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Form 990   Department of the Treasury Internal Revenue Service	<b>Return of Organization Exempt From Income Tax</b>  <b>Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)</b>  The organization may have to use a copy of this return to satisfy state reporting requirements	OMB No 1545-0047
		<b>2010</b>
		<b>Open to Public Inspection</b>

<b>A For the 2010 calendar year, or tax year beginning 07-01-2010 and ending 06-30-2011</b>		
<b>B</b> Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization MCGAW YOUNG MEN'S CHRISTIAN ASSOCIATION	<b>D Employer identification number</b>  36-2169194
	Doing Business As	<b>E Telephone number</b>  (847) 475-7400
	Number and street (or P O box if mail is not delivered to street address) 1000 Grove Street	
	Room/suite	
	City or town, state or country, and ZIP + 4 Evanston, IL 60201	<b>G</b> Gross receipts \$ 14,109,417
	<b>F</b> Name and address of principal officer WILLIAM GEIGER 1000 Grove Street Evanston,IL 60201	<b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  <b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) <b>H(c)</b> Group exemption number ▶
<b>I</b> Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) ◀(Insert no ) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
<b>J Website:</b> ▶ MCGAWYMCA.ORG		

<b>K</b> Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶	<b>L</b> Year of formation 1885	<b>M</b> State of legal domicile IL
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<b>Part I</b>	<b>Summary</b>
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Activities & Governance	<b>1</b> Briefly describe the organization's mission or most significant activities THE MCGAW YMCA IS AN OPEN, CHARITABLE, MEMBERSHIP ASSOCIATION THAT PROMOTES GROWTH IN SPIRIT, MIND, AND BODY THROUGH PROGRAMS AND SERVICES FOR ALL IN OUR DIVERSE COMMUNITY		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
<b>3</b> Number of voting members of the governing body (Part VI, line 1a) . . . . .	<b>3</b>	30	
<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b) . . . . .	<b>4</b>	30	
<b>5</b> Total number of individuals employed in calendar year 2010 (Part V, line 2a) . . . . .	<b>5</b>	606	
<b>6</b> Total number of volunteers (estimate if necessary) . . . . .	<b>6</b>	1,400	
<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12 . . . . .	<b>7a</b>	0	
<b>b</b> Net unrelated business taxable income from Form 990-T, line 34 . . . . .	<b>7b</b>	0	
Revenue	<b>8</b> Contributions and grants (Part VIII, line 1h) . . . . .	<b>Prior Year</b>	<b>Current Year</b>
	<b>9</b> Program service revenue (Part VIII, line 2g) . . . . .	2,132,719	1,434,056
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d ) . . . . .	10,884,253	11,496,885
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	165,526	166,117
	<b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) . . . . .	270,532	299,452
		13,453,030	13,396,510
Expenses	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1–3 ) . . . . .	1,345,616	1,349,426
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4) . . . . .	0	0
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	6,914,089	7,506,983
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e) . . . . .	0	0
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶313,130		
	<b>17</b> Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f) . . . . .	4,171,780	4,251,124
	<b>18</b> Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	12,431,485	13,107,533
	<b>19</b> Revenue less expenses Subtract line 18 from line 12 . . . . .	1,021,545	288,977
Net Assets or Fund Balances		<b>Beginning of Current Year</b>	<b>End of Year</b>
	<b>20</b> Total assets (Part X, line 16) . . . . .	22,255,228	21,877,019
	<b>21</b> Total liabilities (Part X, line 26) . . . . .	9,935,905	8,563,992
	<b>22</b> Net assets or fund balances Subtract line 21 from line 20 . . . . .	12,319,323	13,313,027

<b>Part II</b>	<b>Signature Block</b>
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Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

<b>Sign Here</b>	Signature of officer	2010-11-30			
		Date			
<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	Firm's name ▶				Firm's EIN ▶
	Firm's address ▶				Phone no ▶

May the IRS discuss this return with the preparer shown above? (see instructions) . . . . . ☐ Yes ☐ No

Part III

Statement of Program Service Accomplishments

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

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1

Briefly describe the organization’s mission

THE MCGAW YMCA IS AN OPEN CHARITABLE, MEMBERSHIP ASSOCIATION THAT PROMOTES GROWTH IN SPIRIT, MIND AND BODY THROUGH PROGRAMS AND SERVICES FOR ALL IN OUR DIVERSE COMMUNITY THE YMCA IS A CAUSE-DRIVEN, CHARITABLE ORGANIZATION COMMITTED TO BUILDING THE FOUNDATIONS OF COMMUNITY WE SEEK TO UNDERSTAND AND ADDRESS COMMUNITY NEEDS IN ORDER TO EFFECT LASTING PERSONAL AND SOCIAL CHANGE IN OUR THREE AREAS OF FOCUS YOUTH DEVELOPMENT, HEALTHY LIVING AND SOCIAL RESPONSIBILITY

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes ☐ No

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

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

If “Yes,” describe these changes on Schedule O

4

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

4a

(Code ) (Expenses \$ 3,466,615 including grants of \$ 379,500 ) (Revenue \$ 3,137,548 )

CHILD CARE THE MCGAW YMCA CHILDREN'S CENTER SEEKS TO PROVIDE ACCESSIBLE, HIGH QUALITY, COMPREHENSIVE CARE AND EDUCATION FOR A DIVERSE COMMUNITY IN A SAFE, NURTURING ENVIRONMENT TO ENSURE HIGHEST QUALITY, WE MAINTAIN NAEYC, THE NATION'S LEADING ORGANIZATION OF EARLY CHILDHOOD PROFESSIONALS ACCREDITATION THE PARTNERSHIP OF CHILD, PARENT AND DEDICATED STAFF, SUPPORTS CHILDREN IN OUR CARE TO BECOME RESPONSIBLE, RESPECTFUL AND CARING INDIVIDUALS THIS PARTNERSHIP STRIVES TO NOURISH THE CHILDREN'S PHYSICAL, INTELLECTUAL, EMOTIONAL AND SOCIAL DEVELOPMENT BY PROVIDING WELL-ROUNDED, FUN, CREATIVE AND ENRICHING PROGRAMS AND EXPERIENCES WE CURRENTLY SERVE 364 CHILDREN-INFANTS THROUGH SCHOOL AGE AND PROVIDE MORE THAN \$350,000 IN SCHOLARSHIPS TO ENABLE OVER 55 FAMILIES THE NECESSARY SUBSIDIES TO PARTICIPATE IN OUR PROGRAMS

4b

(Code ) (Expenses \$ 3,465,608 including grants of \$ 73,965 ) (Revenue \$ 1,223,346 )

HEALTH & WELLNESS THE YMCA FOCUS ON HEALTHY LIVING BY ADVOCATING HEALTH AND WELL-BEING FROM THE INSIDE OUT- THE SPIRIT, MIND AND BODY THE MCGAW YMCA PROVIDES NEARLY 12,000 MEMBERS WITH THE SUPPORTIVE RELATIONSHIPS AND ENVIRONMENTS THEY NEED FOR THEIR SUCCESSFUL PURSUIT OF HEALTH AND WELL-BEING THIS IS PARTICULARLY IMPORTANT AS OUR NATION AND OUR COMMUNITY STRUGGLE WITH AN OBESITY EPIDEMIC AND WITH WORK/LIFE BALANCE AS INDIVIDUALS SEARCH FOR PERSONAL FULFILLMENT WE BRING FAMILIES TOGETHER AND OFFER SPORT, RECREATIONAL AND SOCIAL NETWORKS THAT BUILD RELATIONSHIPS AND STRENGTHEN BONDS INCLUDED IN THE TOTAL EXPENSE IN THIS AREA OF FOCUS, ARE \$1,869,771 OF GENERAL HEALTH AND WELLNESS, \$974,967 OF AQUATICS AND \$620,870 OF YOUTH AND FAMILY PROGRAMS

4c

(Code ) (Expenses \$ 1,901,073 including grants of \$ 648,388 ) (Revenue \$ 3,891,949 )

MEMBERSHIP WITH NEARLY 12,000 MEMBERS FROM INFANTS TO 90+ YEAR OLDS, OUR COMMUNITY GREW BY 4% FROM THE PREVIOUS FISCAL YEAR AND 10% SINCE 2009 EACH YEAR WE STRIVE TO FULFILL OUR MISSION OF SERVICE THROUGH OUR INCOME-BASED "MEMBERSHIP FOR ALL" PRICING THAT SETS MEMBERSHIP FEES BASED ON HOUSEHOLD INCOME AND THE NUMBER OF INDIVIDUALS IN THE HOUSEHOLD 34% OF MEMBERS WERE ABLE TO ENGAGE IN ACTIVITIES AND SERVICES AND DEVELOP THE FEELING OF BELONGING TO OUR YMCA COMMUNITY BY ENJOYING RATES ADJUSTED FOR THEIR CIRCUMSTANCES, AND WE PROVIDED OVER \$648,000 TO SUPPORT NEED-BASED FEE REDUCTION FOR MEMBERSHIP ALONE IN ADDITION, WE DONATED 97 MEMBERSHIPS DURING 2011 FISCAL YEAR TO LOCAL BUSINESSES AND CHARITIES TO USE IN SILENT AUCTIONS OR EVENTS

