attach a hist ip exemption nur	
J W	ebsite	e: ► www.ywcayorl	< org] ` ´		
K Form	n of or	ganization 🔽 Cornora	ition Trust Association Of	her 🌬	I Vear of fo	ormation 1891 M	State of legal domicile PA
Par		Summary	ition prosecution of	Hei F	L real of it	illiation 1891 14	State of legal doffficile PA
	1		ne organization's mission or	most significant activities			
.,		to eliminate racisi	m, empower women, and pro	mote peace, justice, freedom, an	d dignity for a	<u>II </u>	
Governance							
≅							
፮	2	Check this box	if the organization discon	tinued its operations or disposed	of more than	25% of its net a	ssets
ទី	3	•		ody (Part VI, line 1a)			1
ან თ	4	_	-	governing body (Part VI, line 1			1
Activities &	5		mployees (Part V , line 2a)		-,		23
፤	6		olunteers (estimate if neces				40
~	7a		·	Part VIII, column (C), line 12		_	-30,98
		-	iness taxable income from F	, , , , , , , , , , , , , , , , , , , ,	· •	7b	
				,	Pric	or Year	Current Year
	8	Contributions an	d grants (Part VIII. line 1h)			5,113,210	3,900,008
ē.	9					1,982,064	1,971,190
Ravenue	10			nes 3, 4, and 7d)		-422,661	-52,703
2	11			5, 6d, 8c, 9c, 10c, and 11e)		119,278	99,324
	12			: equal Part VIII, column (A), lın	e		
		12)	· · · · · · · · ·	<u> </u>		6,791,891	5,917,819
	13	Grants and simil	ar amounts paid (Part IX, co	olumn (A), lines 1-3)		92,435	100,599
	14	•		umn (A), line 4)			0
g.	15	·	ompensation, employee ben	efits (Part IX, column (A), lines	5-	4,222,461	4,443,700
Expenses	16a	10)	draising fees (Part IX colum	nn (A), line 11e)		1,222,101	1,113,733
÷	ь		penses (Part IX, column (D), line 2				
ا ۵	17		, , , , , , , , , , , , , , , , , , , ,	.1a-11d, 11f-24f)		2,210,958	2,030,626
	18			al Part IX, column (A), line 25)		6,525,854	6,574,925
	19			m line 12		266,037	-657,106
ኤ ው			, 535		Beginnin	g of Current	, , , , , , , , , , , , , , , , , , ,
Net Assets or Fund Balances					_	rear	End of Year
3.45 2.45 3.45	20		rt X, line 16)			13,163,133	14,780,706
골품	21	Total liabilities (Part X, line 26)			2,220,982	4,357,309
	22		nd balances Subtract line 2	1 from line 20		10,942,151	10,423,397
Par	t II	Signature Bl					
				ined this return, including accompanying n of preparer (other than officer) is base			
			,	. , , , , , , , , , , , , , , , , , , ,		F-F-10	,
Sign		*****				-05-02	
Here	•	Signature of office	er		Date		
			HIEF EXECUTIVE OFFICER				
		Type or print nan	ne and title				
		Preparer's Dougl	as L Berman		Check If self-	Preparer's identify (see instructions)	
Paid		signature Dougl	as L DCIIIIdii		empolyed 🕨 🦵	(See matructions)	
Prepa		Firm's name (or yours PARENTEBEARD LLC				ETN &	
Use C	Only	ıf self-employed), address, and ZIP + 4	Suite 200 221 W PHILADELPI	HIA ST		EIN Þ	
						Phone no 🕨 (71	7) 846-7000
May +	he TD	S discuss this rati	YORK, PA 174012993	above? (see instructions)			▼ Yes
∙ıay L	HG TK	o uiocuss tilis iett	ann with the preparer Shown (anose, (see mismachioms)			1. 169 IAO

Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

Total program service expenses►\$

The purpose of the YWCA York is to work proactively and collaboratively to provide programs that promote racial justice, empower women, eliminate domestic violence, sexual assault and other violent crimes, and strengthen our community

2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	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?
	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 \$ 2,818,274 including grants of \$ 58,499) (Revenue \$ 1,346,196)
	Children and Youth Programs Our Learning Centers provide nurturing and educational environments for hundreds of children each year. We serve infants, toddlers, preschoolers, and school-age children. Our classrooms are places where children develop early literacy and math skills, and learn to respect the earth and each other. Our commitment to end discrimination and promote peace, justice, freedom and dignity for all people is reflected throughout our curriculum, special events and classrooms. As caregivers to more than 600 children, we are committed to reducing the stress of our working parents who rely on us for affordable and quality child care programs. Our Youth Programs focus on the strengths of young people and challenge them to expect and create great things in their lives. Youth can explore new worlds, discover full potential, and develop toward healthy adulthood. The Temple Guard Drill Team is a mentoring program based on discipline and focus that trains youth in grades K-12 in military-style boot camp marching and dance. Drill team members perform approximately twice a month across the midstate region. The Quantum Opportunities Program (QOP) is an after-school program for youth in grades 9-12 that focuses on education, community service, and life-skills development. Program participants fulfill daily requirements and earn incentive escrow payments to help fund continuing education and the expenses associated with higher education. Learning Centers. A total of 601 children and their families were supported through YWCA licensed learning programs. Provided 80 youth with a summer camp full of educational experiences at Camp Cann-Edi-On. Approximately 60% of our YWCA children received financial assistance in 2009 - All Pre-K Counts teachers received Teaching Certification in Early Childhood Education. Fairly Learning Centers on Market Street, King Street and in Manchester all maintained their four-star status in the Keystone Stars quality initiative and NAEYC accreditation. Early Learning Centers at York
	(Code) (Expenses \$ 1,880,116 including grants of \$ 28,739) (Revenue \$ 200,991)
4b	Victims Services 2010 marks the 30th Anniversary of Access-York, a program of the YWCA York since 2008 which is dedicated to the elimination of domestic violence by providing safe shelter, counseling and advocacy to victims and their children. Victim Assistance Center has been a program of the YWCA since 2009 and is York's premier provider of counseling, education and legal advocacy services to victims of sexual assault and other violent crimes. As a comprehensive victim services center, our services include. 24-hour hotline, emergency safe shelter, transitional housing, information and referrals, hospital response, individual and group counseling for adults and children, legal advocacy, medical advocacy, abuse and sexual violence prevention education, and community outreach FY10. Accomplishments-Implemented new programs for young clients, such as FISH, a support group for young boys and Teen Time, a monthly group for girls. Spearheaded a joint effort with York Hospital to train SAFE nurses and victim services volunteers using the Hospital's simulation labs. Agency staff was trained by the District Attorney's office on the SAVIN system, an automated victim notification system regarding the transfer, release or escape of convicted offenders. Responded to 19,357 hotline calls which was an increase of 6.6% from prior year. Reached 22,027 community members through prevention education programs. Provided emergency shelter and housing to 253 adults and 237 children during the fiscal year. Provided life skills training, counseling, legal advocacy and long term housing to 1,914 adults and 609 children during the fiscal year.
4c	(Code) (Expenses \$ 488,449 including grants of \$ 13,361) (Revenue \$ 309,130) Health & Fitness Our Fitness and Aquatics programs focus on preventing health problems in adults and developing healthy habits in youth, improving the quality of life for people of all ages through physical fitness and health education. Our programs strengthen bodies and build self-esteem and confidence. Young people learn the value of teamwork and the importance of safety while developing skills that will last a lifetime FY10 Accomplishments-\$13,361 in scholarships for free or discounted services was given to participants -Over 1,000 community members received private swim lessons providing life-saving skills to hundreds of children and adults -The newly renovated fitness center was unveiled in May with a grand reopening celebration and free Zumba classesUpdates and renovations to the Aquatics Center were completed in the spring -The York Synchro-ettes, the only competitive synchronized swimming team in the area, performed Beauty and the Beast and CinderellaExpanded Girls on the Run program to include seven schools in York County serving over 180 junior high school girls.
	Other presume conveces (December in Schodule O.) See also Additional Data for December.
4d	Other program services (Describe in Schedule O) See also Additional Data for Description (Expenses \$ 211,406 including grants of \$) (Revenue \$ 114,873)

