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DLN: 93493135032412

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

2010

OMB No 1545-0047

Open to Public Inspection

▶ The organization may have to use a copy of this return to satisfy state reporting requirements A For the 2010 calendar year, or tax year beginning 07-01-2010 and ending 06-30-2011

_	eck ıf a dress ch		D Employer identification number 23-1360889			
— _{Na}	me cha	Doing Business As YMCA YORK		E Telephone	number	
_	ial retu minate	220 EAST MARKET STREET	Room/suite	(717)845	-2631	
_	ended	return City or town, state or country, and ZIP + 4 YORK, PA 17403		G Gross receip	ts \$ 6,949,768	
		F Name and address of principal officer DEBRA STOCK 320 EAST MARKET STREET			ates ⁷ Yes No	
• To	v ovom	YORK, PA 17403 npt status	If "No	affiliates included? ," attach a list o exemption nu	: (see instructions)	
		e: WWW Y W CAYORK ORG	-			
		ganization ✓ Corporation ✓ Trust ✓ Association ✓ Other ►	L Year of for	nation 1901	M State of legal domicile PA	
	n or on rt I	Summary	L Year or for	nation 1891 I	State or legal domicile PA	
Activities & Governance		Briefly describe the organization's mission or most significant activities TO ELIMINATE RACISM, EMPOWER WOMEN, AND PROMOTE PEACE, JUS	ΓΙCE, FREEDOI	M, AND DIGN	ITY FOR ALL	
<u> </u>	2	Check this box 🔭 if the organization discontinued its operations or disposed	of more than 25	5% of its net a	ssets	
3	3	Number of voting members of the governing body (Part VI, line 1a)		3	17	
eo Vi	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	17	
E E	5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)		5	216	
5	6	Total number of volunteers (estimate if necessary)		6	307	
4	1	Total unrelated business revenue from Part VIII, column (C), line 12		7a	750	
	Ь	Net unrelated business taxable income from Form 990-T, line 34		7b	-65	
			Prior	Year	Current Year	
venue	8	Contributions and grants (Part VIII, line 1h)	3,900,008	3,771,228		
	9	Program service revenue (Part VIII, line 2g)	1,971,190	2,228,242		
Æ	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-52,703	176,536		
	11 12	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), lii 12)	ne	99,324 5,917,819	6,388,906	
	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)		100,599	111,351	
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0		
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines $5-10$)		4,443,700	4,524,199	
<u>₹</u>	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0	0	
五	Ь	Total fundraising expenses (Part IX, column (D), line 25) ► 226,104				
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		2,030,626	2,526,601	
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		6,574,925	7,162,151	
Net Assets or Fund Balances	19	Revenue less expenses Subtract line 18 from line 12		-657,106 of Current	-773,245 End of Year	
6 A	20	Total assets (Part X, line 16)		14,780,706	13,730,701	
72	21	Total liabilities (Part X, line 26)		4,357,309	3,789,631	
žÏ	22	Net assets or fund balances Subtract line 21 from line 20		10,423,397	9,941,070	
Pa	rt II	Signature Block	_			
(now (now	ledge : ledge.	*****	er) is based on a	II information o		
Sigr Her		Signature of officer DEBRA STOCK CHIEF EXECUTIVE OFFICER Type or print name and title	Dat	ac		
امام		preparer's name JULIUS GREEN CPA JULIUS GREEN CPA		heck if self- mployed 🕨	PTIN	
Paid Prepa	aror	Firm's name PARENTEBEARD LLC			Firm's EIN 🕨	
		Firm's address FSUITE 200 221 W PHILADELPHIA ST			Phone no 🕨 (717) 846-	
	Only	YORK, PA 174012993			7000 \	