4d

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









(Expenses \$ 2,869,981 including grants of \$ 247,573 ) (Revenue \$ 3,244,042 )

4e

Total program service expenses \$ 11,703,277

Part IV

Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A.</i> 	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? <i>If "Yes," complete Schedule C, Part I.</i>	3	No
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II.</i>	4	No
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? <i>If "Yes," complete Schedule C, Part III.</i>	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? <i>If "Yes," complete Schedule D, Part I.</i>	6	No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <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? <i>If "Yes," complete Schedule D, Part III.</i>	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? <i>If "Yes," complete Schedule D, Part IV.</i>	9	No
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	Yes
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		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <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? <i>If "Yes," complete Schedule D, Part VII.</i>	11b	No
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? <i>If "Yes," complete Schedule D, Part VIII.</i>	11c	No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX.</i>	11d	No
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i> 	11e	Yes
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X.</i> 	11f	Yes
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII.</i> 	12a	Yes
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional.</i>	12b	No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E.</i>	13	No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Parts I and IV.</i>	14b	No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? <i>If "Yes," complete Schedule F, Parts II and IV.</i>	15	No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S? <i>If "Yes," complete Schedule F, Parts III and IV.</i>	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 "Yes," complete Schedule G, Part I (see instructions).</i>	17	No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II.</i> 	18	Yes
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III.</i>	19	No
20a	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H.</i>	20a	No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? <b>Note.</b> Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions).	20b	

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> . . . . .	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> . . . . .	22	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? <i>If "Yes," complete Schedule J</i> . . . . .	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b–24d and complete Schedule K. If "No," go to line 25</i> . . . . .	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	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> . . . . .	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> . . . . .	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i> . . . . .	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i> . . . . .	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . . . .	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> . . . . .	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> . . . . .	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> . . . . .	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> . . . . .	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i> . . . . .	34		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? . . . . .	35		No
a	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> . . . . .	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance						
Check if Schedule O contains a response to any question in this Part V <input type="checkbox"/>						
			Yes	No		
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	1a	47			
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			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return.	2a	606	2b	Yes	
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?						
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).						
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a			No	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	3b				
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a			No	
b If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.						
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a			No	
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			No	
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c				
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a			No	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b				
7 Organizations that may receive deductible contributions under section 170(c).						
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Yes		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		Yes		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			No	
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			No	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			No	
g	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		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?						
8						
9 Sponsoring organizations maintaining donor advised funds.						
a	Did the organization make any taxable distributions under section 4966?	9a				
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b				
10 Section 501(c)(7) organizations. Enter						
a	Initiation fees and capital contributions included on Part VIII, line 12.	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b				
11 Section 501(c)(12) organizations. Enter						
a	Gross income from members or shareholders.	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b				
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?						
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b				
13 Section 501(c)(29) qualified nonprofit health insurance issuers.						
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a				
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13b				
c	Enter the amount of reserves on hand.	13c				
14a Did the organization receive any payments for indoor tanning services during the tax year?						
14a						
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.						
14b						

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

Section A. Governing Body and Management			Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year . . . . .	<b>1a</b> 30		
<b>b</b>	Enter the number of voting members included in line 1a, above, who are independent . . . . .	<b>1b</b> 30		
<b>2</b>	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? . . . . .	<b>2</b>		No
<b>3</b>	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? . . . . .	<b>3</b>		No
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . . . .	<b>4</b>		No
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets? . . . . .	<b>5</b>		No
<b>6</b>	Does the organization have members or stockholders? . . . . .	<b>6</b>	Yes	
<b>7a</b>	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? . . . . .	<b>7a</b>	Yes	
<b>b</b>	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? . . . . .	<b>7b</b>		No
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following . . . . .			
<b>a</b>	The governing body? . . . . .	<b>8a</b>	Yes	
<b>b</b>	Each committee with authority to act on behalf of the governing body? . . . . .	<b>8b</b>	Yes	
<b>9</b>	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 . . . . .	<b>9</b>		No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			Yes	No
<b>10a</b>	Does the organization have local chapters, branches, or affiliates? . . . . .	<b>10a</b>		No
<b>b</b>	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? . . . . .	<b>10b</b>		
<b>11a</b>	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? . . . . .	<b>11a</b>	Yes	
<b>b</b>	Describe in Schedule O the process, if any, used by the organization to review this Form 990 . . . . .			
<b>12a</b>	Does the organization have a written conflict of interest policy? If "No," go to line 13 . . . . .	<b>12a</b>	Yes	
<b>b</b>	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . .	<b>12b</b>	Yes	
<b>c</b>	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done . . . . .	<b>12c</b>	Yes	
<b>13</b>	Does the organization have a written whistleblower policy? . . . . .	<b>13</b>	Yes	
<b>14</b>	Does the organization have a written document retention and destruction policy? . . . . .	<b>14</b>	Yes	
<b>15</b>	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? . . . . .			
<b>a</b>	The organization's CEO, Executive Director, or top management official . . . . .	<b>15a</b>	Yes	
<b>b</b>	Other officers or key employees of the organization . . . . .	<b>15b</b>	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions) . . . . .			
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? . . . . .	<b>16a</b>		No
<b>b</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? . . . . .	<b>16b</b>		

Section C. Disclosure	
<b>17</b>	List the States with which a copy of this Form 990 is required to be filed <b>IL</b>
<b>18</b>	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. <input checked="" type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request
<b>19</b>	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.
<b>20</b>	State the name, physical address, and telephone number of the person who possesses the books and records of the organization. <b>Nancy Petrillo 1000 Grove Street Evanston, IL 60201 (847) 475-7400</b>

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

Check if Schedule O contains a response to any question in this Part VII . . . . . ☐

## 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

[illegible]



## Part VII

<b>1b</b>	<b>Sub-Total</b>			
<b>c</b>	<b>Total from continuation sheets to Part VII, Section A</b>			
<b>d</b>	<b>Total (add lines 1b and 1c)</b>	354,328	0	64,741

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

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

## **Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ►0

Part VIII

Statement of Revenue

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections  512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a Federated campaigns . . . . . 1a	19,850			
	b Membership dues . . . . . 1b				
	c Fundraising events . . . . . 1c	151,925			
	d Related organizations . . . . . 1d				
	e Government grants (contributions) 1e				
	f All other contributions, gifts, grants, and similar amounts not included above 1f	1,262,281			
	g Noncash contributions included in lines 1a-1f \$	53,464			
	h Total. Add lines 1a-1f . . . . . ▶	1,434,056			
	Program Service Revenue		Business Code		
2a MEMBERSHIP		713940	3,891,949	3,891,949	
b CHILDCARE FEES		624410	3,137,548	3,137,548	
c CAMP ECHO FEES		624100	1,697,102	1,697,102	
d HEALTH AND WELLNESS		624100	1,223,346	1,223,346	
e RESIDENCE		531110	1,057,700	1,057,700	
f All other program service revenue			489,240	489,240	0
g Total. Add lines 2a-2f . . . . . ▶			11,496,885		
Other Revenue	3 Investment income (including dividends, interest and other similar amounts) . . . . . ▶		142,691		142,691
	4 Income from investment of tax-exempt bond proceeds . . ▶		0		
	5 Royalties . . . . . ▶		0		
	6a Gross Rents	(i) Real	(ii) Personal		
	b Less rental expenses				
	c Rental income or (loss)	0	0		
	d Net rental income or (loss) . . . . . ▶			0	
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other		
	b Less cost or other basis and sales expenses	653,238			
	c Gain or (loss)	629,812			
	d Net gain or (loss) . . . . . ▶	23,426	0	23,426	23,426
	8a Gross income from fundraising events (not including \$ 151,925 of contributions reported on line 1c) See Part IV, line 18 . . . . . a		73,710		
	b Less direct expenses . . . . . b		83,095		
	c Net income or (loss) from fundraising events . . ▶			-9,385	-9,385
	9a Gross income from gaming activities See Part IV, line 19 . a				
	b Less direct expenses . . . . . b				
	c Net income or (loss) from gaming activities . . ▶			0	
	10a Gross sales of inventory, less returns and allowances . . . . . a				
	b Less cost of goods sold . . . . . b				
	c Net income or (loss) from sales of inventory . . ▶			0	
Miscellaneous Revenue	Business Code				
11a USE OF SPACE	532000	123,751		123,751	
b LOCKER RENTAL	532000	44,168		44,168	
c FORGIVENESS OF NOTES PAYABLE	900099	41,700	41,700		
d All other revenue . . . . .		99,218	77,049	0	
e Total. Add lines 11a-11d . . . . . ▶		308,837			
12 Total revenue. See Instructions . . . . . ▶		13,396,510	11,615,634	0	346,820