5,398,245

Part IV	Checklis	t of	Red	uire	d 9	Sche	dules
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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	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		N o
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes	
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		Νο
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		Νο
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Νο
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	Yes	
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		Νο
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, line10? 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	Į		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Νο
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? <i>If "Yes," complete Schedule F, Part II</i>	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		Νο
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? <i>If</i> "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? <i>If</i> "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		N o
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νo

Par	t 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? If "Yes," complete Schedule I, Parts I and II	21		Νo
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? If "Yes," complete Schedule I, Parts I and III	22	Yes	
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? If "Yes," complete Schedule J	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? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Νο
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		Νo
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? If "Yes," complete Schedule L, Part II	26		Νo
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? If "Yes," complete Schedule L, Part III	27		Νo
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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
		28a		Νo
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Νο
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? If "Yes," complete Schedule L, Part IV	28c		Νo
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		Νο
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νο
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		Νο
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Νo
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		Νo
	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		Νo
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		Νο
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Νο
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	

	990 (2009)			Page :
Pai	rt V Statements Regarding Other IRS Filings and Tax Compliance			l
1_	Enter the number reported in Boy 2 of Form 1006. Applied Cummery and Transmitted		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
	1a 29			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements filed for the calendar year ending with or within the year covered by this return			
Ь	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)	2b	Yes	
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	Yes	
Ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
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		l No
ь	,			
	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		Νο
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).			
а	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		No
Ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No.
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
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 a	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?	9a		
a b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club 10b	1		
	facilities	1		
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
Ь	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	year 12b			

320 EAST MARKET STREET

YORK, PA 17403 (717) 845-2631

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.

Se	ction A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body	1a	18			
b	Enter the number of voting members that are independent	1b	18			
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?			2		Νο
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management con			3		Νο
4	Did the organization make any significant changes to its organizational documents s filed?		•	4		Νο
5	Did the organization become aware during the year of a material diversion of the orga	nızət	ion's assats?	5		No
6	Does the organization have members or stockholders?			6	Yes	NO
_	-			-	res	
7a	Does the organization have members, stockholders, or other persons who may elect governing body?			7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockhold			7b		Νo
8	Did the organization contemporaneously document the meetings held or written action year by the following	ons ur	ndertaken during the			
а	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, organization's mailing address? If "Yes," provide the names and addresses in Schede			9		Νο
Se	ction B. Policies (This Section B requests information about policies not					
Re	venue Code.)	•	•			
					Yes	No
10a	Does the organization have local chapters, branches, or affiliates ?	•		10a		Νo
Ь	If "Yes," does the organization have written policies and procedures governing the adaffiliates, and branches to ensure their operations are consistent with those of the or			10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing	ng boo	ly before filing the form?			
		_		11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Fo	orm 9	90			
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 to conflicts?	ıntere •	sts that could give rise	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance wit 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 revi independent persons, comparability data, and contemporaneous substantiation of th		• • •			
а	The organization's CEO, Executive Director, or top management official			15a	Yes	
	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 of taxable entity during the year?			16a		Νο
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization in joint venture arrangements under applicable federal tax law, and take					
	organization's exempt status with respect to such arrangements?			16b		
Se	ction C. Disclosure				I	
17	List the States with which a copy of this Form 990 is required to be filed▶PA					
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable	1), 99	0, and 990-T (501(c)			
	(3)s only) available for public inspection. Indicate how you make these available. Ch. Own website. A nother's website. Upon request					
19	Describe in Schedule O whether (and if so, how), the organization makes its governir interest policy, and financial statements available to the public See Additional Data	-	•			
20	State the name, physical address, and telephone number of the person who possesse			ie orga	nızatıor	ı - -
	Nanette Bunner Coo			3-		

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed

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

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

Check this box if the organization did i	not compen	ffice	r, dırector, trustee	or key employee						
(A) Name and Title	(B) Average hours per	Posi t	(C tion (hat a	ched	ckal)	I		(D) Reportable compensation from the	(F) Estimated amount of other	
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See add'l data										

For	m 990 (2009)				Page	
1b	Total	232,383	0		22,28	
2	Total number of individuals (including but not limited to those listed above) who receive \$100,000 in reportable compensation from the organization 1	d more than	•			
				Yes	No	
3	Did the organization list any former officer, director or trustee, key employee, or highest on line 1a? <i>If</i> " <i>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 cororganization and related organizations greater than \$150,000? If "Yes," complete Schedu individual	•	4	Yes		
5	Did any person listed on line 1a receive or accrue compensation from any unrelated orgonal rendered to the organization? If "Yes," complete Schedule J for such person		5		No	
s	ection B. Independent Contractors					
1	Complete this table for your five highest compensated independent contractors that rec \$100,000 of compensation from the organization	eived more than				
	(A) Name and business address	(B) Description of services		(C Comper		
2700	Kinsley Construction Inc 2700 Water Street York, PA 17405 Renovation of 320 E Market St Building					

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 🗗

Form **990** (2009)