Form	990 (2010)			Page 2
Part	Ш	Statement of Program Serv Check if Schedule O contains a resp		т	F
1	Briefl	y describe the organization's mission	· · · · · · · · · · · · · · · · · · ·		,,
THE I	PURPO AL JU	SE OF THE YWCA YORK IS TO WO	RK PROACTIVELY AND COLLABO	RATIVELY TO PROVIDE PROGRAMS JAL ASSAULT AND OTHER VIOLENT	
2	the pr	e organization undertake any signific ior Form 990 or 990-EZ? s," describe these new services on So			√ No
3	servi	e organization cease conducting, or res?		onducts, any program	✓ No
		s," describe these changes on Sched			
4	Section		tions and section 4947(a)(1) trusts	e largest program services by expense are required to report the amount of gi n service reported	
4a	WE S MATH AND I CHILL PROGE AND C THEIF FOCU ESCR PROGE PROGE AGE I THEIF ACCR QOP) GRAD COMM SERV. ENRO IN RI PUBLI PART GUAR	REN AND YOUTH PROGRAMS OUR LEARNING ERVE INFANTS, TODDLERS, PRESCHOOLERS, SKILLS, AND LEARN TO RESPECT THE EARTH DIGNITY FOR ALL PEOPLE IS REFLECTED THRE OREN, WE ARE COMMITTED TO REDUCING TH RAMS OUR YOUTH PROGRAMS (TEMPLE GUAL POTENTIAL, AND DEVELOP TOWARD HE STHAT TRAINS YOUTH IN GRADES K-12 IN METAL PROGRAMS (TEMPLE GUAL POTENTIAL, AND DEVELOP TOWARD HE STHAT TRAINS YOUTH IN GRADES K-12 IN METAL POTENTIAL, AND DEVELOP TOWARD HE SESON EDUCATION, COMMUNITY SERVICE, FOW PAYMENTS TO HELP FUND CONTINUTING MPLISHMENTS - LEARNING CENTERS * A TOWARD TO THE FUND CONTINUTING MAINT SERVICE, FOW PAYMENTS TO HELP FUND CONTINUTING MPLISHMENTS - LEARNING CENTERS * A TOWARD TO THE HEAD TO THE WEST OF OUR YWOA CHILD WITH A SUMING MAINT OF THE METAL PROGRAMS * OPENED NEW SCHOOL-AGE CENTIFICATION IN EARLY CHE POUR-STAR STATUSES IN THE KEYSTONE STEDITATION FISCAL YEAR 2010-2011 ACCOMP > 100% OF THE PARTICIPANTS REMAINED UNTERSTON FISCAL YEAR 2010-2011 ACCOMP > 100% OF THE PARTICIPANTS REMAINED UNTERSTON FOR MILLERSVILLE UNIVERSITY, SYLVANIA STATE UNIVERSITY * TEMPLE GUAL TO SERVING SO YOUTH IN 2010-2011 IN ADDITION, 2011 ON THE TEAM OF THE 86 YOUTH SERVING SE-TAKING BEHAVIORS (I E , DRUG/ALCOHOLC CEPEFORMANCES AT AWARENESS AND COMPLETED IN NEW YORK CITY'S AFRICAN-AME OF THE SECONDA CIPATED IN NEW YORK CITY'S AFRICAN-AME	AND SCHOOL-AGE CHILDREN OUR CLASSRO I AND EACH OTHER OUR COMMITMENT TO OUGHOUT OUR CURRICULUM, SPECIAL EVEN IE STRESS OF WORKING PARENTS WHO REL RD DRILL TEAM AND THE QUANTUM OPPORT REAT THINGS IN THEIR LIVES AS SUCH, YOU EALTHY ADULTHOOD THE TEMPLE GUARD DI MILITARY-STYLE BOOT CAMP MARCHING AND ANTUM OPPORTUNITIES PROGRAM (QOP) IS AND LIFE-SKILLS DEVELOPMENT PROGRAM EDUCATION AND THE EXPENSES ASSOCIATED OTAL OF 459 CHILDREN AND THEIR FAMILIES MER CAMP FULL OF EDUCATIONAL EXPERIEN ILDREN RECEIVED FINANCIAL ASSISTANCE IN HILDHOOD EDUCATION * IMPLEMENTED ANT NTERS AT FERGUSON ELEMENTARY SCHOOL, VCA YORK EARLY LEARNING CENTERS (MARI TARS QUALITY INITIATIVE AND NAEYC (NATI PLISHMENTS -YOUTH PROGRAMS * OF THE IN SCHOOL > 93% OF THE PARTICIPANTS IN THARCUM COLLEGE, YTI CAREER INSTITUTE RD DOUBLED IN SIZE IN JUST ONE YEAR, GF OF COMMON OF THE PROGRAM RETURNED ED > 100% REPORTED, AND THEIR PAREN' L USE, ILLEGAL ACTIVITIES, ETC) > THEY COMMON ONLY PARADE THE YOUTH RECEIVED	87,926) (Revenue \$ CATIONAL ENVIRONMENTS FOR HUNDREDS OF DOMS ARE PLACES WHERE CHILDREN DEVELOP END DISCRIMINATION AND PROMOTE PEACE, NTS AND CLASSROOMS AS CAREGIVERS TO APLY ON US FOR AFFORDABLE AND QUALITY CHIL TUNITIES PROGRAM) FOCUS ON THE STRENGT UTH HAVE THE OPPORTUNITY TO EXPLORE NEW RILL TEAM IS A MENTORING PROGRAM BASED DANCE DRILL TEAM MEMBERS PERFORM APER AN AFTER-SCHOOL PROGRAM FOR YOUTH IN PARTICIPANTS FULFILL DAILY REQUIREMENTS DWITH HIGHER EDUCATION FISCAL YEAR 2010-2011 * ALL PRE-K COUNTI BIAS CURRICULUM IN ALL OF OUR EARLY LEE, JACKSON ELEMENTARY SCHOOL, MCKINLEY EXET STREET, QUEEN STREET AND IN MANCHES (ALL PROCE) AS YOUTH SERVED IN THE EDUCATION OF YAS YOUTH SERVED IN THE QUANTUM OPPORTIFICATION OF ALL PROBLEM OF A YOUTH SERVED IN THE QUANTUM OPPORTIFICATION OF A YOUTH SERVED IN THE GUANTUM OPPORTIFICATION OF A YOUTH SERVED IN THE YOUTH IN FISCAL OF THE FALL, INCLUDING LINCOLD UNIVERSITY, HE CONFIRMED, THAT THEY SUCCESSFULLY AND AND HAD THE OPPORTUNITY TO LISTEN TO PERSONNE AND HAD TH	P EARLY LITERACY AND JUSTICE, FREEDOM PROXIMATELY 650 D. CARE HS OF YOUNG PEOPLE W WORLDS, DISCOVER ON DISCIPLINE AND PROXIMATELY TWICE A GRADES 9-12 THAT AND EARN INCENTIVE 10-2011 D LEARNING HE SUMMER EXPLORERS TS TEACHERS ARNING AND SCHOOLSTEN MAINTAINED YOUNG CHILDREN) UNITIES PROGRAM (OR OF QOP SENIORS ARRA AND THE YEAR 2009-2010 TO HE CURRENT YOUTH OIDED PARTICIPATING MMUNITY SERVICE VIA TEMPLE GUARD YOUTH SHOW AND, TEMPLE
41.	(Code	e) (Expenses \$	1,713,568 including grants of \$	23,425) (Revenue \$	0)
4b	VICTI THE F ASSIS ADUL' YORK THAT WILL THOU BEYO EMPL HOW THEIF CONF	MS SERVICES THE VICTIM SERVICES DEPART ENNSYLVANIA COALITION AGAINST RAPE, IS TANCE, EMERGENCY SHELTER, TRANSITIONAY AND CHILDREN, LEGAL ADVOCACY, MEDIC, HAS BEEN MERGED WITH YWCA YORK FOR IT THESE MERGERS CONTINUE TO RESULT IN A MARK VAC'S 35TH ANNIVERSARY OVER THE SANDS OF ADULTS AND CHILDREN AS THEY HOD THE BAR TRAINING CURRICULUM TO ARE. TO RECOGNIZE, PREVENT, AND RESPOND TO RECOGNIZE, PREVENT, AND RESPOND TO PATRONS * IN JOINT COLLABORATION, YWERENCE ON HUMAN TRAFFICKING IN THE CO	TMENT OF YWCA YORK, AS RECOGNIZED BY THE ONLY COMPREHENSIVE VICTIM SERVICE AL HOUSING, INFORMATION AND REFERRAL, AL ADVOCACY, ABUSE AND SEXUAL VIOLENC FOUR YEARS AND THE VICTIM ASSISTANCE OF AN ON-GOING ABILITY TO ASSIST MORE VICT YEARS, THE DEDICATED STAFF AND VOLUNT HEAL FROM THE VIOLENCE THEY SUSTAINED AS BARS AND RESTAURANTS THE GOAL OF TROS TO SEXUAL VIOLENCE PREVENTION IN TO SITUATIONS, BUT THEY ALSO RECEIVE SEXUAL YORK AND THE YORK COUNTY HUMAN TOUNTY * 11,561 HOTLINE CALLS WERE REC	THE PENNSYLVANIA COALITION AGAINST DOMING PROVIDER IN YORK COUNTY, OFFERING 24 HOSPITAL RESPONSE, INDIVIDUAL AND GROUPE PREVENTION EDUCATION AND COMMUNITY CENTER (VAC) FOR THREE YEARS AND WE ARRIMS OF VIOLENCE THROUGH ENHANCED SERVIDERS OF THIS PROGRAM HAVE BEEN ABLE TO FISCAL YEAR 2010-2011 ACCOMPLISHMENTS HIS TRAINING IS TO EXPAND THE PROFESSION THESE TRAININGS, EMPLOYEES NOT ONLY RECUAL VIOLENCE PREVENTION RESOURCES THEY TRAFFICKING TASK FORCE, ORGANIZED AND SEIVED * REACHED 19,977 COMMUNITY MEMB 268 ADULTS AND 309 CHILDREN * PROVIDED	ESTIC VIOLENCE AND -HOUR HOTLINE P COUNSELING FOR OUTREACH ACCESS- E PROUD TO REPORT ICE PROVISIONS 2012 IMPACT THE LIVES OF * INTRODUCED NAL SKILLS OF THE CEIVE INFORMATION ON 'C AN DISTRIBUTE TO PONSORED THE FIRST EERS THROUGH
4c	(Code	e) (Expenses \$	655,699 including grants of \$	0) (Revenue \$	369,892)
	AND I BODII SKILL IN YW THAN NEW YEAR: HOLIS GIRLS NUTR MIDD YMCA YORK GRAD SWIM SHOW SEASC COMF	HEALTH EDUCATION PROGRAMS AIM TO PREVISE AND BUILD SELF-ESTEEM AND CONFIDENCES THAT WILL LAST A LIFETIME FISCAL YEAR 2 (CA YORK HISTORY * 49 INDIVIDUALS RECEIVES, \$8,000 * 349 CERTIFICATES WERE ISSUED FITNESS OFFERINGS HAVE BEEN ADDED, INCESTORES OF AGE SINCE 2008, YWCA YORK'S COUNCETIC MANNER, ADDRESSING THE PHYSICAL, MARKED FOR A LIFETIME OF SELF-RESPECT AND HEAD IT IN THE TOWN ARE TAUGHT AND CULTIVATED LAST YEAR CONCLUSION OF THE 10 TURKEY TROT SYNCHRONIZED SWIMMING IN OFFERS THE ONLY SYNCHRONIZED SWIMMING IN OFFERS THE ONLY SYNCHRONIZED SWIMMING IN OFFERS THE ONLY SYNCHRONIZED SWIMMING IN OFFERS, THESE GIRLS LEARNED BOTH ABOVE AS FOR THE PUBLIC (THE PAST TWO PERFORD) ON AND, MOST YEARS, THE SENIOR TEAM PLANCE TOWN AND, MOST YEARS, THE SENIOR TEAM PLANCE TOWN AND, MOST YEARS, THE SENIOR TEAM PLANCE.	VENT HEALTH PROBLEMS IN ADULTS AND DE CE YOUNG PEOPLE LEARN THE VALUE OF TEA (1010-2011 ACCOMPLISHMENTS * FITNESS C (1010-2011 ACCOMPLISHMENTS * FITNESS C (1010-2011 ACCOMPLISHMENTS * FITNESS C (1010-101-101-101-101-101-101-101-101-10	TY OF LIFE FOR PEOPLE OF ALL AGES THROUGHEVELOP HEALTHY HABITS IN YOUTH OUR PROGRAMWORK AND THE IMPORTANCE OF SAFETY WE CENTER MEMBERSHIP WAS OPENED TO MALES VICA YORK FITNESS/AQUATICS PROGRAM OFFE SUCCESSFUL COMPLETION OF A SWIMMING LEVEWONDO, AND A SYNCHRONIZED SWIMMING HAS BEEN ENCOURAGING THE DEVELOPMENT E MISSION OF GIRLS ON THE RUN IS TO EDUCATES, IMPORTANT ISSUES LIKE SELF-ESTEEM, CICHAD NEARLY 210 PARTICIPANTS AT 9 DIFFERE RAGED TO RACE IN EITHER THE YWCA LADY WE HAT COMBINES BALLET AND GYMNASTIC MOVES THIS PAST YEAR, OVER 30 GIRLS RANGING RK AS WELL AS THROUGH CLINICS CONDUCTE UND TECHNIQUES EACH YEAR, THE TEAM CONTITE) THEY ALSO COMPETE IN APPROXIMATELY ADDITION, YWCA YORK ALSO CONDUCTS A MAENT SWIMMERS THE MASTER'S SWIMMERS CO	GRAMS STRENGTHEN I/HILE DEVELOPING FOR THE FIRST TIME FRINGS TOTALING MORE I/EL * A VARIETY OF CLASS FOR THOSE 70+ OF YOUNG GIRLS IN A ATE AND PREPARE HARACTER, AND ENT ELEMENTARY AND HITE ROSE 5K, OR ES CURRENTLY, YWCA FROM 2ND TO 11TH D BY USA OLYMPIC DUCTS ORGANIZED ' 10 MEETS PER STER'S TEAM WHICH IS