Part IX

Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	0			
2	Grants and other assistance to individuals in the U S See Part IV, line 22	1,349,426	1,349,426		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees . . . . .	499,306	178,305	159,179	161,822
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .	0			
7	Other salaries and wages	5,507,377	5,167,444	238,460	101,473
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . . . .	376,485	359,424	14,375	2,686
9	Other employee benefits . . . . .	700,779	636,262	41,520	22,997
10	Payroll taxes . . . . .	423,036	375,658	28,971	18,407
a	Fees for services (non-employees)				
	Management . . . . .	17,500		17,500	
b	Legal . . . . .	5,674		5,674	
c	Accounting . . . . .	0			
d	Lobbying . . . . .	0			
e	Professional fundraising services See Part IV, line 17 . . . . .	0			
f	Investment management fees . . . . .	22,668		22,668	
g	Other . . . . .	373,286	317,841	55,445	
12	Advertising and promotion . . . . .	203,979	146,878	57,101	
13	Office expenses . . . . .	295,590	200,107	89,738	5,745
14	Information technology . . . . .	2,744	2,744		
15	Royalties . . . . .	0			
16	Occupancy . . . . .	731,540	707,191	24,349	
17	Travel . . . . .	45,042	27,379	17,663	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .	0			
19	Conferences, conventions, and meetings . . . . .	59,529	15,798	43,731	
20	Interest . . . . .	46,127	28,925	17,202	
21	Payments to affiliates . . . . .	0			
22	Depreciation, depletion, and amortization . . . . .	654,100	618,803	35,297	
23	Insurance . . . . .	78,044	22,375	55,669	
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 )				
a	PROGRAM SUPPLIES	801,059	801,059		
b	REPAIRS AND MAINTENANCE	429,807	392,263	37,544	
c	VEHICLE RENTAL AND EXPENSE	147,603	147,332	271	
d	DUES AND SUBSCRIPTIONS	128,099	19,916	108,183	
e	BOND MAINTENANCE COSTS	74,920	70,425	4,495	
f	All other expenses	133,813	117,722	16,091	0
25	Total functional expenses. Add lines 1 through 24f	13,107,533	11,703,277	1,091,126	313,130
26	Joint costs. Check here <input type="checkbox"/> 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	0			

Part X

Balance Sheet

						(A)		(B)
						Beginning of year		End of year
Assets	1	Cash—non-interest-bearing . . . . .				210,647	1	297,683
	2	Savings and temporary cash investments . . . . .				2,266,599	2	1,386,890
	3	Pledges and grants receivable, net . . . . .				406,075	3	224,073
	4	Accounts receivable, net . . . . .				214,434	4	138,863
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L . . . . .					5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Schedule L . . . . .					6	
	7	Notes and loans receivable, net . . . . .					7	
	8	Inventories for sale or use . . . . .					8	
	9	Prepaid expenses and deferred charges . . . . .				177,855	9	161,965
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	25,240,784				
	b	Less accumulated depreciation . . . . .	10b	10,850,099	14,570,967	10c	14,390,685	
	11	Investments—publicly traded securities . . . . .				3,658,456	11	4,167,947
	12	Investments—other securities See Part IV, line 11 . . . . .				415,571	12	513,910
	13	Investments—program-related See Part IV, line 11 . . . . .					13	0
	14	Intangible assets . . . . .					14	
	15	Other assets See Part IV, line 11 . . . . .				334,624	15	595,003
16	Total assets. Add lines 1 through 15 (must equal line 34) . . . . .				22,255,228	16	21,877,019	
Liabilities	17	Accounts payable and accrued expenses . . . . .				1,126,930	17	873,049
	18	Grants payable . . . . .					18	
	19	Deferred revenue . . . . .				1,240,319	19	1,300,041
	20	Tax-exempt bond liabilities . . . . .				6,300,000	20	5,600,000
	21	Escrow or custodial account liability Complete Part IV of Schedule D . . . . .					21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L . . . . .				100,000	22	0
	23	Secured mortgages and notes payable to unrelated third parties . . . . .				972,698	23	620,415
	24	Unsecured notes and loans payable to unrelated third parties . . . . .					24	
	25	Other liabilities Complete Part X of Schedule D . . . . .				195,958	25	170,487
	26	Total liabilities. Add lines 17 through 25 . . . . .				9,935,905	26	8,563,992
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.							
	27	Unrestricted net assets . . . . .				11,323,370	27	12,077,162
	28	Temporarily restricted net assets . . . . .				322,814	28	465,045
	29	Permanently restricted net assets . . . . .				673,139	29	770,820
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.							
	30	Capital stock or trust principal, or current funds . . . . .					30	
	31	Paid-in or capital surplus, or land, building or equipment fund . . . . .					31	
	32	Retained earnings, endowment, accumulated income, or other funds . . . . .					32	
	33	Total net assets or fund balances . . . . .				12,319,323	33	13,313,027
	34	Total liabilities and net assets/fund balances . . . . .				22,255,228	34	21,877,019

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	13,396,510
2	Total expenses (must equal Part IX, column (A), line 25)	2	13,107,533
3	Revenue less expenses Subtract line 2 from line 1	3	288,977
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	12,319,323
5	Other changes in net assets or fund balances (explain in Schedule O)	5	704,727
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	13,313,027

Part XII Financial Statements and Reporting

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

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

SCHEDULE A  
(Form 990 or 990EZ)

Department of the Treasury  
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization MCGAW YOUNG MEN'S CHRISTIAN ASSOCIATION	Employer identification number 36-2169194
---	--

Part I

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

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

1

☐

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

2

☐

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

3

☐

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

4

☐

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

5

☐

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

6

☐

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

7

☐

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

8

☐

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

9

☒

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

10

☐

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

11

☐

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

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other

e

☐

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

f

☐

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

g

☐

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

(i)

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

(ii)

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

(iii)

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

h

☐

Provide the following information about the supported organization(s)

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

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

Part II

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

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

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 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.")						
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 line 4						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4						
8 Gross income from interest, 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)						
12 Gross receipts from related activities, etc (See instructions )					12	

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

▶

Section C. Computation of Public Support Percentage		
14 Public Support Percentage for 2010 (line 6 column (f) divided by line 11 column (f))	14	
15 Public Support Percentage for 2009 Schedule A, Part II, line 14	15	
16a 33 1/3% support test—2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		▶
b 33 1/3% support test—2009. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		▶
17a 10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization		▶
b 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization		▶
18 Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions		▶

Part IIIPart 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.)

Section A. Public Support						
Calendar 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.")	3,718,759	4,739,637	6,443,518	5,800,329	5,326,005	26,028,248
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	5,527,386	5,998,863	6,921,007	7,389,992	7,678,646	33,515,894
3 Gross receipts from activities that are not an unrelated trade or business under section 513						0
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
5 The value of services or facilities furnished by a governmental unit to the organization without charge						0
6 Total. Add lines 1 through 5	9,246,145	10,738,500	13,364,525	13,190,321	13,004,651	59,544,142
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	408,429	604,586	272,829	324,308	516,054	2,126,206
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	64,437	203,192	1,849,283	99,555	41,825	2,258,292
c Add lines 7a and 7b	472,866	807,778	2,122,112	423,863	557,879	4,384,498
8 Public Support (Subtract line 7c from line 6 )						55,159,644

Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6	9,246,145	10,738,500	13,364,525	13,190,321	13,004,651	59,544,142
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	176,837	204,932	142,917	131,336	142,691	798,713
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0
c Add lines 10a and 10b	176,837	204,932	142,917	131,336	142,691	798,713
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV )	302,620	300,439	280,940	322,724	308,837	1,515,560
13 Total support (Add lines 9, 10c, 11 and 12 )	9,725,602	11,243,871	13,788,382	13,644,381	13,456,179	61,858,415
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section501(c)(3) organization, check this box and stop here	<input type="checkbox"/>					

Section C. Computation of Public Support Percentage			
15 Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f))	15	89 170 %	
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	88 850 %	

Section D. Computation of Investment Income Percentage			
17	Investment income percentage for <b>2010</b> (line 10c column (f) divided by line 13 column (f))	17	1 290 %
18	Investment income percentage from <b>2009</b> Schedule A, Part III, line 17	18	1 370 %
19a	<b>33 1/3% support tests—2010.</b> 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 <b>stop here</b> . The organization qualifies as a publicly supported organization		
b	<b>33 1/3% support tests—2009.</b> 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 <b>stop here</b> . The organization qualifies as a publicly supported organization		
20	<b>Private Foundation</b> If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions		



Part IV

Supplemental Information. Supplemental Information. Complete this part to provide the 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).