	Form 990 (2009) Part VIII Statement of Revenue									
Part	<u> </u>	Statement o	or 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		
ıts its	1a	Federated camp	paigns 1a	462,556						
g ja	ь	Membership du	es 1b							
is, ∈	С	Fundraising eve	ents 1c							
<u>≅</u> ,⊒	d		rations 1d							
A. E.S.	e	Government grants								
Contributions, gifts, grants and other similar amounts	f g	sımılar amounts no	butions included in	1,195,831						
Se	h	Total. Add lines	s 1a-1f	▶	3,900,008					
				Business Code						
enu.	2a	Educational, Recrea	atio	624,200	1,956,272	1,956,272				
Program Serwce Revenue	b	membership dues		713,940	14,918	14,918				
	с									
	d									
Ē	e									
20 22	f	All other progra	ım service revenue							
Š	g	Total. Add lines	s 2a-2f		1,971,190					
	3	Investment inc	ome (including dividen	ds, interest						
			ar amounts)	-	82,934			82,934		
	4		tment of tax-exempt bond p	· · · · · · · · · · · · · · · · · · ·						
	5	Royalties	(ı) Real	(II) Personal						
	6a	Gross Rents	84,526	(II) I CISOIIII						
	ь	Less rental	73,889							
	С	expenses Rental income	10,637							
	d	or (loss) Net rental incor	me or (loss)		10,637		-30,989	41,626		
			(ı) Securities	(II) O ther						
	7a	Gross amount from sales of assets other than inventory	120,911							
	Ь	Less cost or other basis and	100,615	155,933						
	С	sales expenses Gain or (loss)	20,296	-155,933						
	d		s)		-135,637			-135,637		
ine	8a	Gross income fi events (not incl \$								
Other Revenue			reported on line 1c) e 18	163,788						
her	ь	Less direct exp	penses b	76,184						
ŏ	с	Net income or (loss) from fundraising	events 🕨	87,604			87,604		
	9a	Gross income fi See Part IV, lin	rom gaming activities e 19 a							
	b c		penses b loss) from gaming activ	vities						
	10a	Gross sales of returns and allo								
	b c		oods sold b loss) from sales of inve	entory ►						
		Miscellaneous	s Revenue	Business Code						
	11a	miscellaneous	revenue	900,099	1,083			1,083		
	ь									
	С									
	d		ue							
	е	Total. Add lines	s 11a-11d		1,083					
	12	Total revenue.	See Instructions	▶	5,917,819	1,971,190	-30,989	77,610		

	990 (2009)				Page 10
Par	t IX Statement of Functional Expenses				
Δ	Section 501(c)(3) and 501(c)(4) organizations m Il other organizations must complete column (A) but are not required to			(D).	
Do no	ot include amounts reported on lines 6b, b, 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	100,599	100,599		
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	261,704	201,131	50,151	10,422
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	3,382,345	2,754,711	477,057	150,577
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	173,258	142,022	27,729	3,507
9	Other employee benefits	366,043	320,102	30,842	15,099
10	Payroll taxes	260,350	213,727	35,040	11,583
11	Fees for services (non-employees)				
а	Management				
ь	Legal	3,804	1,447	2,357	
c	Accounting	36,250	11,517	24,733	
d	Lobbying	33,233			
- e	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other	245,140	187,040	53,559	4,541
12	Advertising and promotion	6,615	,	30,005	318
13	Office expenses	243,422	145,445	71,942	26,035
14	Information technology	48,657	22,438	21,606	4,613
15	Royalties	10,037	22,130	21,000	.,,,,,
16	Occupancy	282,934	261,763	14,415	6,756
17	Travel	93,415	92,616	469	330
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	33,113	32,610	.05	
19	Conferences, conventions, and meetings	18,404	17,111	994	299
20	Interest	16,310	8,469	7,841	
21	Payments to affiliates	34,413	,	34,413	
22	Depreciation, depletion, and amortization	259,639	211,460	36,620	11,559
23	Insurance	161,496	130,945	22,889	7,662
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)				 _
а	PROGRAM COSTS	333,014	330,071	2,664	279
b	FOOD	170,203	169,778	212	213
c	DUES	27,491	24,869	2,322	300
d	continuing education	22,071	20,871	1,200	
е	pool supplies	10,408	10,408		
f	All other expenses	16,940	13,408	2,932	600
25	Total functional expenses. Add lines 1 through 24f	6,574,925	5,398,245	921,987	254,693
26	Joint costs. Check here ► ☐ 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				
		•			

Pa	rt X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing				1	1,050
	2	Savings and temporary cash investments				2	41,395
	3	Pledges and grants receivable, net			4,522,051	3	3,099,543
	4	Accounts receivable, net			95,633	4	86,119
	5	Receivables from current and former officers, directors, trustees highest compensated employees. Complete Part II of	s, key	employees, and			
		Schedule L				5	
	6	Receivables from other disqualified persons (as defined under s persons described in section $4958(c)(3)(B)$ Complete Part II of		4958(f)(1)) and			
		Schedule L				6	
ssets	7	Notes and loans receivable, net				7	
88	8	Inventories for sale or use				8	
٧	9	Prepaid expenses and deferred charges			65,777	9	48,479
	10a	Land, buildings, and equipment cost or other basis <i>Complete</i> Part VI of Schedule D	10a	12,185,902			
	ь	Less accumulated depreciation	10b	2,924,156	6,430,748	10c	9,261,746
	11	Investments—publicly traded securities		1,177,057	11	1,313,288	
	12	Investments—other securities See Part IV, line 11		848,938	12	905,737	
	13	Investments—program-related See Part IV, line 11		13			
	14	Intangible assets		14			
	15	Other assets See Part IV, line 11	22,929	15	23,349		
	16	Total assets. Add lines 1 through 15 (must equal line 34)			13,163,133	16	14,780,706
	17	Accounts payable and accrued expenses .			1,418,264	17	787,355
	18	Grants payable				18	
	19	Deferred revenue			306,696	19	223,935
	20	Tax-exempt bond liabilities				20	
<u>.</u>	21	Escrow or custodial account liability Complete Part IV of Schedul	eD.		50,132	21	41,478
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
ä		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties			445,890	23	3,304,541
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities Complete Part X of Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			2,220,982	26	4,357,309
s O		Organizations that follow SFAS 117, check here ▶ and comp	lete li	ines 27			
ĕ	27	through 29, and lines 33 and 34. Unrestricted net assets			6,076,659	27	6,896,307
<u>ಣ</u>	28	Temporarily restricted net assets			4,415,040		3,047,751
<u> </u>	29	Permanently restricted net assets		450,452		479,339	
Fund Balance	23	Organizations that do not follow SFAS 117, check here ► an	d com	unlet e	750,452	23	
<u>.</u>		lines 30 through 34.	iu com	ipiete			
S O.	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
455	32	Retained earnings, endowment, accumulated income, or other fu				32	
Net /	33	Total net assets or fund balances			10,942,151	33	10,423,397
Ż	34	Total liabilities and net assets/fund balances			13,163,133		14,780,706
	<u> </u>	,			1		,

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νo
b	Were the organization's financial statements audited by an independent accountant?	2b	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	2c	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			
	▼ Separate 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?	3a	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	3b	Yes	

Form **990** (2009)