5,834,932 4e Total program service expenses►\$

Other program services (Describe in Schedule O) See also Additional Data for Description

517,441 including grants of \$

4d

(Expenses \$

) (Revenue \$

Part TV	Chec	klist of	Required	Schedules
		KIISL OI	IXC quii Cu	SCHOUGHCS

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes,"</i> complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)? 😼	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
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 1	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	Yes	
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? <i>If "Yes," complete Schedule D, Part VI.</i>	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b	Yes	
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Parts III and IV.	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> "Yes," complete Schedule G, Part I (see instructions)	17		N o
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
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

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		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? 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 lines 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		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If</i> "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule Ma	29	Yes	
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I	33		No
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		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		No
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $			
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		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 99 0	(2010)

Page **5** Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V

			Yes	No
La	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 32			
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	
а	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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20	165	
1	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Νo
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
•	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
ı	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
1	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		Νo
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to		Yes	
d	file Form 8282?	7c		No
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	7e		No
F	contract?	7f		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	Yes	
	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?		103	
	Sponsoring organizations maintaining donor advised funds.	8		
a	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
a	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 100 100 100 100 100			
	Section 501(C)(12) Organizations. Enter	1		
a	Gross income from members or shareholders			
а				
a b	Gross income from members or shareholders	12a		
a b	Gross income from members or shareholders	12a		
a b a b	Gross income from members or shareholders	12a		
a b a b	Gross income from members or shareholders	12a		
a b a b	Gross income from members or shareholders			
a b a b	Gross income from members or shareholders			
b 2a b 3 a	Gross income from members or shareholders			No

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 at the end of the tax			
	year			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Does the organization have members or stockholders?	6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
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, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		 No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal			
Re	venue Code.)			
40-	December of the control of the contr	40-	Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a		No_
D	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?		.,	
L	Describe in Cabadula O the process of any used by the organization to review this Form 000	11a	Yes	
D	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"		V	
12	describe in Schedule O how this is done	12c 13	Yes Yes	
13 14	Does the organization have a written whistleblower policy?	14	Yes	
14 15	Did the process for determining compensation of the following persons include a review and approval by	14	1 65	
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
D	Other officers or key employees of the organization	15b	Yes	
	These to line 15a or 15b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	461		
- C-		16b		
<u>5e</u> 17	ction C. Disclosure 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), 990, and 990-T (501(c)			
	(3)s only) available for public inspection Indicate how you make these available Check all that apply Own website Another's website Upon request			

- Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization FINNIFER BRILLHART CHIEF DEVELOPME

320 EAST MARKET STREET YORK, PA 17403

(717) 434-1756

Part VII 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

- ◆ 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, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- ◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) Average hours	rage Position (check all that apply)						(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
(1) MIEKE WALSH DRISCOLL PRESIDENT	1 00	х		х				0	0	0
(2) BRENDA BRINKMAN SECRETARY	1 00	х		Х				0	0	0
(3) RACHEL SCARPATO TREASURER	1 00	х		Х				0	0	0
(4) JOHN KLINEDINST PRESIDENT ELECT	1 00	Х						0	0	0
(5) DAWN PAUL TREASURER ELECT	1 00	х						0	0	0
(6) ROMANA LI PAST PRESIDENT	1 00	х		х				0	0	0
(7) JULIE FELPEL CPA BOARD OF DIRECTORS	1 00	х						0	0	0
(8) MARY CHAMBERS BOARD OF DIRECTORS	1 00	х						0	0	0
(9) DEBRA DIXON BOARD OF DIRECTORS	1 00	х						0	0	0
(10) JOSEPHINE APPELL BOARD OF DIRECTORS	1 00	Х						0	0	0
(11) BRAD KOSTELICH BOARD OF DIRECTORS	1 00	Х						0	0	0
(12) MICHAEL J HEINE BOARD OF DIRECTORS	1 00	х						0	0	0
(13) MICHELLE POKRIFKA ESQ BOARD OF DIRECTORS	1 00	х						0	0	0
(14) LESLIE SAFFIN BOARD OF DIRECTORS	1 00	х						0	0	0
(15) DELMA RIVERA-LYTLE BOARD OF DIRECTORS	1 00	х						0	0	0
(16) ANDREW SEEBOLD BOARD OF DIRECTORS	1 00	Х						0	0	0

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

(A) Name and Title		A verage hours	verage Position (check all hours that apply)							(E) Reportable compensation from related	1	Estimate amount of compensa	
		week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	organizations (W- 2/1099- MISC)	or	from t ganızatı relatı organıza	:he on and ed
	CEITH WENTZ D OF DIRECTORS	1 00	х						0	(0		
٠,	DEBRA STOCK EXECUTIVE OFFICER	40 00			х				165,000	(0		20,63
(19) N	NANETTE BUNNER OPERATIONS OFFICER	40 00			х				74,591	(0		2,12
											-		
											lacksquare		
											\vdash		
											_		
1b								Þ			$oxdapsymbol{oxed}$		
	Total from continuation sheet: Total (add lines 1b and 1c) .						-	 	239,591	0	₩		22,755
d 2	Total number of individuals (ind \$100,000 in reportable compe	•	nited to	thos	e lıs								
3	Did the organization list any fo	·			e, k	ey e	mploy	ee, d	or highest compens	ated employee		Yes	No
4	on line 1a? If "Yes," complete So For any individual listed on line organization and related organi individual	1a, is the sum o	f reporta	able						n from the	3	Yes	No
5	Did any person listed on line 13 services rendered to the organ										5	163	No
Se	ection B. Independent Co	ntractors											
1	Complete this table for your fiv \$100,000 of compensation fro	e highest comper		ndep	ende	ent c	ontra	ctors	s that received more				
	Na	(A) ame and business ad	dress						Descr	(B) ription of services	\downarrow	(C Comper	
											\pm		
											+		
	Total number of Independent cor \$100,000 in compensation from			ot lın	nıted	to	those	liste	d above) who receiv	ed more than	\top		

		010) Statement of Revenue					P	age 9
Party	/	Statement of Revent	ie		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	excluded from tax under sections
Contributions, gifts, grants and other similar amounts	b N c F d F e G	Federated campaigns	. 1c . 1d . 1e	94,151 2,484,844 783,601				513, or 514
contri and o	•	Noncash contributions included in li		47,469 Business Code	3,771,228			
Program Service Revenue	b N c d e f	EDUCATIONAL, RECREATIO MEMBERSHIP DUES All other program service records.		624200 713940	2,213,713 14,529 2,228,242			
	3 I 4 I 5 F 6a C b L c F	investment income (including and other similar amounts) income from investment of tax-extended and income from investment of tax-extended and income from the control income for closs)	g dividends, interest	(II) Personal	92,661			92,66
	7a 0 f a t b L c s	Gross amount from sales of assets other than inventory assets and the sales ess cost or other basis and tales expenses Gain or (loss)	(I) Securities 351,316 315,591 35,725	(II) O ther 240,000 191,850 48,150	46,064		750	
Other Revenue	8a ((() () () () () () () () (ine 1c) a b indraising events	40,281 53,421	-13,140			-13,14
	10a (r r l l l l l l l l l l l l l l l l l	Gross sales of inventory, les returns and allowances . Less cost of goods sold . Net income or (loss) from sa Miscellaneous Revenue . MISCELLANEOUS REVENU	a . b les of inventory •	Business Code 900099 900099	173,821 6,155			173,82
	e 1	Fotal. Add lines 11a-11d . Fotal revenue. See Instructi	· · · · · · · · · · · · · · · · · · ·		179,976 6,388,906		750	388,68