Facts And Circumstances Test

Explanation

Additional Data

Software ID: 10000128

Software Version: v2010.1.0

EIN: 36-2169194

Name: MCGAW YOUNG MEN'S CHRISTIAN ASSOCIATION

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
VICKIE BURKE CHAIR OF THE BOARD	2	X		X				0	0	0
SUZANNE CALDER VICE-CHAIR OF THE BOARD	2	X		X				0	0	0
DAN ISRAELITE TREASURER OF THE BOARD	2	X		X				0	0	0
SANDRA HILL SECRETARY OF THE BOARD	2	X		X				0	0	0
JAN HAZLETT DIRECTOR OF THE BOARD	2	X						0	0	0
DOUG HONNOLD DIRECTOR OF THE BOARD	2	X						0	0	0
TOM WALDER DIRECTOR OF THE BOARD	1	X						0	0	0
KRISTIN BROWN DIRECTOR OF THE BOARD	2	X						0	0	0
BETSI BURNS DIRECTOR OF THE BOARD	1	X						0	0	0
SIDNEY CASELBERRY DIRECTOR OF THE BOARD	1	X						0	0	0
JAC CERNEY DIRECTOR OF THE BOARD	1	X						0	0	0
SUSAN EMRICH DIRECTOR OF THE BOARD	1	X						0	0	0
LOUIS ENGLISH DIRECTOR OF THE BOARD	1	X						0	0	0
ELENA GARCIA ANSANI DIRECTOR OF THE BOARD	1	X						0	0	0
STEVE GILFORD DIRECTOR OF THE BOARD	1	X						0	0	0
FREDDI L GREENBERG DIRECTOR OF THE BOARD	1	X						0	0	0
REJJI HAYES DIRECTOR OF THE BOARD	1	X						0	0	0
KIRK HOOPINGARNER DIRECTOR OF THE BOARD	2	X						0	0	0
ROSA MCANDREW DIRECTOR OF THE BOARD	1	X						0	0	0
CAROL REMEN DIRECTOR OF THE BOARD	1	X						0	0	0
BART ROCCA DIRECTOR OF THE BOARD	1	X						0	0	0
MICHELE ROGERS DIRECTOR OF THE BOARD	1	X						0	0	0
DON TARKINGTON DIRECTOR OF THE BOARD	1	X						0	0	0
PATRICIA VANCE DIRECTOR OF THE BOARD	1	X						0	0	0
CASEY LEWIS VARELA DIRECTOR OF THE BOARD	1	X						0	0	0

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MICHAEL WALKER DIRECTOR OF THE BOARD	1	X						0	0	0
MATT WALSH DIRECTOR OF THE BOARD	1	X						0	0	0
DR ERIC WITHERSPOON DIRECTOR OF THE BOARD	1	X						0	0	0
WILLIAM F GEIGER PRESIDENT/CEO	50			X				170,502	0	38,860
NANCY PETRILLO VP FINANCE & ADMIN	50			X				7,308	0	0
ELIDA GRAVES DIRECTOR OF THE BOARD	1	X						0	0	0
PAMELA JAMES DIRECTOR OF THE BOARD	1	X						0	0	0
MATTHEW JOHNSON V P FUND DEVELOPMENT & MARKETING	50			X				131,041	0	14,921
MONIQUE PARSONS VP OPERATIONS	50			X				45,477	0	10,960

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

4d. Other program services						
(Code	)	(Expenses \$	1,559,428	including grants of \$	133,302 ) (Revenue \$	1,697,102 )
CAMP ECHO THE MCGAW YMCA IS A RECOGNIZED LEADER IN NURTURING THE POTENTIAL OF EVERY CHILD AND TEEN EVERY DAY THROUGH PROGRAMS THAT HELP YOUNG PEOPLE DEEPEN POSITIVE VALUES, THEIR COMMITMENT TO SERVICE AND MOTIVATION TO LEARN CAMP ECHO'S GOAL IS TO OPERATE A FUN, ENGAGING PROGRAM WHILE FOSTERING THE PHYSICAL, EMOTIONAL AND SPIRITUAL WELL-BEING OF ITS PARTICIPANTS WE PROMOTE CHARACTER DEVELOPMENT, CELEBRATE DIVERSITY, ENCOURAGE SERVICE LEARNING AND TEACH OUR TEEN PARTICIPANTS LEADERSHIP SKILLS DURING OUR SUMMER CAMP IN 2011, WE HAD OVER 1,200 CAMPER EXPERIENCE CAMP IN 1,358 SESSION SPOTS, THE LARGEST TOTAL EVER THE TOTAL NUMBER OF ADULTS, YOUTH AND PRESCHOOLERS ATTENDING OUR FOUR FAMILY CAMP PROGRAMS WAS OVER 550 AS OF JUNE 30TH, OVER \$133,000 WAS PROVIDED TO 171 YOUTH AND 9 FAMILIES WHO RECEIVED FULL OR PARTIAL SCHOLARSHIPS ALLOWING MORE CHILDREN, YOUTH AND FAMILIES THE OPPORTUNITY TO PARTICIPATE IN CAMP PROGRAMMING						
(Code	)	(Expenses \$	1,005,408	including grants of \$	78,504 ) (Revenue \$	1,057,700 )
RESIDENT MEMBER PROGRAM DURING FISCAL YEAR 2011 WE SERVED 269 RESIDENT MEMBERS AND AWARDED MORE THAN \$78,000 IN FEE ASSISTANCE AND SUBSIDIES TO 47 OF THESE LOW- AND VERY LOW-INCOME RESIDENTS ON AVERAGE, 90% OF OUR 172 ACCOMMODATIONS FOR MEN REMAINED OCCUPIED IN FISCAL YEAR 2011 WE CONTINUE TO EXPAND SERVICES WITHIN OUR COMMUNITY TO SUPPORT OUR MEMBER RESIDENTS DURING THE YEAR WE CONDUCTED OUR FIRST FOOD AND WELLNESS WORKSHOP FOR RESIDENT MEMBERS, WITH TOPICS RANGING FROM THE BASICS OF NUTRITION, EATING FOR CERTAIN MEDICAL CONDITIONS, AFFORDABLE AND NUTRITIOUS MEAL OPTIONS AT LOCAL EVANSTON RESTAURANTS, SHOPPING FOR HEALTHY MEALS ON A BUDGET, AND MAKING NUTRITIOUS MEALS WITH A MICROWARE THE PILOT WORKSHOP WAS CONDUCTED IN PARTNERSHIP WITH NORTH SHORE COMMUNITY BANK AND DOWNTOWN EVANSTON, AND WAS SO POPULAR THAT WE HAVE A WAITING LIST FOR FUTURE WORKSHOPS						
(Code	)	(Expenses \$	305,145	including grants of \$	35,767 ) (Revenue \$	489,240 )
DAY CAMP AT THE MCGAW YMCA, WE BUILD STRONG KIDS - STRONG IN CONFIDENCE AND THE CHARACTER-BUILDING VALUES THAT HELP THEM GROW INTO RESPONSIBLE AND CARING YOUTH AND ADULTS DURING FISCAL YEAR 2011, WE PROVIDED SUMMER CAMP PROGRAMS TO CHILDREN FROM AGE 2 THROUGH 8TH GRADE, PROVIDING A FUN FILLED LEARNING ENVIRONMENT TO MORE THAN 240 CAMPER, WITH 29% OR 71 CHILDREN RECEIVING FEE ASSISTANCE CAMP RAINBOW OFFERS FUN AND A LEARNING EXPERIENCE IN A HALF DAY PROGRAM DESIGNED FOR PRE-SCHOOL CHILDREN, WHILE CAMP WANAGO, A FULL DAY PROGRAM FOR CAMPER FROM 1ST TO 5TH GRADE AND THE SUMMER ADVENTURE CLUB, A PROGRAM FOR 6TH TO 8TH GRADE, HELP CAMPER LEARN LIFE SKILLS IN A SPECIAL COMMUNITY OF FUN AND FRIENDSHIP THAT ONLY CAMP CAN OFFER						

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.