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

Inspection

		e organiz		TION OF YORK			Employer identification r	umber
1001	O WON	LIV 5 CIIICL	TIMIN ASSOCIA	TION OF TORK			23-1360889	
Pa	rt I	Reas	on for Pul	olic Charity State	us (All organizations r	nust complete this pai		
The	organiz					n 11, check only one box		
1	\vdash	A churc	h, conventio	on of churches, or ass	sociation of churches see	ction 170(b)(1)(A)(i).		
2	\sqcap	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)						
3	Г	A hospi	tal or a coop	perative hospital serv	rice organization describe	ed in section 170(b)(1)(A)(iii).	
4	Γ			organization operate y, and state	ed in conjunction with a ho	ospital described in secti	on 170(b)(1)(A)(iii). Ente	erthe
5	Г	An orga	nızatıon ope	rated for the benefit	of a college or university	owned or operated by a g	overnmental unit describ	_ ed ın
		section	170(b)(1)(A	A)(iv). (Complete Pa	rt II)			
6	Γ	A federa	al, state, or l	local government or o	governmental unit descril	oed in section 170(b)(1)(A)(v).	
7	Γ	describ	ed in	t normally receives a	·	upport from a government	al unit or from the genera	l public
8	Г				170(b)(1)(A)(vi) (Comp	lete Part II)		
9	✓	A n orga	nization tha	t normally receives	(1) more than 331/3% of	ıts support from contribu	tions, membership fees, a	nd gross
							l (2) no more than 331/3%	
		ıts supp	ort from gro	ss investment incom	ne and unrelated business	s taxable income (less se	ction 511 tax) from busir	iesses
		acquire	d by the org	anızatıon after June 3	30, 1975 See section 50	9(a)(2). (Complete Part 1	III)	
10		A n orga	nızatıon org	anized and operated	exclusively to test for pu	blic safety See section 5 0	09(a)(4).	
11	Γ	one or r	nore publicly	supported organizat	tions described in section rting organi <u>za</u> tion and co	* *	ons of, or to carry out the 19(a)(2) See section 509 (11h d Type II	(a)(3). Check
e f g	Γ	other th section If the or check t Since A	an foundation 509(a)(2) Tganization r his box ugust 17, 2	on managers and other	er than one or more public	cly supported organizatio	by one or more disqualifiens described in section 5 I or Type III supporting the	09(a)(1) or
			g persons?	actly or indirectly co	ntrole outhor plane or too	iothar with parcage dascr	whad in (ii)	V N-
					the supported organizati	jether with persons descr on?	11g(i)	Yes No
				r of a person describe		OII.	11g(ii)	
			•	•	described in (i) or (ii) abo	2V42	11g(iii)	
h					he supported organizatio		[119(III]	1 1
		Provide	the lollowin	g information about t	ne supported organizatio	n(s)		
	(i) Name suppoi organiz	of rted	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section	(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 US?	(vii) A mount of support?

Yes

No

instructions))

Total

Yes

ınstructions

P	Support Schedule (Complete only if yo					and 170(b)	(1)(A)(vi)
S	ection A. Public Support	a checked tile	DOX OII IIIC 3,	,, or o or rare.	÷·/		
	endar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	(b) 2006	(6) 2007	(d) 2008	(e) 2009	(I) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual						
_	grants ") Tax revenues levied for the						
2	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						
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) Dublic Support Subtract line F from						
6	Public Support. Subtract line 5 from line 4						
S	ection B. Total Support	1		-			
	endar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	(b) 2000	(6) 2007	(d) 2008	(e) 2009	(1) Total
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
9	sources Net income from unrelated						
9	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						
11	Total support (Add lines 7						
4.5	through 10)	/5					
12	Gross receipts from related activities	,	•			12	
13	First Five Years If the Form 990 is f	or the organizati	on's first, second	, third, fourth, or	fifth tax year as a	501(c)(3) orga	inization, ▶□
	check this box and stop here						-1
S	ection C. Computation of Pub	lic Support P	ercentage				
14	Public Support Percentage for 2009			11 column (f))		14	
15	Public Support Percentage for 2008	Schedule A . Pa	rt II. line 14			15	
	33 1/3% support test—2009. If the	•	,	v on line 13 and	line 14 is 33 1/30		k this hox
	and stop here. The organization qua	-		·	IIIIC 14 13 33 1/3/	o or more, ence	▶ □
ь	33 1/3% support test—2008. If the				5a, and line 15 is	33 1/3% or moi	
	box and stop here. The organization				,		▶
17a	10%-facts-and-circumstances test-	-2009. If the org	anızatıon dıd not	check a box on lı	ne 13, 16a, or 16	b and line 14	
	ıs 10% or more, and ıf the organizat						
	in Part IV how the organization mee	ts the "facts and	l cırcumstances"	test The organiz	ration qualifies as	a publicly supp	
L	organization	_2009 Ifthe c==	onization did net	chack a bay as li	no 12 165 164	or 17a and line	▶□
D	10%-facts-and-circumstances test- 15 is 10% or more, and if the organ	_					
	Explain in Part IV how the organizat						clv
	supported organization						▶ ┌
10	Deiveta Farmdation Ifthe averages	on did not obselv	a hay an line 12	16- 16- 17-	17	hay and cas	•

▶□

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

(Complete only if you checked the box on line 9 of Part I.)

Se	ction A. Public Support						
Cale	ndar 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")	12,247,610	1,496,499	7,273,163	5,113,210	3,900,008	30,030,49
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	1,412,382	1,577,888	1,659,847	1,982,064	1,971,190	8,603,37
3	Gross receipts from activities that are not an unrelated trade or business under section 513	97,540	69,314	99,689	15,830	87,604	369,97
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	13,757,532	3,143,701	9,032,699	7,111,104	5,958,802	39,003,83
7a	A mounts included on lines 1, 2, and 3 received from disqualified persons		158,080	345,000		104,312	607,39
b	A mounts 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 Add lines 7a and 7b		158,080	345,000		104,312	607,39
8 8	Public Support (Subtract line 7c		150,000	3+3,000		104,312	
	from line 6)						38,396,44
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	A mounts from line 6	13,757,532	3,143,701	9,032,699	7,111,104	5,958,802	39,003,83
10a	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties and income from similar sources	136,845	143,705	135,490	141,117	126,060	683,21
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b	136,845	143,705	135,490	141,117	126,060	683,21
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	86,909	181,414	5,274	18,373	1,083	293,05
13	Total support (Add lines 9, 10c,	13,981,286	3,468,820	9,173,463	7,270,594	6,085,945	39,980,10
14	11 and 12) First Five Years If the Form 990 is for check this box and stop here	r the organization	n's first, second,	thırd, fourth, or fı	fth tax year as a	501(c)(3) organı	zation,
Se	ction C. Computation of Publ	ic Support Per	rcentage				
15	Public Support Percentage for 2009			.3 column (f))		15	96 040 %
16	Public support percentage from 200	8 Schedule A, Pai	rt III, line 15			16	94 990 %
Se	ction D. Computation of Inve						
17	Investment income percentage for 2				(f))	17	1 710 %
	Investment income percentage from	2008 Schedule A	Part III line 17	7		18	1 910 %