Part IX Statement of Functional Expenses

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

A	All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).										
	ot include amounts reported on lines 6b, p, 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	111,351	111,351								
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	265,972	200,914	55,462	9,596						
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	3,399,539	2,728,028	536,344	135,167						
8	Pension plan contributions (include section $401(k)$ and section $403(b)$ employer contributions)	205,407	158,089	42,745	4,573						
9	Other employee benefits	390,993	334,842	43,514	12,637						
10	Payroll taxes	262,288	212,905	38,697	10,686						
а	Fees for services (non-employees) Management										
b	Legal	4,178	3,670	507	1						
C	Accounting	37,300	32,761	4,528	11						
d	Lobbying										
е	Professional fundraising services See Part IV, line 17										
f	Investment management fees										
g	Other	444,442	390,343	53,971	128						
12	Advertising and promotion	7,644	7,159		485						
13	Office expenses	199,899	124,906	66,958	8,035						
14	Information technology	45,319	23,241	19,935	2,143						
15	Royalties										
16	Occupancy	318,450	299,695	12,640	6,115						
17	Travel	113,992	111,517	1,465	1,010						
18	Payments of travel or entertainment expenses for any federal, state, or local public officials										
19	Conferences, conventions, and meetings	14,287	13,281	724	282						
20	Interest	98,477	546	97,931							
21	Payments to affiliates	30,000		30,000							
22	Depreciation, depletion, and amortization	374,442	300,478	59,076	14,888						
23	Insurance	169,132	136,458	25,462	7,212						
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)										
а	PROGRAM COSTS	392,180	385,058	6,990	132						
b	FOOD	172,091	171,721	161	209						
c	DUES	32,044	28,226	1,838	1,980						
d	PRINTING AND PUBLICATIO	24,895	13,422	720	10,753						
е	CONTINUING EDUCATION	20,861	20,861								
f	All other expenses	26,968	25,460	1,447	61						
25	Total functional expenses. Add lines 1 through 24f	7,162,151	5,834,932	1,101,115	226,104						
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) 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					<u>_</u>
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			1,050	1	650
	2	Savings and temporary cash investments			41,395	2	17,953
	3	Pledges and grants receivable, net			3,099,543	3	2,224,673
	4	Accounts receivable, net	86,119	4	88,298		
	5	Receivables from current and former officers, directors, trustees highest compensated employees Complete Part II of					
		Schedule L		5			
	6	Receivables from other disqualified persons (as defined under spersons described in section $4958(c)(3)(B)$, and contributing exponsoring organizations of section $501(c)(9)$ voluntary employorganizations (see instructions)	ers, and				
ssets		Schedule L				6	
8	7	Notes and loans receivable, net	•			7	58,766
⋖	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			48,479	9	34,613
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	10a	12,019,068			
	ь	Less accumulated depreciation	10b	3,248,239	9,261,746	10 c	8,770,829
	11	Investments—publicly traded securities		1,313,288	11	1,449,665	
	12	Investments—other securities See Part IV, line 11		905,737	12	1,062,672	
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	_
	15	Other assets See Part IV, line 11			23,349	15	22,582
	16	Total assets. Add lines 1 through 15 (must equal line 34)			14,780,706	16	13,730,701
	17	Accounts payable and accrued expenses .			352,355	17	421,794
	18	Grants payable				18	
	19	Deferred revenue		223,935	19	38,285	
	20	Tax-exempt bond liabilities				20	
- S	21	Escrow or custodial account liability Complete Part IV of Schedul	le D .		41,478	21	35,130
abilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
Ē		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties			3,739,541	23	3,294,422
	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			4,357,309	26	3,789,631
Fund Balances		Organizations that follow SFAS 117, check here ▶ and compare through 29, and lines 33 and 34.	olete l	ines 27			
anç	27	Unrestricted net assets			6,896,307	27	7,170,452
8	28	Temporarily restricted net assets			3,047,751	28	2,207,620
귤	29	Permanently restricted net assets			479,339	29	562,998
_,≒		Organizations that do not follow SFAS 117, check here ▶ ┌ ar	nd com	nplete			
<u>~</u>		lines 30 through 34.					
	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other fu	ınds			32	
¥	33	Total net assets or fund balances			10,423,397	33	9,941,070
_	34	Total liabilities and net assets/fund balances			14,780,706	34	13,730,701

Part

06	990 (2010)	Page 17
X	XI Reconcilliation of Net Assets	
	Check if Schedule O contains a response to any question in this Part XI	<u>\</u>

906'888'9 Total revenue (must equal Part VIII, column (A), line 12)

7,162,151 Total expenses (must equal Part IX, column (A), line 25)

2 m Revenue less expenses Subtract line 2 from line 1 m

-773,245

10,423,397

4

290,918

9,941,070

Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))

4

Ŋ

Other changes in net assets or fund balances (explain in Schedule O)

S ဖ Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column Financial Statements and Reporting Part XII (B)

7 Check if Schedule O contains a response to any question in this Part XII

		Yes	S S
Accounting method used to prepare the Form 990	Cash V Accrual Cother		

ŝ **2a** If the organization changed its method of accounting from a prior year or checked "Other," explain in Were the organization's financial statements compiled or reviewed by an independent accountant?

2 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? Were the organization's financial statements audited by an independent accountant?

م

2a

Yes 20 If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued If the organization changed either its oversight process or selection process during the tax year, explain in on a separate basis, consolidated basis, or both Yes Yes ä 36 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 . Single Audit Act and OMB Circular A-133?

As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

Consolidated basis

Separate basis

3a

T

Both consolidated and separated basis

Form **990** (2010)

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493135032412

Employer identification number

N: 93493135032412 OMB No 1545-0047

SCHEDULE A

Name of the organization

(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.

2010

Open to Public Inspection

YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF YORK 23-1360889 Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety Seesection 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of 11 one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h Type I **b** Type II c Type III - Functionally integrated Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No and (III) below, the governing body of the the supported organization? 11g(i) (ii) a family member of a person described in (i) above? 11g(ii) (iii) a 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(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
		instructions))	Yes	No	Yes	No	Yes	No	
Total									

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

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

S	ection A. Public Support		and to quanty t			out complete	
	endar year (or fiscal year beginning						
Care	in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	ınclude any "unusual						
	grants ")						
2	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its						
_	behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
_	the organization without charge						
4	Total. Add lines 1 through 3						
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)						
6	Public Support. Subtract line 5 from						
Ū	line 4						
S	ection B. Total Support		<u> </u>	I I.			
	endar year (or fiscal year beginning						
	ın) >	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	A mounts from line 4						
8	Gross income from interest,						
Ū	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
9	Net income from unrelated						
	business activities, whether or						
	not the business is regularly						
	carried on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)						
11	Total support (Add lines 7						
	through 10)					<u> </u>	
12	Gross receipts from related activiti	es, etc (See inst	ructions)			12	
13	First Five Years If the Form 990 is t	for the organizati	on's first, second	, thırd, fourth, or	fifth tax year as a	501(c)(3) organı	
	check this box and stop here						►
	-tiC Ct-ti	L'a Carana at B					
<u> </u>	ection C. Computation of Pub Public Support Percentage for 2010			11 column (f))			
	· ·		•	II Column (1))		14	
15	Public Support Percentage for 2009	Schedule A, Pa	rt II, line 14			15	
16a	33 1/3% support test—2010. If the				line 14 is 33 1/3%	or more, check	
_	and stop here. The organization qua						▶ □
b	33 1/3% support test—2009. If the				5a, and line 15 is 3	33 1/3% or more,	- -
	box and stop here. The organization				45.46		►
1/a	10%-facts-and-circumstances test-						
	is 10% or more, and if the organization made						rt a d
	in Part IV how the organization mee	ts the "racts and	circumstances"	test ine organiz	ration qualifies as	a publicly suppo	
L	organization	_2000 If+ba a	anization did not	chack a hay an l	no 12 165 166 -	r 17a and line	► □
D	10%-facts-and-circumstances test- 15 is 10% or more, and if the organ						
	Explain in Part IV how the organization						v
	supported organization	aon meets the 10	acts and circuilis	tances test file	z organizacion qual	mes as a publici	y ▶[¯
18	Private Foundation If the organizati	on did not check	a box on line 13	. 16a. 16b. 17a o	r 17b, check this	box and see	- 1
	instructions	on ala not check	a box on fine 15	, 100, 100, 1700	I by check tills	SON GING SCC	▶ □