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

OMB No 1545-0047

2010

Open to Public Inspection

If the organization answered “Yes,” to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

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

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

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

If the organization answered “Yes,” to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization MCGAW YOUNG MEN'S CHRISTIAN ASSOCIATION	Employer identification number 36-2169194
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1	Provide a description of the organization’s direct and indirect political campaign activities in Part IV	
2	Political expenditures	▶ \$ _____
3	Volunteer hours	_____

Part I-B Complete if the organization is exempt under section 501(c)(3).

1	Enter the amount of any excise tax incurred by the organization under section 4955	▶ \$ _____
2	Enter the amount of any excise tax incurred by organization managers under section 4955	▶ \$ _____
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4a	Was a correction made?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b	If "Yes," describe in Part IV	

Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3).

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	▶ \$ _____
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities	▶ \$ _____
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b	▶ \$ _____ 0
4	Did the filing organization file Form 1120-POL for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization’s funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV	

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

Part II-A

Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A

Check

☐

if the filing organization belongs to an affiliated group

B

Check

☐

if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing Organization's Totals	(b) Affiliated Group Totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)															
b Total lobbying expenditures to influence a legislative body (direct lobbying)															
c Total lobbying expenditures (add lines 1a and 1b)															
d Other exempt purpose expenditures															
e Total exempt purpose expenditures (add lines 1c and 1d)															
f Lobbying nontaxable amount Enter the amount from the following table in both columns															
<table><tr><td>If the amount on line 1e, column (a) or (b) is:</td><td>The lobbying nontaxable amount is:</td></tr><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></table>		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		
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														
g Grassroots nontaxable amount (enter 25% of line 1f)															
h Subtract line 1g from line 1a If zero or less, enter -0-															
i Subtract line 1f from line 1c If zero or less, enter -0-															
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes	<input type="checkbox"/> 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)).**

		(a)		(b)
		Yes	No	Amount
<b>1</b>	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			
<b>a</b>	Volunteers?			
<b>b</b>	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
<b>c</b>	Media advertisements?			
<b>d</b>	Mailings to members, legislators, or the public?			
<b>e</b>	Publications, or published or broadcast statements?			
<b>f</b>	Grants to other organizations for lobbying purposes?			
<b>g</b>	Direct contact with legislators, their staffs, government officials, or a legislative body?			
<b>h</b>	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
<b>i</b>	Other activities? If "Yes," describe in Part IV			
<b>j</b>	Total lines 1c through 1i			0
<b>2a</b>	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
<b>b</b>	If "Yes," enter the amount of any tax incurred under section 4912			
<b>c</b>	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
<b>d</b>	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
<b>1</b>	Were substantially all (90% or more) dues received nondeductible by members?	<b>1</b>	
<b>2</b>	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	<b>2</b>	
<b>3</b>	Did the organization agree to carryover lobbying and political expenditures from the prior year?	<b>3</b>	

**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".**

<b>1</b>	Dues, assessments and similar amounts from members	<b>1</b>	
<b>2</b>	Section 162(e) non-deductible lobbying and political expenditures <b>(do not include amounts of political expenses for which the section 527(f) tax was paid).</b>		
<b>a</b>	Current year	<b>2a</b>	
<b>b</b>	Carryover from last year	<b>2b</b>	
<b>c</b>	Total	<b>2c</b>	0
<b>3</b>	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	<b>3</b>	
<b>4</b>	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?	<b>4</b>	
<b>5</b>	Taxable amount of lobbying and political expenditures (see instructions)	<b>5</b>	

**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
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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.  
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

<b>Name of the organization</b> MCGAW YOUNG MEN'S CHRISTIAN ASSOCIATION	<b>Employer identification number</b> 36-2169194
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Part I

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

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

Part II

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

1	Purpose(s) of conservation easements held by the organization (check all that apply) <div><input type="checkbox"/> Preservation of land for public use (e g , recreation or pleasure) <input type="checkbox"/> Preservation of an historically importantly land area</div> <div><input type="checkbox"/> Protection of natural habitat <input type="checkbox"/> Preservation of a certified historic structure</div> <div><input type="checkbox"/> Preservation of open space</div>											
2	Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year											
		<table><tr><td></td><td>Held at the End of the Year</td></tr><tr><td>a</td><td>Total number of conservation easements</td></tr><tr><td>b</td><td>Total acreage restricted by conservation easements</td></tr><tr><td>c</td><td>Number of conservation easements on a certified historic structure included in (a)</td></tr><tr><td>d</td><td>Number of conservation easements included in (c) acquired after 8/17/06</td></tr></table>		Held at the End of the Year	a	Total number of conservation easements	b	Total acreage restricted by conservation easements	c	Number of conservation easements on a certified historic structure included in (a)	d	Number of conservation easements included in (c) acquired after 8/17/06
	Held at the End of the Year											
a	Total number of conservation easements											
b	Total acreage restricted by conservation easements											
c	Number of conservation easements on a certified historic structure included in (a)											
d	Number of conservation easements included in (c) acquired after 8/17/06											
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ _____											
4	Number of states where property subject to conservation easement is located ▶ _____											
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>											
6	Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ▶ _____											
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____											
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>											
9	In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements											

Part III

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

1a	If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items	
b	If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items	
	(i) Revenues included in Form 990, Part VIII, line 1	▶ \$ _____
	(ii) Assets included in Form 990, Part X	▶ \$ _____
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items	
a	Revenues included in Form 990, Part VIII, line 1	▶ \$ _____
b	Assets included in Form 990, Part X	▶ \$ _____



Part III

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

3

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

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

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

5

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

☐ Yes

☐ No

Part IV

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

1a

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

☐ Yes

☐ No

b

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

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

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

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

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

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a Beginning of year balance . . . . .	673,139	293,241	293,091		
b Contributions . . . . .	97,681	379,898	150		
c Investment earnings or losses . . . . .					
d Grants or scholarships . . . . .					
e Other expenditures for facilities and programs . . . . .					
f Administrative expenses . . . . .					
g End of year balance . . . . .	770,820	673,139	293,241		

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶ 0 %

b

Permanent endowment ▶ 100 000 %

c

Term endowment ▶ 0 %

3a

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

(i) unrelated organizations . . . . .

3a(i)

Yes

No

(ii) related organizations . . . . .

3a(ii)

No

b

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

3b

4

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

Part VI

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

Description of investment	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land . . . . .		1,015,484		1,015,484
b Buildings . . . . .		20,820,335	7,937,020	12,883,315
c Leasehold improvements . . . . .				0
d Equipment . . . . .		120,684	51,519	69,165
e Other . . . . .		3,284,281	2,861,560	422,721
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) . . . . . ▶				14,390,685



Part XIReconciliation of Change in Net Assets from Form 990 to Financial Statements			
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	13,396,510
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	13,107,533
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	288,977
4	Net unrealized gains (losses) on investments	4	704,727
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	0
9	Total adjustments (net) Add lines 4 - 8	9	704,727
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	993,704

Part XIIReconciliation of Revenue per Audited Financial Statements With Revenue per Return			
1	Total revenue, gains, and other support per audited financial statements . . . . .	1	12,812,238
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments . . . . .	2a	704,727
b	Donated services and use of facilities . . . . .	2b	
c	Recoveries of prior year grants . . . . .	2c	
d	Other (Describe in Part XIV) . . . . .	2d	0
e	Add lines 2a through 2d . . . . .	2e	704,727
3	Subtract line 2e from line 1 . . . . .	3	12,107,511
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	4a	22,668
b	Other (Describe in Part XIV) . . . . .	4b	1,266,331
c	Add lines 4a and 4b . . . . .	4c	1,288,999
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12 ) . . . . .	5	13,396,510

Part XIIIReconciliation of Expenses per Audited Financial Statements With Expenses per Return			
1	Total expenses and losses per audited financial statements . . . . .	1	11,818,534
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities . . . . .	2a	
b	Prior year adjustments . . . . .	2b	
c	Other losses . . . . .	2c	
d	Other (Describe in Part XIV) . . . . .	2d	83,095
e	Add lines 2a through 2d . . . . .	2e	83,095
3	Subtract line 2e from line 1 . . . . .	3	11,735,439
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	4a	22,668
b	Other (Describe in Part XIV) . . . . .	4b	1,349,426
c	Add lines 4a and 4b . . . . .	4c	1,372,094
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18 ) . . . . .	5	13,107,533