19a 33 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

33 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

Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Part IV

Supplemental Information. 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

Schedule A (Form 990 or 990-EZ) 2009

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

DLN: 93493126011051

OMB No 1545-0047

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

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

Open to Public Inspection

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

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

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

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

	e organization answered "Ye ection 501(c)(4), (5), or (6) organi	t have NOT filed Form 5768 (elections," to Form 990, Part IV, Line 5 zations Complete Part III		m 990-EZ, line 35a (regar	ding proxy tax), then
	ime of the organization UNG WOMEN'S CHRISTIAN ASSOCIATIO	N OF YORK		Employer ider	itification number
				23-1360889	
Pai	t I-A Complete if the or	ganization is exempt und	er section 501(c) or is a section 527	organization.
1	Provide a description of the or	ganızatıon's dırect and ındırect po	olitical campaign ac	tivities in Part IV	
2	Political expenditures			▶	\$
3	V olunteer hours				
Pai	rt I-B Complete if the or	ganization is exempt und	er section 501(c)(3).	
1	Enter the amount of any excise	e tax incurred by the organization	under section 495!	5	\$
2	Enter the amount of any excise	e tax incurred by organization ma	nagers under sectio	n 4955 🕨	\$
3	If the organization incurred a s	section 4955 tax, did it file Form	1720 for this year?		┌ Yes
4a	Was a correction made?				┌ Yes
b	If "Yes," describe in Part IV				
Pai	t I-C Complete if the or	ganization is exempt und	er section 501(c) except section 50:	1(c)(3).
1	Enter the amount directly expe	ended by the filing organization fo	r section 527 exem	pt function activities 🕨	\$
2	Enter the amount of the filing of exempt funtion activities	organization's funds contributed to	o other organization	s for section 527	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter he	ere and on Form 112	20-POL, line 17b	¢
4	Did the filing organization file I	Form 1120-POL for this year?			↑ Yes No
State the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of politic contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregate fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.					
5	were made For each organizat contributions received that we	ion listed, enter the amount paid i re promptly and directly delivered	from the filing organ I to a separate polit	ızatıon's funds Also enter t ıcal organızatıon, such as a	s to which payments the amount of political
5	were made For each organizat contributions received that we	ion listed, enter the amount paid i re promptly and directly delivered	from the filing organ I to a separate polit	ızatıon's funds Also enter t ıcal organızatıon, such as a	to which payments the amount of political separate segregated (e) A mount of political contributions received
5	were made For each organizat contributions received that we fund or a political action comm	tion listed, enter the amount paid to tre promptly and directly delivered nittee (PAC) If additional space is	from the filing organ I to a separate polit s needed, provide in	ization's funds Also enter t ical organization, such as a iformation in Part IV (d) Amount paid from filing organization's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,
5	were made For each organizat contributions received that we fund or a political action comm	tion listed, enter the amount paid to tre promptly and directly delivered nittee (PAC) If additional space is	from the filing organ I to a separate polit s needed, provide in	ization's funds Also enter t ical organization, such as a iformation in Part IV (d) Amount paid from filing organization's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,
5	were made For each organizat contributions received that we fund or a political action comm	tion listed, enter the amount paid to tre promptly and directly delivered nittee (PAC) If additional space is	from the filing organ I to a separate polit s needed, provide in	ization's funds Also enter t ical organization, such as a iformation in Part IV (d) Amount paid from filing organization's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,
5	were made For each organizat contributions received that we fund or a political action comm	tion listed, enter the amount paid to tre promptly and directly delivered nittee (PAC) If additional space is	from the filing organ I to a separate polit s needed, provide in	ization's funds Also enter t ical organization, such as a iformation in Part IV (d) Amount paid from filing organization's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,
5	were made For each organizat contributions received that we fund or a political action comm	tion listed, enter the amount paid to tre promptly and directly delivered nittee (PAC) If additional space is	from the filing organ I to a separate polit s needed, provide in	ization's funds Also enter t ical organization, such as a iformation in Part IV (d) Amount paid from filing organization's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,
5	were made For each organizat contributions received that we fund or a political action comm	tion listed, enter the amount paid to tre promptly and directly delivered nittee (PAC) If additional space is	from the filing organ I to a separate polit s needed, provide in	ization's funds Also enter t ical organization, such as a iformation in Part IV (d) Amount paid from filing organization's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,
5	were made For each organizat contributions received that we fund or a political action comm	tion listed, enter the amount paid to tre promptly and directly delivered nittee (PAC) If additional space is	from the filing organ I to a separate polit s needed, provide in	ization's funds Also enter t ical organization, such as a iformation in Part IV (d) Amount paid from filing organization's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,
5	were made For each organizat contributions received that we fund or a political action comm	tion listed, enter the amount paid to tre promptly and directly delivered nittee (PAC) If additional space is	from the filing organ I to a separate polit s needed, provide in	ization's funds Also enter t ical organization, such as a iformation in Part IV (d) Amount paid from filing organization's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,
	were made For each organizat contributions received that we fund or a political action comm	tion listed, enter the amount paid to tre promptly and directly delivered nittee (PAC) If additional space is	from the filing organ I to a separate polit s needed, provide in	ization's funds Also enter t ical organization, such as a iformation in Part IV (d) Amount paid from filing organization's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,
5	were made For each organizat contributions received that we fund or a political action comm	tion listed, enter the amount paid to tre promptly and directly delivered nittee (PAC) If additional space is	from the filing organ I to a separate polit s needed, provide in	ization's funds Also enter t ical organization, such as a iformation in Part IV (d) Amount paid from filing organization's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Pa	Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).							
	Check If the filing organization belongs to a Check If the filing organization checked box		d" provisions apply	,				
<u> </u>	Limits on Lobbying E (The term "expenditures" means ar	Expenditures			(a) Filing Organization's Totals	(b) Affiliated Group Totals		
1a	Total lobbying expenditures to influence public o	ppinion (grass roots lob	ıbyıng)					
b	Total lobbying expenditures to influence a legisla	ative body (direct lobby	yıng)					
c	Total lobbying expenditures (add lines 1a and 18	b)						
d	Other exempt purpose expenditures							
e	Total exempt purpose expenditures (add lines 1	c and 1d)						
f	Lobbying nontaxable amount Enter the amount f	from the following table	ın both					
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000	The lobbying nontaxa 20% of the amount on lir						
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,00	0				
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000,0	000				
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,00	00				
	Over \$17,000,000	\$1,000,000						
		•						
g	Grassroots nontaxable amount (enter 25% of lin	ne 1 f)						
h	Subtract line 1g from line 1a If zero or less, enter	er -0-						
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -						
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file F	orm 4720 repoi	rtıng	┌ Yes ┌ No		
	(Some organizations that made a columns below. See the	he instructions fo	ection do not l r lines 2a thro	nave to com ugh 2f on pa		ne five		
	Lobbying Exp	enditures During	4-Year Averag	ing Period	I	ı		
	Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total		
2a	Lobbying non-taxable amount							
b	Lobbying ceiling amount (150% of line 2a, column(e))							
c	Total lobbying expenditures							
d	Grassroots non-taxable amount							

•	•	· -	_
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)	
		Yes	No	A mount	
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				
а	Volunteers?	Yes			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes			
c	Media advertisements?		Νo		
d	Mailings to members, legislators, or the public?		Νo		
е	Publications, or published or broadcast statements?		Νo		
f	Grants to other organizations for lobbying purposes?		Νo		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		Νo		
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Νo		
i	Other activities? If "Yes," describe in Part IV		Νo		
j	Total lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No		
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		Ī		
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				