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

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

Se	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total	
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	1,496,499	7,273,163	5,113,210	3,900,008	3,771,228	21,554,10	
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	1,577,888	1,659,847	1,982,064	1,971,190	2,268,523	9,459,51	
3	Gross receipts from activities that are not an unrelated trade or business under section 513	69,314	99,689	15,830	87,604		272,43	
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	3,143,701	9,032,699	7,111,104	5,958,802	6,039,751	31,286,05	
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons	158,080	345,000		104,312	326,502	933,89	
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year							
С	Add lines 7a and 7b	158,080	345,000		104,312	326,502	933,89	
8	Public Support (Subtract line 7c						30,352,16	
Se	from line 6)	1						
Cale	ndar year (or fiscal year beginning	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total	
9	ın) A mounts from line 6	3,143,701	9,032,699	7,111,104	5,958,802	6,039,751	31,286,05	
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	143,705	135,490	141,117	126,060	138,725	685,09	
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							
с 11	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	143,705	135,490	141,117	126,060	138,725	685,09	
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	181,414	5,274	18,373	1,083	179,974	386,11	
13	Total support (Add lines 9, 10c, 11 and 12)	3,468,820	9,173,463	7,270,594	6,085,945	6,358,450	32,357,27	
14	First Five Years If the Form 990 is check this box and stop here	for the organization	on's first, second,	third, fourth, or	fifth tax year as a	section501(c)(3) organization, ► 厂	
Se	ection C. Computation of Pub	lic Support Pe	ercentage					
15	Public Support Percentage for 201			13 column (f))		15	93 800 %	
16	Public support percentage from 20	09 Schedule A, P	art III, line 15			16 96 04		
Se	ction D. Computation of Inv	estment Inco	me Percenta	 je				
17	Investment income percentage for				(6))			
	Threstment income percentage for	2010 (fille 100 00	iumn (i) aividea b	y line 13 columi	1 (F))	17	2 120 %	
18	Investment income percentage from 33 1/3% support tests—2010. If the	n 2009 Schedule	A, Part III, line 1	7		18	1 710 %	

19a 33 1/3% support tests—2010. 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—2009. 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

Schedule A (Form 990 or 990-EZ) 2010

Part IV

Supplemental Information. Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Schedule A (Form 990 or 990-EZ) 2010

Additional Data

Software ID:

Software Version:

EIN: 23-1360889

Name: YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF YORK

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

4d. Other program services

LIVING AND WORKING IN THE NEIGHBORHOOD PARTNERING WITH LOCAL ASSOCIATIONS, THE CITY OF YORK, YORK COUNTY, AND COMMONWEALTH AGENCIES, AND SEVERAL BANKS AND OTHER PRIVATE FOUNDATIONS, YWCA YORK HAS WORKED FOR A WALKING POLICE PATROLS * THE OVERALL CRIME RATE FROM 2006 TO 2010, HAS DECREASED BY 16 50% AND THE RATE OF OPPORTUNITIES IN NEIGHBORHOOD ENVIRONMENTS, INC (CONE) FINISHED REHABILITATING THEIR FIRST TWO HOUSES IN COMMUNITY INITIATIVES OUR COMMUNITY RENAISSANCE PROJECT, ALSO KNOWN AS THE ELM STREET PROJECT, SEEKS TO NEIGHBORHOOD JUST EAST OF DOWNTOWN YORK THE LONG-TERM GOAL IS TO IMPROVE THE QUALITY OF LIFE FOR THOSE AND HOUSING IMPROVEMENTS SINCE THE PROGRAM'S INCEPTION * CONTINUED TO MAINTAIN A COMMUNITY RESOURCE MPROVE THE SOCIAL, ECONOMIC AND PHYSICAL CONDITIONS IN THE OLDE TOWNE EAST NEIGHBORHOOD, AN 18-BLOCK HOUSES WITHIN 18 MONTHS * THE MEDIAN HOME LISTING PRICE IN OLDE TOWNE EAST IS DOUBLE THAT OF THE REST OF WELCOME FISCAL YEAR 2010-2011 ACCOMPLISHMENTS * INVESTED APPROXIMATELY \$8 5 MILLION IN INFRASTRUCTURE CENTER IN WHICH A YORK CITY POLICE LIAISON IS STATIONED AND CONDUCTS THE EMPOWERING YOUTH PROGRAM FOR SEARCHES AND ACADEMIC ASSIGNMENTS * HOSTED FAMILY-ORIENTED EVENTS FOCUSED ON SAFETY AND COMMUNITY ESTABLISH OPEN, COMMUNITY USE COMPUTER LABS FOR OLDE TOWNE EAST RESIDENTS TO ASSIST THEM IN THEIR JOB CHILDREN RESIDING IN OLDE TOWNE EAST THE CENTER IS ALSO USED AS A DROP-IN SITE FOR THE NEIGHBORHOOD'S THE CITY * PARTNERED WITH THE YORK COUNTY HISTORICAL SOCIETY AND ASBURY UNITED METHODIST CHURCH TO OLDE TOWNE EAST TWO MORE WILL BE READY BY FALL 2011 AND YHA AND CONE HOPE TO REHAB AT LEAST SIX MORE PARTNERSHIPS (EX NATIONAL NIGHT OUT, AN ICE CREAM FESTIVAL, AN EASTER EGG HUNT, ETC) * COORDINATED 5 DECADE TO PROMOTE HOMEOWNERSHIP AND SUSTAINABLE ECONOMIC DEVELOPMENT IN THE NEIGHBORHOOD THE VIOLENT AND PROPERTY CRIMES HAS REDUCED BY 30 10% * THE YORK HOUSING AUTHORITY (YHA) AND CREATING MISSION OF THE COMMUNITY RENAISSANCE PROJECT IS TO WORK TOGETHER TO PROMOTE AND SUSTAIN A CLEAN, ATTRACTIVE, AND RESPECTFUL COMMUNITY WHERE THOSE DESIRING A SAFE AND COMFORTABLE HOME FEEL 0) (Revenue \$ including grants of \$ 517,441) (Expenses \$ NEIGHBORHOOD BLOCK CLEAN-UPS efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493135032412

OMB No 1545-0047

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

Open to Public

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

					Inspection
If the	_	s," to Form 990, Part IV, Line 3, or	Form 990-EZ, P	art V, line 46 (Political Ca	mpaign Activities),
Se	, ,, , =	mplete Parts I-A and B Do not comple 501(c)(3)) organizations Complete Pal e Part I-A only		w Do not complete Part I-B	
	•	s," to Form 990, Part IV, Line 4, or	Form 990-EZ, P	art VI, line 47 (Lobbying /	Activities), then
	, ,, ,	t have filed Form 5768 (election under	, ,,	•	•
		t have NOT filed Form 5768 (election t			
	-	s," to Form 990, Part IV, Line 5 (Pi	roxy Tax) or For	m 990-EZ, Part V, line 35a	(Proxy Tax), then
	ction 501(c)(4), (5), or (6) organi me of the organization	zations Complete Part III		Employer iden	itification number
	JNG WOMEN'S CHRISTIAN ASSOCIATION	N OF YORK		Zimpioyer iden	idilication namber
Par	t I-A Complete if the or	ganization is exempt under	section 501(23-1360889 c) or is a section 527	organization.
1	Provide a description of the ord	ganızatıon's dırect and ındırect politı	cal campaign act	ivities in Part IV	
2	Political expenditures	gaaa aaa.a pa			¢
3	Volunteer hours			·	Ψ
	v oraniceer mours				
Par	t I=B Complete if the or	ganization is exempt under	section 501(c)(3).	
1	Enter the amount of any excise	e tax incurred by the organization un	der section 4955	. ▶	\$
2	Enter the amount of any excise	e tax incurred by organization manag	jers under sectior	n 4955 🕨	\$
3	If the organization incurred a s	section 4955 tax, did it file Form 472	20 for this year?		┌ Yes ┌ No
4a	Was a correction made?				┌ Yes ┌ No
b	If "Yes," describe in Part IV				
Par	t I-C Complete if the or	ganization is exempt under	section 501(c) except section 50:	L(c)(3).
1	Enter the amount directly expe	ended by the filing organization for se	ection 527 exemp	ot function activities 🕨	\$
2	Enter the amount of the filing o	organization's funds contributed to ot	ther organizations	s for section 527	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here	and on Form 112	0-POL, line 17b ►	\$
4	Did the filing organization file F	Form 1120-POL for this year?			┌ Yes ┌ No
5	organization made payments f amount of political contribution	nd employer identification number (E For each organization listed, enter th ns received that were promptly and d political action committee (PAC) If	e amount paid fro Iirectly delivered	om the filing organization's to a separate political orga	funds Also enter the inization, such as a
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