Part XIVSupplemental Information

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

Identifier	Return Reference	Explanation
Intended uses of endowment funds	Schedule D, Part V, Line 4	PROVIDE SUPPORT FOR YOUTH AND FAMILY PROGRAMS AND CAMP ECHO
FIN 48 (ASC 740) footnote	Schedule D, Part X, Line 2	EFFECTIVE JULY 1,2009, THE ASSOCIATION ADOPTED THE GUIDANCE IN THE FASB CODIFICATION TOPIC RELATED TO UNCERTAINTY IN INCOME TAXES WHICH PRESCRIBES A COMPREHENSIVE MODEL FOR RECOGNIZING, MEASURING, PRESENTING AND DISCLOSING IN THE FINANCIAL STATEMENTS UNCERTAIN TAX POSITIONS THAT THE ASSOCIATION HAS TAKEN OR EXPECTS TO TAKE IN ITS TAX RETURNS. UNDER THE GUIDANCE, THE ASSOCIATION MAY RECOGNIZE THE TAX BENEFIT FROM AN UNCERTAIN TAX POSITION ONLY IF IT IS "MORE LIKELY THAN NOT" THAT IT IS SUSTAINABLE, BASED ON ITS TECHNICAL MERITS. THE TAX BENEFITS RECOGNIZED IN THE FINANCIAL STATEMENTS FROM SUCH A POSITION SHOULD BE MEASURED BASED ON THE LARGEST BENEFLT THAT HAS A GREATER THAN 50% LIKELIHOOD OF BEING REALIZED UPON ULTIMATE SETTLEMENT WITH A TAXING AUTHORITY HAVING FULL KNOWLEDGE OF ALL RELEVANT INFORMATION. THE ADOPTION OF THE GUIDANCE HAD NO EFFECT ON THE ASSOCIATION'S FINANCIAL STATEMENTS AS OF JULY 1,2009, AND RESULTED IN NO ADJUSTMENT FOR UNRECOGNIZED INCOME TAX BENEFITS FOR THE YEAR ENDED JUNE 30,2010. THE ASSOCIATION BELIEVES THAT IT HAS APPROPRIATE SUPPORT FOR THE POSITIONS TAKEN ON ITS RETURNS.
Other revenues in form 990 not in audited financial statements	Schedule D, Part XII, Line 4b	SPECIAL EVENT DIRECT EXPENSES - -83095, FEE ASSISTANCE - 1349426,
Other expenses in audited financial statements not in form 990	Schedule D, Part XIII, Line 2d	SPECIAL EVENT DIRECT EXPENSES - 83095,
Other expenses in form 990 not in audited financial statements	Schedule D, Part XIII, Line 4b	FEE ASSISTANCE - 1349426,

SCHEDULE G  
(Form 990 or 990-EZ)

Supplemental Information Regarding  
Fundraising or Gaming Activities

OMB No 1545-0047

2010

Open to Public  
Inspection

Department of the Treasury  
Internal Revenue Service

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  
MCGAW YOUNG MEN'S CHRISTIAN ASSOCIATION

Employer identification number  
36-2169194

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

- 1

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

a

☐

Mail solicitations

e

☐

Solicitation of non-government grants

b

☐

Internet and e-mail solicitations

f

☐

Solicitation of government grants

c

☐

Phone solicitations

g

☐

Special fundraising events

d

☐

In-person solicitations
- 2a

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

☐ Yes

☐ No
- b

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

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

- 3

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

Part II Fundraising Events.

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

Revenue			(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
			SOAR GALA	GOLF & TENNIS	2	(Add col (a) through
			(event type)	OUTING	(total number)	col (c))
				(event type)		
	1	Gross receipts . . . .	187,460	12,110	26,065	225,635
	2	Less Charitable contributions . . . .	125,360	500	26,065	151,925
	3	Gross income (line 1 minus line 2) . . . .	62,100	11,610	0	73,710
Direct Expenses	4	Cash prizes . . . .				0
	5	Non-cash prizes . . . .				0
	6	Rent/facility costs . . . .	9,021			9,021
	7	Food and beverages . . . .	37,737			37,737
	8	Entertainment . . . .	4,025			4,025
	9	Other direct expenses . . . .	19,366	12,889	57	32,312
	10	Direct expense summary Add lines 4 through 9 in column (d) . . . . . ▶				83,095
	11	Net income summary Combine lines 3 and 10 in column (d). . . . . ▶				-9,385

Part III Gaming.

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

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

9 Enter the state(s) in which the organization operates gaming activities \_\_\_\_\_

a Is the organization licensed to operate gaming activities in each of these states? . . . . . ☐ Yes ☐ No

b If "No," Explain \_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? . . . . . ☐ Yes ☐ No

b If "Yes," Explain \_\_\_\_\_

11

Does the organization operate gaming activities with nonmembers?

☐ Yes ☐ No

12

Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

☐ Yes ☐ No

13

Indicate the percentage of gaming activity operated in

a	The organization's facility	13a
b	An outside facility	13b

14

Provide the name and address of the person who prepares the organization's gaming/special events books and records

Name

Address

15a

Does the organization have a contract with a third party from whom the organization receives gaming revenue?

☐ Yes ☐ No

b

If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$

c

If "Yes," enter name and address

Name

Address

16 Gaming manager information

Name

Gaming manager compensation \$

Description of services provided

☐ Director/officer

☐ Employee

☐ Independent contractor

17

Mandatory distributions

a

Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

☐ Yes ☐ No

b

Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$

**Part IV** Complete this part to provide additional information for responses to question on Schedule G (see instructions.)

Identifier	ReturnReference	Explanation
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Schedule I  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Name of the organization  
MCGAW YOUNG MEN'S CHRISTIAN ASSOCIATION

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

2010

Open to Public  
Inspection

Employer identification number  
36-2169194

Part I

General Information on Grants and Assistance

- 1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . .

☒ Yes ☐ No
- 2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed. . . . . ▶ ☐

1 (a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance

2

Enter total number of section 501(c)(3) and government organizations . . . . . ▶

3

Enter total number of other organizations . . . . . ▶

Part III

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

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) MEMBERSHIP FEE ASSISTANCE	3272	648,388	0		
(2) CHILDREN CENTER TUITION ASSISTANCE	185	379,500	0		
(3) CAMP ECHO FEE ASSISTANCE	181	133,302			
(4) RESIDENCE FEE ASSISTANCE	91	78,504			
(5) PROGRAM FEE ASSISTANCE	286	73,965			
(6) DAY CAMP FEE ASSISTANCE	179	35,767			

Part IV

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

Identifier	Return Reference	Explanation
Procedures for monitoring use of grant funds	Schedule I, Part I, Line 2	THE ASSOCIATION'S VISION IS TO PROVIDE AN OPPORTUNITY ACROSS OUR DIVERSE COMMUNITY FOR HEALTHY LIVING, YOUTH DEVELOPMENT AND SOCIAL RESPONSIBILITY. IN LINE WITH THIS VISION, THE ASSOCIATION HAS DEVELOPED A MEMBERSHIP FEE STRUCTURE THAT PROVIDES ASSISTANCE BASED UPON THE MEMBER'S DOCUMENTED INCOME AND HOUSEHOLD SIZE. APPLICANTS FOR PROGRAM SCHOLARSHIPS WILL BE EVALUATED BASED UPON THEIR CURRENT MEMBERSHIP LEVEL, DETERMINED BY THE ABOVE MENTIONED DOCUMENTED INCOME AND HOUSEHOLD SIZE. NON-MEMBERS APPLYING TO PROGRAMS SUCH AS CAMP ECHO, CHILDREN'S CENTER OR RESIDENCE, ARE REQUIRED TO PROVIDE DOCUMENTATION TO VERIFY INCOME. THE MCGAW YMCA CHILDREN'S CENTER PROVIDES A SCHOLARSHIP PROGRAM FOR PARENTS WHO HAVE A NEED. PARENTS MAY APPLY EACH YEAR FOR FEE ASSISTANCE WHICH IS AWARDED BASED UPON THE PARENT'S DOCUMENTED INCOME AND HOUSEHOLD SIZE, USING A SLIDING SCALE AND BUDGET ALLOCATION. AS AN OPEN, CHARITABLE, MEMBERSHIP ORGANIZATION, THE MCGAW YMCA PROVIDES AFFORDABLE HOUSING FOR LOW-INCOME MEN. FEE ASSISTANCE IS AWARDED BASED UPON THE RESIDENT'S DOCUMENTED INCOME ON A SCALE RELATING TO THE PERCENTAGE OF PUBLISHED RENT TO INCOME. RESIDENCE FEES MAY INCLUDE TEMPORARY ALLOWANCES DETERMINED BASED ON SPECIAL NEEDS. THE ASSOCIATION ESTABLISHES PROCEDURES FOR PROGRAM SCHOLARSHIP AND FEE ASSISTANCE BY PROGRAM, WHICH REFLECT APPROPRIATE AUTHORIZATION AND ADMINISTRATION MECHANISMS. A DOCUMENTED BASIS FOR GRANTING CONSISTENT FEE ASSISTANCE BASED ON INCOME AND FAMILY SIZE MUST BE DEVELOPED, UPDATED ANNUALLY, AND USED IN DETERMINING THE AMOUNT TO BE GRANTED TO EACH APPLICANT. THE MAXIMUM ASSISTANCE AWARD AMOUNT IS 75% FOR PROGRAM FEES, 60% FOR CHILD CARE SERVICES, 98% FOR CAMP ECHO SCHOLARSHIPS AND 100% FOR RESIDENCE RENT (ONLY UP TO INITIAL FOUR WEEKS). EXCEPTIONS CAN ONLY BE MADE BY THE PRESIDENT/CEO OR COO IN WRITING. ISSUANCE OF SCHOLARSHIPS FOR PROGRAMS WILL BE FOR ONE PROGRAM SESSION.