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

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

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

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

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i

Also, complete this part for any additional information

Dues, assessments and similar amounts from members

Ident if ier	Return Reference	Explanation
Part II-B, Line 1ı	, ,	The organization occassionally attempts to influence legislation
	A ctivities	by writing to state and local representatives

efile GRAPHIC print - DO NOT PROCESS

As Filed Data

DLN: 93493126011051

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Open to Public Inspection

Internal Revenue Service ► Attach to Form 990. ► See separate instructions. **Employer identification number** Name of the organization YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF YORK 23-1360889 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 Total number at end of year Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised □ No funds are the organization's property, subject to the organization's exclusive legal control? 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 Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. 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 Preservation of a certified historic structure Protection of natural habitat Preservation of open space 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 Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 the taxable year 🛌 Number of states where property subject to conservation easement is located 🛌 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year 🕨 A mount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 🕨 \$ ___ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)? 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. 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 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 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

following amounts required to be reported under SFAS 116 relating to these items

Par	Organizations Maintaining Co	llections of Art	t, His	stori	<u>cal Tr</u>	easu	ıres, or O	the	<u>r Simila</u>	r Asse	ts (co	ontinued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	ne fol	lowing t	that ar	e a significa	ant u	se of its c	ollection	ו	
а	Public exhibition		d	Γ	Loan	orexc	hange progr	ams				
b	Scholarly research		e	Γ	Other							
c	Preservation for future generations											
4	Provide a description of the organization's co Part XIV	ollections and expla	ain ho	w the	y furthe	erthed	organization	ı's ex	empt purp	ose in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t			,					ıılar	Г	Yes	Г No
Par	t IV Escrow and Custodial Arrang Part IV, line 9, or reported an an						n answere	d "Y	es" to Fo	rm 990),	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other interm	edıary	for c	ontribu	tions	or other ass	ets r	not	Γ	Yes	√ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follow	ving t	able		Г			A mou	ınt	
c	Beginning balance							1c				
d	Additions during the year							1d				
e	Distributions during the year							1e				
f	Ending balance							1f				
2a	Did the organization include an amount on Fo	orm 990, Part X. lin	e 21?				L			⊽	Yes	┌ No
	If "Yes," explain the arrangement in Part XIV									,		,
	rt V Endowment Funds. Complete		n ans	swer	ed "Ye	s" to	Form 990.	Par	t IV. line	10.		
		(a)Current Year) Prior			o Years Back		Three Years) Four Y	ears Back
1a	Beginning of year balance											
b	Contributions											
c	Investment earnings or losses											
d	Grants or scholarships											
e	Other expenditures for facilities and programs											
f	Administrative expenses											
g	End of year balance											
2	Provide the estimated percentage of the yea	r end balance held	as									
а	Board designated or quasi-endowment 🕨											
Ь	Permanent endowment 🕨											
c	Term endowment ▶											
3a	Are there endowment funds not in the posses	ssion of the organiz	ation	that	are held	danda	dministere	d for	the			
	organization by										Yes	No
	(i) unrelated organizations		•					•		3a(i)		
L	(ii) related organizations							•		3a(ii)	<u> </u> 	<u> </u>
ь 4	If "Yes" to 3a(II), are the related organization. Describe in Part XIV the intended uses of the	•						•		3b		<u> </u>
	t VI Investments—Land, Buildings					90 Pa	art X line	10				
		o, una Equipme			Cost or		(b)Cost or o		(c) Accum	ulated		
	Description of investment				ıs (ınvest		basis (other		deprecia		(d) Bo	ok value
1a	Land						176	5,182				176,182
ь	Buildings						11,068	•		375,546		8,692,531
с	Leasehold improvements						,	•	,			
	Equipment						94:	1,643		548,610		393,033
	Other							,=		,		,
	I. Add lines 1a-1e (Column (d) should equal Fo	orm 990, Part X. colu	mn (B), line	10(c).)				▶			9,261,746
	- ((-)	, , , 23,00	. (-)	.,	1-1-1	-	<u>-</u>	-		lule D (i		90) 2009
									001100	(.	01111 3	<i>30,</i> 200

Part VII Investments—Other Securities. See	Form 990, Part X, line 1:		
(a) Description of security or category	(b) Book value	(c) Method	
(including name of security)		Cost or end-of-y	ear market value
Financial derivatives			
Closely-held equity interests Other			
INTEREST IN NET ASSETS OF A COMMUNITY			
FOUNDATION	426,398		F
hanaficial interest in negotial trusts	470 220		F
beneficial interest in perpetual trusts	479,339		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	905,737		
Part VIII Investments—Program Related. See			
		(c) Method	of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-y	
Total. (Column (b) should equal Form 990, Part X, col (B) line 13) Part IX Other Assets See Form 990, Part X line			
Part IX Other Assets. See Form 990, Part X, lin	ne 15.		(b) Book value
	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	ne 15.		(b) Book value
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Part IX Other Assets. See Form 990, Part X, lin	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin (a) Descrip	ne 15. tion		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin (a) Descrip Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	ne 15. tion 5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	ne 15. tion 5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)		(b) Book value
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Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)		(b) Book value
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Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)		(b) Book value
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Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)		(b) Book value

_	lotal revenue (Form 990, Part VIII, column (A), line 12)	+	5,917,013
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	6,574,92!
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-657,100
4	Net unrealized gains (losses) on investments	4	81,55
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	56,799
9	Total adjustments (net) Add lines 4 - 8	9	138,352
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	-518,754
Par	t XIII Reconciliation of Revenue per Audited Financial Statements With Revenue	er Retur	n
1	Total revenue, gains, and other support per audited financial statements	1	5,989,417
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	71,598
3	Subtract line 2e from line 1	3	5,917,819
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
Ь	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	(
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	5,917,819
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per Ret	
1	Total expenses and losses per audited financial statements	1	6,649,564
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
ь	Prior year adjustments	1	
c	Other losses		
d	Other (Describe in Part XIV) 2d 73,889		
			74,639
e	Add lines 2a through 2d	2e	74,03
e 3	Add lines 2a through 2d	2e 3	6,574,92
	•		
3	Subtract line 2e from line 1		
3 4	Subtract line 2e from line 1		
3 4 a	Subtract line 2e from line 1		

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

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 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

Ident if ier	Return Reference	Explanation
Part IV, Line 2b		After-school program where participants in grades 9-12 fulfill daily requirements and earn financial incentives to help fund continuing education and the expenses associated with higher education Amounts earned are maintained in a separate account
Part X	Description of Uncertain Tax Positions Under FIN 48	During the year ended June 30, 2010, the Association adopted a new accounting standard, which clarifies the accounting for uncertainty in income taxes recognized in a company's financial statements and prescribes a recognition threshold of more-likely-than-not to be sustained by examination by the appropriate taxing authority. Measurment of the tax uncertainty occurs if the recognition threshold has been met. The standard also provides guidance on derecognition, classification, interest and penalties, and disclosure. Management has determined that the standard does not have material impact on the Association's financial statements. The Association's Federal exempt organization business income tax returns for the years ended June 30, 2009, 2008, and 2007 remain subject to examination by the Internal Revenue Service.
Part XI, Line 8 - Other Adjustments		CHANGE IN VALUE OF PERPETUAL TRUSTS 28887 CHANGE IN INTEREST in net assets OF A COMMUNITY Foundation 27912
Part XII, Line 2d - Other Adjustments		rental expenses 73889
Part XIII, Line 2d - Other Adjustments		rental expenses 73889

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DLN: 93493126011051

OMB No. 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

licensing

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.