Р	art II-A Complete if the organization under section 501(h)).	is exempt under section 501(c)(3)	and filed Form 5768	(election
	Check If the filing organization belongs to a Check If the filing organization checked bo	n affiliated group x A and "limited control" provisions apply		
	Limits on Lobbying E (The term "expenditures" means ar		(a) Filing O rganization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influence public o	pınıon (grass roots lobbyıng)		
b	Total lobbying expenditures to influence a legisl	ative body (direct lobbying)		
C	Total lobbying expenditures (add lines 1a and 1	o)		
d	O ther exempt purpose expenditures			
е	Total exempt purpose expenditures (add lines 1	c and 1d)		
f	Lobbying nontaxable amount Enter the amount to columns	rom the following table in both		
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
	Grassroots nontaxable amount (enter 25% of lir	e 1f)		
h	Subtract line 1g from line 1a If zero or less, ent	er -0 -		
i	Subtract line 1f from line 1c If zero or less, ente	r-0-		
j	If there is an amount other than zero on either lii section 4911 tax for this year?	ne 1h or line 1i, did the organization file Form	4720 reporting	┌ Yes ┌ No

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

	Lobbying Expenditures During 4-Year Averaging Period							
	Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(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							
e	Grassroots ceiling amount (150% of line 2d, column (e))							
f	Grassroots lobbying expenditures							

	······································
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)).

	<u>_</u>		a)	(b)	
		Yes	No	Amount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?	Yes			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes			
C	Media advertisements?		No		
d	Mailings to members, legislators, or the public?	Yes		200	
е	Publications, or published or broadcast statements?		No		
f	Grants to other organizations for lobbying purposes?		No		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		1,100	
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No		
i	Other activities? If "Yes," describe in Part IV		No		
j	Total lines 1c through 1i			1,300	
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		•		
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".

1	Dues, assessments and similar amounts from members	1	
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	
ь	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

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

Identifier	Return Reference	Explanation
EXPLANATION OF OTHER LOBBYING ACTIVITIES	,	THE ORGANIZATION OCCASSIONALLY ATTEMPTS TO INFLUENCE LEGISLATION BY WRITING TO AND VISITING STATE AND LOCAL REPRESENTATIVES

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493135032412

OMB No 1545-0047

Department of the Treasury

SCHEDULE D (Form 990)

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

itema	I Revenue Service	► Attach to Fe	orm 990. 🟲 See separat	e instructions.		Inspec	tion
	me of the organizat				Employer identifica	tion numb	er
YOU	JNG WOMEN'S CHRISTIA	AN ASSOCIATION OF YORK			23-1360889		
Pa	rt I Organiza	tions Maintaining Donor A	dvised Funds or C	ther Similar Fu		. Comple	te if the
		on answered "Yes" to Form 99				<u> </u>	
			(a) Donor adv	ised funds	(b) Funds and o	ther accou	nts
1	Total number at er	nd of year					
2	Aggregate contrib	utions to (during year)					
3	Aggregate grants f	from (during year)					
4	Aggregate value a	t end of year					
5		on inform all donors and donor advi nization's property, subject to the			or advised	┌ Yes	┌ No
6	used only for char	on inform all grantees, donors, and itable purposes and not for the ben issible private benefit				┌ Yes	┌ No
Pa	rt III Conserva	ation Easements. Complete	ıf the organization a	nswered "Yes" to	o Form 990, Part IV	', line 7.	
2	Preservation Protection of Preservation Complete lines 2a	servation easements held by the o of land for public use (e g , recreati natural habitat of open space 1–2d if the organization held a qual ast day of the tax year	ion or pleasure)	Preservation of an Preservation of a c	certified historic struc	-	a
					Held at the	End of the	Year
а	Total number of co	onservation easements			2a		
b	Total acreage rest	tricted by conservation easements			2b		
c	Number of conserv	vation easements on a certified his	storic structure include	d ın (a)	2c		
d	Number of conserv	vation easements included in (c) a	cquired after 8/17/06		2d		
3	Number of conserv	vation easements modified, transfe	erred, released, extingu	- IIshed, or terminate	d by the organization	during	
	the taxable year 🕨	<u>-</u>					
4	Number of states	where property subject to conserva	ation easement is locat	ted ⊫			
5	Does the organiza	tion have a written policy regarding e conservation easements it holds	g the periodic monitorii		— dling of violations, and	┌ Yes	┌ No
6	Staff and voluntee	r hours devoted to monitoring, insp	pecting and enforcing c	onservation easem	ents during the year 🕨	+	
7	A mount of expens	es incurred in monitoring, inspecti	ng, and enforcing cons	ervation easements	during the year ► \$ _		
8		vation easement reported on line 2 id 170(h)(4)(B)(ii)?	2(d) above satisfy the r	equirements of sec	tion	┌ Yes	┌ No
9	balance sheet, and	ribe how the organization reports of d include, if applicable, the text of t accounting for conservation easer	the footnote to the orga				
Par		itions Maintaining Collection if the organization answered '			or Other Similar <i>i</i>	Assets.	
1a	art, historical trea	nelected, as permitted under SFAS sures, or other similar assets held V, the text of the footnote to its fir	for public exhibition, e	ducation or researc	ch in furtherance of pu		e,
b	historical treasure	nelected, as permitted under SFAS es, or other similar assets held for ng amounts relating to these items	public exhibition, educa				
	(i) Revenues inclu	uded in Form 990, Part VIII, line 1			▶ \$		
	(ii) Assets include	ed in Form 990, Part X			 \$		
2	If the organization	received or held works of art, historically required to be reported under SFA					

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Par	311 Organizations Maintaining Co	llections of Ar	t, His	<u>stori</u>	<u>cal Tr</u>	<u>easu</u>	ires, or O	the	r Similar As	sets (continued)
3	Using the organization's accession and othe items (check all that apply)	r records, check ar	y of th	he fol	lowing t	hat ar	e a significa	ant u	se of its collect	:ion	
а	Public exhibition		d	Γ	Loan	orexc	hange progi	rams			
b	Scholarly research		e	\sqcap	Other	-					
С	Preservation for future generations										
4	Provide a description of the organization's co	allections and expl	ain hoi	w the	v furthe	rthe	organization	ı's ex	emnt nurnose i	n	
	Part XIV						-			''	
5	During the year, did the organization solicition assets to be sold to raise funds rather than t									┌ Yes	□ No
Par	t IV Escrow and Custodial Arrang Part IV, line 9, or reported an an	ements. Compl	ete ıf	the	organı	ızatıoı					, no
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?						or other ass	ets r		┌ Yes	√ No
b	If "Yes," explain the arrangement in Part XI	V and complete the	follov	ving t	able		_				
									An	nount	
С	Beginning balance							1c			
d	Additions during the year							1d			
е	Distributions during the year							1e			
f	Ending balance							1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, Iır	ne 21?	,					1	✓ Yes	┌ No
ь	If "Yes," explain the arrangement in Part XIV	/									
Pa	tt V Endowment Funds. Complete										
		(a)Current Year	(b)Prior	Year	(c) Tw	vo Years Back	(d)	Three Years Back	(e) Four	Years Back
1a	Beginning of year balance										
Ь	Contributions							_			
С	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 posse	ssion of the organiz	zation	that	are helo	d and a	dministere	d for	the		
	organization by									Yes	No
	(i) unrelated organizations								За(i)	
	(ii) related organizations								3a(
	If "Yes" to 3a(II), are the related organizatio							•	3t	<u> </u>	
4	Describe in Part XIV the intended uses of th					00 B	- 1 37 1	10			
Par	t VI Investments—Land, Building	s, and Equipme	ent. S						Π	\neg	
	Description of investment) Cost or is (invest		(b) Cost or o basis (othe		(c) Accumulated depreciation	(d) E	Book value
1a	Land						170	6,182			176,182
Ь	Buildings						10,87	7,727	2,619,66	2	8,258,065
c	Leasehold improvements										
d I	Equipment						873	3,971	574,60	4	299,367
e	Other						9:	1,188	53,97	'3	37,215
Tota	I. Add lines 1a-1e (Column (d) should equal Fo), line	10(c).)				. ▶	1	8,770,829
	· · · · · · · · · · · · · · · · · · ·	·			· ·				Schedule D	(Form	