Schedule J  
(Form 990)

Compensation Information

OMB No 1545-0047

2010

Open to Public Inspection

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

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

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization

MCGAW YOUNG MEN'S CHRISTIAN ASSOCIATION

Employer identification number

36-2169194

Part I

Questions Regarding Compensation

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

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

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

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) WILLIAM F GEIGER	(i)	160,352	10,000	150	0	38,860	209,362	0
	(ii)	0	0	0	0	0	0	0
( 2 )								
( 3 )								
( 4 )								
( 5 )								
( 6 )								
( 7 )								
( 8 )								
( 9 )								
( 10 )								
( 11 )								
( 12 )								
( 13 )								
( 14 )								
( 15 )								
( 16 )								

**Part III**   **Supplemental Information**

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

Identifier	Return Reference	Explanation
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SCHEDULE M  
(Form 990)

Department of the Treasury  
Internal Revenue Service

NonCash Contributions

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization  
MCGAW YOUNG MEN'S CHRISTIAN ASSOCIATION

Employer identification number  
36-2169194

Part I

Types of Property

	(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining oncash contribution amounts
1 Art—Works of art . . . .				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods . . . . .				
6 Cars and other vehicles .				
7 Boats and planes . . . .				
8 Intellectual property . .				
9 Securities—Publicly traded	X	2	53,464	MARKET VALUE
10 Securities—Closely held stock . . . . .				
11 Securities—Partnership, LLC, or trust interests .				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures . . . . .				
14 Qualified conservation contribution—Other . .				
15 Real estate—Residential .				
16 Real estate—Commercial				
17 Real estate—Other . .				
18 Collectibles . . . . .				
19 Food inventory . . . . .				
20 Drugs and medical supplies				
21 Taxidermy . . . . .				
22 Historical artifacts . .				
23 Scientific specimens . .				
24 Archeological artifacts .				
25 Other ► ( )				
26 Other ► ( )				
27 Other ► ( )				
28 Other ► ( )				
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . .	29			0
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . . . . .	30a			No
b If "Yes," describe the arrangement in Part II				
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31	Yes		
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions? . . . . .	32a	Yes		
b If "Yes," describe in Part II				
33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II				

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
Third parties used to solicit, process, or sell noncash contributions	Schedule M, Part I, Line 32a	SECURITIES THAT ARE TRADED ON PUBLIC EXCHANGES, OR OTHER READILY MARKETABLE SECURITIES, SHALL BE ACCEPTED BY THE YMCA IN MOST CASES SUCH SECURITIES WILL BE IMMEDIATELY SOLD BY THE YMCA IF AN INDIVIDUAL OR HIS/HER BROKER INDICATES A WILLINGNESS TO DONATE STOCK OR SECURITIES, THAT PERSON SHOULD BE INFORMED THAT SUCH TRANSFERS ARE HANDLED BY THE YMCA'S INVESTMENT ADVISOR THE BROKER OF RECORD SHALL THEN BE INSTRUCTED TO COMMUNICATE WITH THE DONOR OR DONOR'S BROKER VALUATION OF DONATED SECURITIES WILL BE DETERMINED AS THE MEAN BETWEEN THE HIGH AND THE LOW ON THE DATE OF THE GIFT

**SCHEDULE O**  
(Form 990 or 990-EZ)**Supplemental Information to Form 990 or 990-EZ****2010****Open to Public  
Inspection****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.****Name of the organization**

MCGAW YOUNG MEN'S CHRISTIAN ASSOCIATION

**Employer identification number**

36-2169194

Identifier	Return Reference	Explanation
Description of other program services	Form 990, Part III, Line 4d	<p>CAMP ECHO THE MCGAW YMCA IS A RECOGNIZED LEADER IN NURTURING THE POTENTIAL OF EVERY CHILD AND TEEN EVERY DAY THROUGH PROGRAMS THAT HELP YOUNG PEOPLE DEEPEN POSITIVE VALUES, THEIR COMMITMENT TO SERVICE AND MOTIVATION TO LEARN CAMP ECHO'S GOAL IS TO OPERATE A FUN, ENGAGING PROGRAM WHILE FOSTERING THE PHYSICAL, EMOTIONAL AND SPIRITUAL WELL-BEING OF ITS PARTICIPANTS WE PROMOTE CHARACTER DEVELOPMENT, CELEBRATE DIVERSITY, ENCOURAGE SERVICE LEARNING AND TEACH OUR TEEN PARTICIPANTS LEADERSHIP SKILLS DURING OUR SUMMER CAMP IN 2011, WE HAD OVER 1,200 CAMPER'S EXPERIENCE CAMP IN 1,358 SESSION SPOTS, THE LARGEST TOTAL EVER THE TOTAL NUMBER OF ADULTS, YOUTH AND PRESCHOOLERS ATTENDING OUR FOUR FAMILY CAMP PROGRAMS WAS OVER 550 AS OF JUNE 30TH, OVER \$133,000 WAS PROVIDED TO 171 YOUTH AND 9 FAMILIES WHO RECEIVED FULL OR PARTIAL SCHOLARSHIPS ALLOWING MORE CHILDREN, YOUTH AND FAMILIES THE OPPORTUNITY TO PARTICIPATE IN CAMP PROGRAMMING RESIDENT MEMBER PROGRAM DURING FISCAL YEAR 2011 WE SERVED 269 RESIDENT MEMBERS AND AWARDED MORE THAN \$78,000 IN FEE ASSISTANCE AND SUBSIDIES TO 47 OF THESE LOW- AND VERY LOW-INCOME RESIDENTS ON AVERAGE, 90% OF OUR 172 ACCOMMODATIONS FOR MEN REMAINED OCCUPIED IN FISCAL YEAR 2011 WE CONTINUE TO EXPAND SERVICES WITHIN OUR COMMUNITY TO SUPPORT OUR MEMBER RESIDENTS DURING THE YEAR WE CONDUCTED OUR FIRST FOOD AND WELLNESS WORKSHOP FOR RESIDENT MEMBERS, WITH TOPICS RANGING FROM THE BASICS OF NUTRITION, EATING FOR CERTAIN MEDICAL CONDITIONS, AFFORDABLE AND NUTRITIOUS MEAL OPTIONS AT LOCAL EVANSTON RESTAURANTS, SHOPPING FOR HEALTHY MEALS ON A BUDGET, AND MAKING NUTRITIOUS MEALS WITH A MICROWARE THE PILOT WORKSHOP WAS CONDUCTED IN PARTNERSHIP WITH NORTH SHORE COMMUNITY BANK AND DOWNTOWN EVANSTON, AND WAS SO POPULAR THAT WE HAVE A WAITING LIST FOR FUTURE WORKSHOPS DAY CAMP AT THE MCGAW YMCA, WE BUILD STRONG KIDS - STRONG IN CONFIDENCE AND THE CHARACTER-BUILDING VALUES THAT HELP THEM GROW INTO RESPONSIBLE AND CARING YOUTH AND ADULTS DURING FISCAL YEAR 2011, WE PROVIDED SUMMER CAMP PROGRAMS TO CHILDREN FROM AGE 2 THROUGH 8TH GRADE, PROVIDING A FUN FILLED LEARNING ENVIRONMENT TO MORE THAN 240 CAMPER'S, WITH 29% OR 71 CHILDREN RECEIVING FEE ASSISTANCE CAMP RAINBOW OFFERS FUN AND A LEARNING EXPERIENCE IN A HALF DAY PROGRAM DESIGNED FOR PRE-SCHOOL CHILDREN, WHILE CAMP WANAGO, A FULL DAY PROGRAM FOR CAMPER'S FROM 1ST TO 5TH GRADE AND THE SUMMER ADVENTURE CLUB, A PROGRAM FOR 6TH TO 8TH GRADE, HELP CAMPER'S LEARN LIFE SKILLS IN A SPECIAL COMMUNITY OF FUN AND FRIENDSHIP THAT ONLY CAMP CAN OFFER</p>