	ne of the organization JNG WOMEN'S CHRISTIAN	I ASSOCIATION OF	YORK					-	tification number		
	<u></u>							23-1360889			
Pa		tivities. Completors are not required				ered "Yes"	to Form	990, Part IV	, line 17.		
1	Indicate whether the organ	nızatıon raısed funds	through a	any of the	following a	ctivities Ch	eck all th	iat apply			
а	a							ment grants			
Ь	Internet and e-mail so	licitations	f Γ Solicitation of governm					ent grants			
c	Phone solicitations			g	┌ Speci	al fundraisir	ng events				
d	☐ In-person solicitations	5									
2a	Did the organization have or key employees listed in								Г _{Yes} Г	No	
b	If "Yes," list the ten highes to be compensated at leas										
			(iii)	Dıd							
	(:) Name of and dual		fundrais custo		(iii) C ===	s receipts		nount paid to	(vi) A mount paid to	0	
	(i) Name of individual or entity (fundraiser)			ol of		ctivity	(or retained by) fundraiser listed in		(or retained by)		
			contributions?		_	col (i)	organization				
			Yes	No							
Tota	al										
					l		1		I		

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

Pai	rt II	Fundraising Events. Commore than \$15,000 on Form	plete if the organizati 990-EZ, line 6a. List	on answered "Yes" to events with gross reco	Form 990, Part IV, lin eipts greater than \$5,0	e 18, or 000.	report	ed
			(a) Event #1 Walk-A-Mile (event type)	(b) Event #2 Y-Triathlon (event type)	(c) O ther Events 5 (total number)	(d) Tot (Add col co		
Revenue	1 2	Gross receipts Less Charitable contributions	32,007	28,125	103,656		16	3,788
	3	Gross income (line 1 minus line 2)	32,007	28,125	103,656		16	3,788
	4	Cash prizes						
မွာ	5	Non-cash prizes						
Expenses	6	Rent/facility costs						
	7	Food and beverages						
Direct	8	Entertainment						
Δ	9	Other direct expenses .	8,858	11,855	55,471		7	5,184
	10	Direct expense summary Add line	es 4 through 9 in column	(d)	🕨		7	5,184
	11	Net income summary Combine lir						7,604
Par	t III	Gaming. Complete if the or \$15,000 on Form 990-EZ, lin		"Yes" to Form 990, Pa	rt IV, line 19, or repo	rted mor	e thar	1
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(d) Tot (Add col co		
	1	Gross revenue						
e Se	2	Cash prizes						
xpenses	3	Non-cash prizes						
ш	4	Rent/facility costs						
Direct	5	Other direct expenses						
	6	Volunteer labor	┌ Yes% ┌ No	Г Yes	│ Yes% │ No			
		Direct expense summary Add lines						
	8	Net gaming income summary Com	bine lines 1, column d, ai	nd line 7	•		Yes	No
9 a b	Is t	er the state(s) in which the organiza the organization licensed to operate No," Explain			 .	· 9a		
10a b		re any of the organization's gaming l Yes," Explain	ıcenses revoked, susper	nded or terminated during	the tax year?	10a		
11 12	Is t	es the organization operate gaming a the organization a grantor, beneficiar ned to administer charitable gaming	ry or trustee of a trust or	a member of a partnersh	ip or other entity	12		
					Schedule G (Form 9	90 or 990-	·EZ) 20	09

		Yes	No
13	Indicate the percentage of gaming activity operated in		
а	The organization's facility		
b	An outside facility		
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?	,	
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			
16	Gaming manager information		
	Name 🟲		
	Name F		
	Gaming manager compensation 🕨 \$		
	Description of services provided •		
	Director/officer Employee Independent contractor		
	I Director/officer I Employee I Independent contractor		
.7	Mandatory distributions		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	<u> </u>	
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 ▶ \$	1	

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OMB No 1545-0047

DLN: 93493126011051

Department of the Treasury

Schedule I

(Form 990)

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

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

Open to Public

lame of the organization						Employer identifica	ation number
OUNG WOMEN'S CHRISTIA	N ASSOCIATION	OFYORK				23-1360889	
Part I General Infor	mation on Gra	nts and Assistance					
L Does the organization m	ed to award the grai	ubstantiate the amount of the transfer of the transfer of the transfer of the used to the transfer of the tran					√ Yes ┌
Form 990, Part	IV, line 21 for ar	e to Governments and ny recipient that receive 990) if additional space	d more than \$5,000	. Check this box if n	no one recipient receiv	ed more than \$5,00	0. Use
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gran or assistance
		d government organizations				•	
	nei organizations .		· · · · · · ·	<u> </u>		<u> </u>	

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
reduced fees for fitness center, aquatic and child care programs based upon income guidelines	311	71,860		Based on 50% fee reduction	
funds spent to relocate clients who are victims of domestic violence and are not safe in the York area	44	22,000		FMV	
expenses needed to assist the domestic violence client that has left their home in an emergency (i e Clothing, toiletries, medications, essentially anything they need that had to be left behind)	362	6,739		FMV	

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Ident if ier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S		Schedule I, Part I, Line 2 The organization reduces their fees for the program, the individual receiving the assistance does not recieve the funds directly

DLN: 93493126011051

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Internal Revenue Service

Department of the Treasury

Name of the organization

Compensation Information

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.

Open to Public Inspection

YOU	JNG WOMEN'S CHRISTIAN ASSOCIATION OF YORK			
	23-1360889			
Pa	rt I Questions Regarding Compensation			
			Yes	Νo
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax idemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain	1b		No
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		Νo
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 Compensation committee Independent compensation consultant Form 990 of other organizations Approval by the board or compensation committee			
	,,,,,,,			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization	1		
а	Receive a severance payment or change-of-control payment?	4a		Νo
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Νo
	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			
а	The organization?	5a		Νo
b	Any related organization?	5b		Νo
	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			
а	The organization?	6a		No
Ь	Any related organization?	6b		Νo
	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 accured 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
۵	If "Vac" to line 9, did the organization also follow the rebuttable procumption procedure described in Pagulations			

section 53 4958-6(c)?

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

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

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

(A) Name	(B) Breakdown o	(i) Base (ii) Bonus & (iii) Other reportable		(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation reported in prior Form 990 or
		compensation	compensation				Form 990-EZ
DEBRA STOCK (I)) 147,210) 0		= - /	15,000 0	4,422 0		0

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

Ident if ier	Ret urn Ref erence	Explanation
	,	The CEO submits all travel expenses directly to the National YWCA and they are reimbursed directly on an as needed basis - if it is a national event or required meeting for national board chair Expenses paid for by the YWCA York are solely meetings and expenses to meet local CEO requirements. Those expenses are submitted to the YWCA York and paid to the CEO directly on an as needed basis.