Part VII Investments—Other Securities. See F	orm 990, Part X, line 12.	
(a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security) (1)Financial derivatives		Cost or end-of-year market value
(2)Closely-held equity interests		
(3)Other		
(A) INTEREST IN NET ASSETS OF A COMMUNITY	400.674	_
FOUNDATION	499,674	F
(B) BENEFICIAL INTEREST IN PERPETUAL TRUSTS	562,998	F
	·	
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	1,062,672	
Part VIII Investments—Program Related. See		3.
(a) Description of investment type	(b) Book value	(c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)		
Part IX Other Assets. See Form 990, Part X, line		
(a) Descript		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 15		
Part X Other Liabilities. See Form 990, Part X,	line 25.	
Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of Liability		
Part X Other Liabilities. See Form 990, Part X,	line 25.	
Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of Liability	line 25.	
Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of Liability	line 25.	
Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of Liability	line 25.	
Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of Liability	line 25.	
Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of Liability	line 25.	
Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of Liability	line 25.	
Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of Liability	line 25.	
Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of Liability	line 25.	
Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of Liability	line 25.	
Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of Liability	line 25.	
Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of Liability	line 25.	
Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of Liability	line 25.	
Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of Liability	line 25.	
Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of Liability	line 25.	

Total revenue (Form 990, Part VIII, column (A), line 12)	1	6,388,906
Total expenses (Form 990, Part IX, column (A), line 25)	2	7,162,151
Excess or (deficit) for the year Subtract line 2 from line 1	3	-773,245
Net unrealized gains (losses) on investments	4	133,983
Donated services and use of facilities	5	
Investment expenses	6	
Prior period adjustments	7	
Other (Describe in Part XIV)	8	156,935
Total adjustments (net) Add lines 4 - 8	9	290,918
Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-482,327
Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
Total revenue, gains, and other support per audited financial statements	1	6,697,684
Amounts included on line 1 but not on Form 990, Part VIII, line 12		
Net unrealized gains on investments 2a 133,983		
Donated services and use of facilities		
Recoveries of prior year grants		
Other (Describe in Part XIV)		
Add lines 2a through 2d	2e	308,778
Subtract line 2e from line 1	3	6,388,906
Other (Describe in Part XIV)		
Add lines 4a and 4b	4c	0
	_	6,388,906
<u> </u>	per	
	1	7,180,011
Amounts included on line 1 but not on Form 990, Part IX, line 25		
Donated services and use of facilities		
Prior year adjustments		
Other losses		
Other (Describe in Part XIV)		
Add lines 2a through 2d	2e	17,860
Subtract line 2e from line 1	3	7,162,151
Amounts included on Form 990, Part IX, line 25, but not on line 1:		
Investment expenses not included on Form 990, Part VIII, line 7b 4a		
Other (Describe in Part XIV)		
Add lines 4a and 4b	4c	0
	Total expenses (Form 990, Part IX, column (A), line 25) Excess or (deficit) for the year Subtract line 2 from line 1 Net unrealized gains (losses) on investments Donated services and use of facilities Investment expenses Prior period adjustments Other (Describe in Part XIV) Total adjustments (net) Add lines 4 - 8 Excess or (deficit) for the year per financial statements Combine lines 3 and 9 **XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12 Net unrealized gains on investments Donated services and use of facilities Recoveries of prior year grants Other (Describe in Part XIV) Add lines 2a through 2d Subtract line 2a from line 1 Investment expenses not included on Form 990, Part VIII, line 12, but not on line 1 Investment expenses not included on Form 990, Part VIII, line 7b Add lines 4a and 4b Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12) XIII Reconciliation of Expenses per Audited Financial Statements With Expenses Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities 2a	Total expenses (Form 990, Part IX, column (A), line 25)

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

Part XIV Supplemental Information

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

Identifier	Return Reference	Explanation
	PART 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
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	THE ASSOCIATION FOLLOWS THE PROVISIONS OF THE ACCOUNTING STANDARD FOR 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 MEASUREMENT 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, 2010, 2009, AND 2008 REMAIN SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE
PART XI, LINE 8 - OTHER ADJUSTMENTS		CHANGE IN VALUE OF PERPETUAL TRUSTS 83,659 CHANGE IN INTEREST IN NET ASSETS OF A COMMUNITY FOUNDATION 73,276
PART XII, LINE 2D - OTHER ADJUSTMENTS		CHANGE IN VALUE OF PERPETUAL TRUSTS 83,659 CHANGE IN INTEREST OF A COMMUNITY FOUNDATION 73,276
PART XIII, LINE 2D - OTHER ADJUSTMENTS		RENTAL EXPENSES

DLN: 93493135032412

OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

Name of the organization **Employer identification number** YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF YORK 23-1360889 Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations e Solicitation of non-government grants Solicitation of government grants Internet and e-mail solicitations Phone solicitations Special fundraising events In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization Form 990-EZ filers are not required to complete this table (i) Name and address of (ii) Activity (iii) Did (iv) Gross receipts (v) A mount paid to (vi) A mount paid to ındıvıdual fundraiser have from activity (or retained by) (or retained by) or entity (fundraiser) custody or fundraiser listed in organization col (i) control of contributions? Yes List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

			(a) Event #1 WALK-A-MILE (event type)	(b) Event #2 Y-TRIATHLON (event type)	(c) Other Events	(d) Total Events (Add col (a) through col (c))
Φ			, ,,,,		(total number)	
Revenue	1	Gross receipts Less Charitable	26,411	25,596	46,302	98,309
Rev	2	contributions	26,411	25,596	42,144	94,151
	3	Gross income (line 1 minus line 2)			4,158	4,158
	4	Cash prizes				
မွာ	5	Non-cash prizes				
euse	6	Rent/facility costs				
Expenses	7	Food and beverages				
Direct	8	Entertainment				
ā	9	Other direct expenses .	4,781	6,137	25,004	35,922
	10	Direct expense summary Add lir	es 4 through 9 ın column	(d)		35,922
	11	Net income summary Combine li	nes 3 and 10 ın column (d	d)	•	-31,764
	t III	Gaming. Complete if the o \$15,000 on Form 990-EZ, li		103 10 101111 330, 141	111 v , mic 19, or repo	red more than
			(a) Bingo	(b) Pull tabs/Instant	(c) Other gaming	(d) Total gaming
	1	Cross revenue	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
Revenue		Gross revenue			(c) Other gaming	(Add col (a) through
Revenue		Gross revenue			(c) Other gaming	(Add col (a) through
Revenue	2				(c) Other gaming	(Add col (a) through
Expenses Reveilue	2	Cash prizes			(c) O ther gaming	(Add col (a) through
Expenses Reveilue	2 3 4	Cash prizes			(c) Other gaming	(Add col (a) through
	2 3 4 5	Cash prizes Non-cash prizes Rent/facility costs	∀es		(c) Other gaming	(Add col (a) through
Expenses Reveilue	2 3 4 5	Cash prizes Non-cash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary Add line	✓ Yes	☐ Yes% ☐ No	Г Yes	(Add col (a) through
Expenses Reveilue	2 3 4 5 6	Cash prizes	Yes%_ No s 2 through 5 in column (column thins 1 and 7 in column)	Yes	Г Yes	(Add col (a) through
6 Direct Expenses Reveilue	2 3 4 5 6 7 8 Ent.	Cash prizes Non-cash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary Add line Net gaming income summary Comer the state(s) in which the organiza	Yes%_ No s 2 through 5 in column (column in the lines 1 and 7 in column in the lines 1 and 1	Yes	Г Yes	(Add col (a) through col (c)
Direct Expenses Reveilue	2 3 4 5 6 7 8 Entities to	Cash prizes	Yes%_ No s 2 through 5 in column (or shine lines 1 and 7 in column ation operates gaming act gaming activities in each	Yes	Г Yes	· Yes No