Identifier	Return Reference	Explanation
Classes of members or stockholders	Form 990, Part VI, Section A, Line 6	THE ORGANIZATION IS A MEMBERSHIP ORGANIZATION FOR PURPOSES OF THE USE OF ITS FACILITIES AND PROGRAMS

Identifier	Return Reference	Explanation
Members or stockholders electing members of governing body	Form 990, Part VI, Section A, Line 7a	THE BOARD OF DIRECTORS IS ELECTED BY MEMBERS AT THE ANNUAL MEETING



Identifier	Return Reference	Explanation
Review of form 990 by governing body	Form 990, Part VI, Section B, Line 11b	THE ASSOCIATION PROVIDES AN ELECTRONIC COPY OF THE FINAL VERSION OF FORM 990 TO ALL BOARD MEMBERS FOR THEIR REVIEW BEFORE IT IS FILED

Identifier	Return Reference	Explanation
Conflict of interest policy	Form 990, Part VI, Section B, Line 12c	AN INTERESTED PERSON MUST DISCLOSE THE EXISTENCE OF THE FINANCIAL INTEREST AND BE GIVEN THE OPPORTUNITY TO DISCLOSE ALL MATERIAL FACTS TO THE DIRECTORS AND MEMBERS OF COMMITTEES WITH GOVERNING BOARD DELEGATED POWERS CONSIDERING THE PROPOSED TRANSACTION OR ARRANGEMENT ALL BOARD MEMBERS MUST SIGN AN ANNUAL STATEMENT THAT THEY HAVE READ AND THAT THEY WILL COMPLY WITH THE POLICY AN INTERESTED PERSON MAY MAKE A PRESENTATION AT THE GOVERNING BOARD OR COMMITTEE MEETING, BUT AFTER THE PRESENTATION, HE/SHE MAY BE ASKED TO LEAVE THE MEETING DURING THE DISCUSSION OF, AND THE VOTE ON, THE TRANSACTION OR ARRANGEMENT INVOLVING THE POSSIBLE CONFLICT OF INTEREST AFTER EXERCISING DUE DILIGENCE, THE GOVERNING BOARD OR COMMITTEE SHALL DETERMINE WHETHER THE ORGANIZATION CAN OBTAIN WITH REASONABLE EFFORTS A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT FROM A PERSON OR ENTITY THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST IF A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT IS NOT REASONABLY POSSIBLE UNDER CIRCUMSTANCES NOT PRODUCING A CONFLICT OF INTEREST, THE GOVERNING BOARD OR COMMITTEE SHALL DETERMINE BY A MAJORITY VOTE OF THE DISINTERESTED DIRECTORS WHETHER THE TRANSACTION OR ARRANGEMENT IS IN THE ORGANIZATION'S BEST INTEREST, FOR ITS OWN BENEFIT, AND WHETHER IT IS FAIR AND REASONABLE IN CONFORMITY WITH THE ABOVE DETERMINATION IT SHALL MAKE ITS DECISION AS TO WHETHER TO ENTER INTO THE TRANSACTION OR ARRANGEMENT

Identifier	Return Reference	Explanation
Process used to establish compensation of top management official	Form 990, Part VI, Section B, Line 15a	<p>ANNUALLY, THE HUMAN RESOURCES TASK FORCE OF THE YMCA OF THE USA SENDS TO ALL Y'S THEIR SALARY ADMINISTRATION GUIDELINE RECOMMENDATION THE GUIDELINE LISTS SALARY RANGES AND RECOMMENDED MERIT INCREASES IN ADDITION THEY POST ON THE WEBSITE THE US DEPARTMENT OF LABOR STATISTICS IN SUPPORT OF THESE GUIDELINES, SALARY RANGES ARE BASED ON SUBJECTIVE CRITERIA, THE ARTHUR ANDERSON "HAY PLAN" DEVELOPED IN 2000 THERE IS A POINT SYSTEM RATING FOR EACH JOB, WHICH INCLUDES TOTAL REVENUE RESPONSIBILITY, MANAGERIAL KNOW-HOW, AND DECISION COMPLEXITY FOR EACH SALARY JOB THE HUMAN RESOURCES COMMITTEE REVIEWS THE GUIDELINES AND RECOMMENDS TO THE BOARD CHAIR AND THE EXECUTIVE COMMITTEE AN APPROPRIATE MERIT INCREASE FOR THE CEO THE HR COMMITTEE CONSISTS OF 7 INDIVIDUALS WHO ARE YMCA MEMBERS AND/OR INDEPENDENT VOLUNTEERS THE BOARD CHAIR COMPLETES AN EMPLOYEE STATUS CHANGE FORM AUTHORIZING THE MERIT RAISE AND THIS FORM IS PERMANENTLY KEPT AS PART OF THE CEO'S PAYROLL RECORDS IN THE FINANCE DEPARTMENT OFFICERS' AND KEY EMPLOYEES' COMPENSATION AND MERIT INCREASES ARE DETERMINED IN A SIMILAR MANNER USING THE HR COMMITTEE TO GIVE GUIDANCE USING THE "HAY" POINTING SYSTEM FOR COMPENSATION LEVELS WITHIN A SPECIFIED RANGE FOR THE RELATED RESPONSIBILITIES AND EXPERIENCE, AND DEVELOPING RANGES OF INCREASES THAT ADHERE TO SPECIFIC PERFORMANCE APPRAISAL RESULTS AND OVERALL BUDGET GUIDELINES DEVELOPED TO APPLY INCREASES THE CEO REVIEWS THE PERFORMANCE OF ALL DIRECT REPORTS AS WELL AS JOB SALARY SCALES FOR ALL KEY EMPLOYEES</p>

Identifier	Return Reference	Explanation
Process used to establish compensation of other officers/key employees	Form 990, Part VI, Section B, Line 15b	ANNUALLY, THE HUMAN RESOURCES TASK FORCE OF THE YMCA OF THE USA SENDS TO ALL Y'S THEIR SALARY ADMINISTRATION GUIDELINE RECOMMENDATION THE GUIDELINE LISTS SALARY RANGES AND RECOMMENDED MERIT INCREASES IN ADDITION THEY POST ON THE WEBSITE THE US DEPARTMENT OF LABOR STATISTICS IN SUPPORT OF THESE GUIDELINES, SALARY RANGES ARE BASED ON SUBJECTIVE CRITERIA ARTHUR ANDERSON DEVELOPED THE "HAY PLAN" IN 2000 THERE IS A POINT SYSTEM RATING FOR EACH JOB, WHICH INCLUDES TOTAL REVENUE RESPONSIBILITY, MANAGERIAL KNOW-HOW, AND DECISION COMPLEXITY FOR EACH SALARY JOB THE HUMAN RESOURCES COMMITTEE REVIEWS THE GUIDELINES AND RECOMMENDS TO THE BOARD CHAIR AND THE EXECUTIVE COMMITTEE AN APPROPRIATE MERIT INCREASE FOR THE CEO THE HR COMMITTEE CONSISTS OF 7 INDIVIDUALS WHO ARE YMCA MEMBERS AND/OR INDEPENDENT VOLUNTEERS THE BOARD CHAIR COMPLETES AN EMPLOYEE STATUS CHANGE FORM AUTHORIZING THE MERIT RAISE AND THIS FORM IS PERMANENTLY KEPT AS PART OF THE CEO'S PAYROLL RECORDS IN THE FINANCE DEPARTMENT, OFFICERS' AND KEY EMPLOYEES' COMPENSATION AND MERIT INCREASES ARE DETERMINED IN A SIMILAR MANNER USING THE HR COMMITTEE TO GIVE GUIDANCE USING THE "HAY" POINTING SYSTEM FOR COMPENSATION LEVELS WITHIN A SPECIFIED RANGE FOR THE RELATED RESPONSIBILITIES AND EXPERIENCE, AND DEVELOPING RANGES OF INCREASES THAT ADHERE TO SPECIFIC PERFORMANCE APPRAISAL RESULTS AND OVERALL BUDGET GUIDELINES DEVELOPED TO APPLY INCREASES THE CEO REVIEWS THE PERFORMANCE OF ALL DIRECT REPORTS AND JOB SALARY SCALE FOR ALL KEY EMPLOYEES

Identifier	Return Reference	Explanation
Public Disclosure	Form 990, Part VI, Section C, Line 19	THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY , AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST

Identifier	Return Reference	Explanation
Other changes in net assets or fund balances	Form 990, Part XI, Line 5	NET UNREALIZED GAINS (LOSSES) ON INVESTMENTS - 689162, CHANGE IN FMV OF CHARITABLE REMAINDER TRUST - 15565,