Schedule J (Form 990) 2009

NonCash Contributions

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

OMB No 1545-0047

Inspection

Internal Revenue Service Name of the organization YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF YORK

SCHEDULE M

Department of the Treasury

(Form 990)

Employer identification number

23-1360889

Pa	rt I Types of Property			•				
		(a) Check If applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of do reven	etermı	nıng	
1	Art-Works of art	аррисавіс		- 9				
	Art—Historical treasures .							
	Art—Fractional interests							
4	Books and publications							
	Clothing and household							
-	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .							
10	Securities—Closely held stock							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Q ualified conservation							
	contribution—Other							
	Real estate—Residential .							
	Real estate—Commercial							
	Real estate—Other							
	Collectibles							
	Food inventory							
	Drugs and medical supplies .							
	Taxıdermy							
	Historical artifacts							
	Scientific specimens							
24	Archeological artifacts							
. -	PROGRAM		52	E4.642	EMV DETERMINED	BV D		
25	Other ► (COSTS)	X	52	54,043	FMV DETERMINED	יט זם	JNOK	
26	capitalized Other ► (<u>equipment</u>)	×	1	80.200	FMV DETERMINED	BY D	ONOR	
			_					
	Other ► ()							
29	Number of Forms 8283 received	by the ora	anization during the tax ve	er for contributions				
	for which the organization comp				29		Yes	No
30a	During the year, did the organiza	ation receiv	e by contribution any prope	rty reported in Part I, lines	1-28 that it			
	must hold for at least three year							
	for exempt purposes for the enti					30a		No
b	If "Yes," describe the arrangem					30a		
31	Does the organization have a gi	ft acceptano	ce policy that requires the i	review of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or us contributions?	e third part	ies or related organizations	to solicit, process, or sell	non-cash	32a		No
b	If "Yes," describe in Part II							
33	If the organization did not report describe in Part II	t revenues i	n column (c) for a type of p	roperty for which column (a) is checked,			

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Ident if ier	Return Reference	Explanation
Method for Determining Number of	Part I, Column (b)	Contributions reported are based on the number of contributions
Contributors		received

Schedule M (Form 990) 2009

Software ID: Software Version:

EIN: 23-1360889

Name: YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF YORK

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DLN: 93493126011051

2009

OMB No 1545-0047

Open to Public Inspection

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.

Name of the organization YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF YORK

23-1360889

Employer identification number

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 6		Members of YWCA of York are entitled to attend the annual meeting and vote for members of the board There are not classes of members, all members have the same rights. Members do not receive a share of the organizations profits or excess dues, nor are they entitled to a share of the organizations assets upon dissolution.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 7a		The members are entitled to attend the annual meeting and vote for the Board Members

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		The review will be conducted by the board treasurer. She will distribute a draft copy of the 990 return via email as soon as it is available and ready. Opportunity will be given to the board to ask questions and provide feedback. All feedback will be considered and addressed before the final 990 return is completed and submitted.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, Iine 12c		The organization's employee handbook outlines a conflict of interest policy for both employees and board members. In the event an employee feels that a conflict of interest may exist, the employee handbook requires full disclosure of the conflict to the CEO or his/her designee. If a conflict of interest is found to exist, the situation will be discussed and corrective action to eliminate the conflict of interest will be taken by either the employee or the YWCA. Board members are required to review the conflict of interest policy and sign the Conflict of Interest Disclosure Statement annually. Should a conflict of interest exist with a board member, they would be prohibited from voting on such matters related to the conflict. Board members must also disclose fully the nature of any potential conflict of interest, and failure to do so will be cause for immediate removal from the Board of Directors.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		The YWCA Personnel committee and the Director of Human Resources maintain a pay grade scale for the organization which includes compensation for the CEO and top management positions. Various sources and partners are used to determine and assess the salary scale annually including PANO, PCADV, PCAR. The CEO is formally reviewed annually by the organization's executive committee which includes a full board survey process. The process is documented in executive committee minutes. Recommendations for CEO salary adjustments are forwarded to the full board for approval prior to implementation.

ldentifier	Return Reference	Explanation							
Form 990, Part VI, Section C, line 18		THE ORGANIZATION MAKES ITS FORM 990 and 990-T, if any, AVAILABLE FOR PUBLIC INSPECTION ON THEIR WEBSITE Form 1023 is made available upon request							

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		THE ORGANIZATION MAKES ITS FINANCIAL STATEMENTS AVAILABLE FOR PUBLIC INSPECTION ON its WEBSITE. The conflict of interest policy and governing documents are made available upon request

ldentifier	Return Reference	Explanation
Form 990, Part XI, Line 2C		Every three years formal requests for proposal letters are submitted to interested accounting firms. Proposals are received and reviewed by the finance committee. A decision is made based upon the scope of work, the amount of fees, and the qualifications of the firm. The finance committee has responsibility for oversight of the audit. The process has not changed from the prior year.

Additional Data

(Code

Software ID: Software Version:

EIN: 23-1360889

Name: YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF YORK

) (Revenue \$

114,873)

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

) (Expenses \$

4d. Other program services

Community Initiatives Our Community Renaissance Project, also known as the Elm Street Project, seeks to improve the social, economic and physical conditions in the Olde Towne East neighborhood, an 18-block neighborhood just east of Downtown York. The main YWCA facility anchors the border of Olde Towne East. The long-term goal is to improve the quality of life for those living and working the city neighborhood FY10 Accomplishments-Crime rates continued to fall in neighborhood, bringing the rate of criminal incidents down by 24% since 2001 -The average sales price of an Olde Towne East home rose over 110% since 2000, from \$29,456 to \$63,245, compared to a 33% increase for the City of York -76% of the residents said that they planned to continue living in the neighborhood -Rehabilitated homes were showcased in the York Young Professionals Home Tour -Three family-oriented events were held that focused on safety and community partnerships with over 500 people attending

211,406 including grants of \$

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

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours		((tion (hat a	che		II		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
Romana Lı President	1 00	×		х				0	0	0
John Klinedinst secretary	1 00	х		х				0	0	0
JULIE FELPEL CPA Treasurer	1 00	Х		х				0	0	0
Margaret Driscoll President elect	1 00	Х						0	0	0
Rachel Scarpato Treasurer Elect	1 00	Х						0	0	0
Josephine Appell Board of Directors	1 00	Х						0	0	0
Brenda Brinkman board of Directors	1 00	Х						0	0	0
Mary Chambers board of Directors	1 00	Х						0	0	0
Debra Dixon Board of Directors	1 00	х						0	0	0
Peggy Fink board of Directors	1 00	Х						0	0	0
Brad Kostelich Board of Directors	1 00	х						0	0	0
Dawn Paul Board of Directors	1 00	Х						0	0	0
Michelle Pokrifka board of Directors	1 00	х						0	0	0
Leslie Saffin board of Directors	1 00	Х						0	0	0
Stephanie Seaton board of Directors	1 00	Х						0	0	0
Andrew Seebold board of Directors	1 00	х						0	0	0
Keith Wentz board of Directors	1 00	х						0	0	0
Julie Dietz-Wheeler board of Directors	1 00	Х						0	0	0
DEBRA STOCK Chief Executive Officer	40 00			х				162,210	0	19,422
nanette bunner chief operations officer	40 00			х				70,173	0	2,859

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
PROGRAM COSTS	333,014	330,071	2,664	279
FOOD	170,203	169,778	212	213
DUES	27,491	24,869	2,322	300
continuing education	22,071	20,871	1,200	
pool supplies	10,408	10,408		