11	Does the organization operate ga	aming activities with nonmembers? .		$\Gamma_{ m Yes}$ $\Gamma_{ m No}$
12	Is the organization a grantor, be	neficiary or trustee of a trust or a mem	ber of a partnership or other entity	
	formed to administer charitable o	gaming?		. Г _{Yes} Г _{No}
13	Indicate the percentage of gamin	ng activity operated in		
а	The organization's facility		13a	
b	An outside facility		13b	
14	Provide the name and address of records	f the person who prepares the organiza	tion's gaming/special events books and	
	Name 🟲			
	Address 🟲			
15a	Does the organization have a co	ntract with a third party from whom the	organization receives gaming	
	-	· ·		. Γ_{Yes} Γ_{No}
b			tion 🟲 \$ and the	, , , , , , , , , , , , , , , , , , , ,
	amount of gaming revenue retain	ned by the third party 🟲 \$		
c	If "Yes," enter name and address	s		
	Name 🟲			
	Address ►			
16	Gaming manager information			
	Name 🟲			
	Gaming manager compensation I	> \$		
	Description of services provided			
	Director/officer	□ Employee	Independent contractor	
17	Mandatory distributions			
а		er state law to make charitable distribu		
				Tyes No
b		required under state law distributed t	o other exempt organizations or spent	
D		activities during the tax year \$	reconnect to question on Cohedule C./	
Pa	t IV Complete this part to provide instructions.)	provide additional information for	responses to question on Schedule G (see
	Identifier	ReturnReference	Explanation	

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Schedule I

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

OMB No 1545-0047

DLN: 93493135032412

Open to Public **Inspection**

Department of the Treasury Internal Revenue Service Name of the organization

(Form 990)

Employer identification number

YOUNG WOMEN'S CHRISIIAN ASS	OCIATION OF YOR	K				23-1360889	
Part I General Information	on on Grants and	l Assistance					
 Does the organization maintain the selection criteria used to av Describe in Part IV the organization 	ward the grants or as	sıstance [?]					✓ Yes
Part II Grants and Other A Form 990, Part IV, lin duplicated if additional	ne 21 for any recip	ient that received n	nore than \$5,000. Ch	eck this box if no one	recipient receive	ed more than \$5,000	
1 (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
2 Enter total number of section 5	01(c)(3) and govern	ment organizations .					
3 Enter total number of other orga		_				<u> </u>	
For Privacy Act and Paperwork Reductio	n Act Notice, see the I	nstructions for Form 99	0.	Cat No 50055P		Schedu	le I (Form 990) 2010

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Hea Schadilla I-1 (Form 000) if additional enace Part III

Use Schedule I-1 (Form 990) if additional space is needed) if additional space	ıs 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
(1) REDUCED FEES FOR FITNESS CENTER, AQUATIC AND CHILD CARE PROGRAMS BASED UPON INCOME GUIDELINES	326	87,926		BASED ON 50% FEE REDUCTION	
(2) FUNDS SPENT TO RELOCATE CLIENTS WHO ARE VICTIMS OF DOMESTIC VIOLENCE AND ARE NOT SAFE IN THE YORK AREA	60	16,880		FMV	
(3) 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)	314	6,545		FΜV	

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 Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. **Explanation** Return Reference PART I, LINE 2 MONITORING GRANTS PROCEDURE FOR IN THE U S Part IV Identifier

DLN: 93493135032412

OMB No 1545-0047

Open to Public Inspection

Schedule J

(Form 990)

Department of the Treasury Internal Revenue Service

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

Compensation Information

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

► Attach to Form 990. ► See separate instructions.

Name of the organization

YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF YORK

23-1360889

Employer identification number

Pa	rt I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	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		No
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			
а	Receive a severance payment or change-of-control payment from the organization or a related organization?	4a		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Νo
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Νο
	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		No
b	Any related organization?	5b		No
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in form 990, Part VII, Section A, line $1a$, did the organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a		No
b	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			NI -
_		8		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

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

For each individual whose compensation must be reported in Schedule 1, 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)-(111) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	3C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits		reported in prior Form 990 or Form 990-EZ
(1) DEBRA STOCK	ΞΞ	150,000	0	15,000	15,577	5,053	185,630	0
(2)								
(3)								
(4)								
(5)								
(9)								
(7)								
(8)								
(6)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								

Schedule J (Form 990) 2010

Partition Supplemental Information

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

Identifier	Return Reference	Explanation
	PART I, LINE	PART I, LINE THE CEO SUBMITS ALL TRAVEL EXPENSES DIRECTLY TO THE NATIONAL YWCA AND THEY ARE REIMBURSED DIRECTLY ON AN AS NEEDED BASIS - IF
	1A	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) 2010

DLN: 93493135032412

OMB No 1545-0047

Open to Public Inspection

SCHEDULE M (Form 990)

Department of the Treasury

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

NonCash Contributions

Internal Revenue Service Name of the organization YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF YORK **Employer identification number**

					23-1360889			
Pa	rt I Types of Property							
		(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	(d) Method of determining of amounts		ontribut	ion
1	Art—Works of art			19				
2	Art—Historical treasures							
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household							
good								
6	Cars and other vehicles .	Х	1	21,159	FMV DETERMINED	BY D	ONOR	
7	Boats and planes							
	Intellectual property							
	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	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts .							
	P R O G R A M							
25	Other►(<u>COSTS</u>)	Х	62	26,310	FMV DETERMINED	BY D	ONOR	
26	O ther ►()							
27	O ther ►()							
28	O ther ► ()				<u> </u>			
29	Number of Forms 8283 received by				29			
	for which the organization complete	ea Form &	3283, Part IV, Donee Ackn	owieagement				
302	During the year, did the organization	on rocolv	a by contribution any propo	rty reported in Part I. lines	1-28 that it		Yes	No
30a	must hold for at least three years f							
	for exempt purposes for the entire			•	u to be used			No
						30a		No
	If "Yes," describe the arrangement					34	\ , _	
31	Does the organization have a gift a					31	Yes	
32a	Does the organization hire or use t contributions?		es 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 redescribe in Part II	evenuesı	n column (c) for a type of p	roperty for which column (a) is checked,			

Cat No 51227J

Schedule M (Form 990) 2010

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.

Identifier	Return Reference	Explanation
METHOD FOR DETERMINING	PART I, COLUMN (B)	CONTRIBUTIONS REPORTED ARE BASED ON THE NUMBER
NUMBER OF CONTRIBUTORS		OF CONTRIBUTIONS RECEIVED

Schedule M (Form 990) 2010

efile GRAPHIC print - DO NOT PRO	print - DO N	NOT PROCESS As Filed Data - DLN: 93493135032412	32412
SCHEDULE O (Form 990 or 990-EZ)		Supplemental Information to Form 990 or 990-EZ	15-0047 D
Department of the Treasury Internal Revenue Service		Complete to provide information for responses to specific questions on Form 990 or to provide any additional information. ▶ Attach to Form 990 or 990-EZ.	ublic
Name of the organization YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF YORK	zation STIAN ASSOCIATIO		_
		23-1360889	
Identifier	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	, NOR

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

Identifier	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 R	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, INE 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

Identifier	Return Reference	Explanation
	FORM 990,	THE YWCA PERSONNEL COMMITTEE AND THE DIRECTOR OF HUMAN RESOURCES MAINTAIN A PAY GRADE
	PART VI,	SCALE FOR THE ORGANIZATION WHICH INCLUDES COMPENSATION FOR THE CEO AND TOP MANAGEMENT
	SECTION B,	POSITIONS VARIOUS SOURCES AND PARTNERS ARE USED TO DETERMINE AND ASSESS THE SALARY SCALE
	LINE 15	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

Identifier	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

Identifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	PART NET UNREALIZED GAINS ON INVESTMENTS 133,983 CHANGE IN VALUE OF PERPETUAL TRUSTS 83,659 CHANGE IN INTEREST IN NET ASSETS OF A COMMUNITY FOUNDATION 73,276 TOTAL TO FORM 990, PART XI, LINE 5 290,918

Identifier	Return Reference	Explanation
	FORM 990, PART XII, LINE 2C	EVERY THREE YEARS FORMAL REQUESTS FOR PROPOSAL LETTERS ARE SUBMITTED TO INTERESTED ACCOUNTING FIRMS PROPOSALS ARE RECEIVED AND REVIEWED BY THE FINANCE COMMITTE. A DECISION IS MADE BASED UPON THE SCOPE OF WORK, THE AMOUNT OF FEES, AND THE QUALIFICATIONS OF THE FIRM THE FINANCE COMMITTE HAS RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR