Form 990

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047

2011

Open to Public Inspection

A For the 2011 calendar year, or tax year beginning 01-01-2011 and ending 12-31-2011

B Check if applicable
☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

C Name of organization
THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER SEATTLE

Doing Business As

Number and street (or P O box if mail is not delivered to street address) Room/suite
909 FOURTH AVENUE

City or town, state or country, and ZIP + 4
SEATTLE, WA 98104

D Employer identification number
91-0482710

E Telephone number
(206) 382-5003

G Gross receipts $ 72,553,141

F Name and address of principal officer
ROBERT B GILBERTSON JR
909 FOURTH AVENUE
SEATTLE, WA 98104

H(a) Is this a group return for affiliates? ☐ Yes ☑ No

H(b) **Are all affiliates included?** ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☑ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J **Website:** ▶ WWW SEATTLEYMCA ORG

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1877

M State of legal domicile WA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
THE YMCA IS FOR YOUTH DEVELOPMENT, HEALTHY LIVING, AND SOCIAL RESPONSIBILITY

2 Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	3	31
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	31
5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	3,082
6	Total number of volunteers (estimate if necessary)	6	11,385
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	18,067,358	19,902,596
	9	Program service revenue (Part VIII, line 2g)	42,273,595	44,582,003
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,057,601	2,536,739
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	140,131	233,467
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	62,538,685	67,254,805
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	898,204	1,196,671
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	37,777,555	39,182,557
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶940,771		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	22,973,914	24,339,754
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	61,649,673	64,718,982
	19	Revenue less expenses Subtract line 18 from line 12	889,012	2,535,823

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	152,520,200	150,584,105
	21	Total liabilities (Part X, line 26)	40,685,979	42,259,793
	22	Net assets or fund balances Subtract line 21 from line 20	111,834,221	108,324,312

Part II Signature Block

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.

Sign Here

****** 2012-08-15
Signature of officer Date

GLENN H TSUGAWA SENIOR VP/CFO
Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶ SARA ELIZABETH J HYRE	Date	Check if self-employed ▶ ☐	Preparer's taxpayer identification number (see instructions) P00235495
Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ CLARK NUBER PS 10900 NE 4TH STREET SUITE 1700 BELLEVUE, WA 98004			EIN ▶ 91-1194016 Phone no ▶ (425) 454-4919

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 . . . . ☑

1 Briefly describe the organization's mission

BUILDING A COMMUNITY WHERE ALL PEOPLE, ESPECIALLY THE YOUNG, ARE ENCOURAGED TO DEVELOP THEIR FULLEST POTENTIAL IN SPIRIT, MIND, AND BODY STRATEGIC GOALS * PROVIDE OPPORTUNITIES FOR YOUTH AND YOUNG ADULTS WHICH SHAPE VALUES AND ENCOURAGE LIFELONG COMMUNITY SERVICE* SUPPORT AND STRENGTHEN ALL FAMILIES* LEAD AND SUPPORT EFFORTS WHICH PROMOTE HEALTHY LIVING* PROVIDE OLDER ADULTS WITH OPPORTUNITIES TO CREATE HEALTHY AND PRODUCTIVE LIVES FOR THEMSELVES AND THE COMMUNITY* ATTRACT DIVERSE POPULATIONS PARTICIPATING TOGETHER TO CREATE A COMMUNITY WHERE ALL ARE WELCOMEOPERATING PRINCIPLES * FOSTER A SENSE OF BELONGING AND COMMUNITY AMONG MEMBERS* PROMOTE, DEVELOP AND SUPPORT THE VITAL ROLE OF VOLUNTEERS AND STAFF IN THE YMCA* SERVE AS A CATALYST IN ADDRESSING COMMUNITY ISSUES* SECURE AND EFFICIENTLY MANAGE THE FINANCIAL RESOURCES NECESSARY TO ACHIEVE OUR GOALS* SECURE THE FINANCIAL RESOURCES NECESSARY TO ACHIEVE OUR PROGRAM GOALS

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 organization's program service accomplishments for each of its three largest program services, as measured 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 $ 25,819,582 including grants of $ 14,993) (Revenue $ 26,646,553)

HEALTHY LIVING THROUGH OUR 13 BRANCHES AND TWO RESIDENT CAMPS, THE Y EQUIPS PEOPLE OF ALL AGES AND ABILITIES TO BE THEIR PERSONAL BEST IN SPIRIT, MIND AND BODY OUR FULL-SERVICE FACILITIES BRING FAMILIES CLOSER TOGETHER AS THEY BUILD HEALTHY LIFESTYLES, AND TRAINED LIFESTYLE COACHES HELP SET PERSONAL HEALTH AND WELL-BEING GOALS OUR CHRONIC DISEASE PREVENTION PROGRAMS HELP FAMILIES AND INDIVIDUALS INCREASE PHYSICAL ACTIVITY AND IMPROVE NUTRITION TO HELP PROTECT THEIR HEALTH FOR EXAMPLE, ACTIVELY CHANGING TOGETHER (ACT!) HELPS OVERWEIGHT CHILDREN AND THEIR FAMILIES MAKE POSITIVE CHANGES TOGETHER, AND THE YMCA'S DIABETES PREVENTION PROGRAM HELPS THOSE AT RISK REDUCE THEIR CHANCE OF DEVELOPING DIABETES SERVICES ARE OFFERED AT AFFORDABLE FEES FOR THE COMMUNITY AT LARGE, WITH FINANCIAL ASSISTANCE AVAILABLE FOR THOSE WHO CANNOT AFFORD THE FULL FEE HEALTH AND WELLNESS PROGRAMS SUPPLEMENT THE PROGRAM FEES, GOVERNMENT GRANTS, AND CONTRIBUTIONS TO OTHER PROGRAM AREAS

4b (Code) (Expenses $ 21,279,173 including grants of $ 11,521) (Revenue $ 17,643,661)

YOUTH DEVELOPMENT THROUGH THE Y, KIDS, TEENS AND YOUNG ADULTS OF ALL SOCIO-ECONOMIC BACKGROUNDS DEVELOP THE CHARACTER TRAITS AND SKILLS THAT LEAD TO POSITIVE BEHAVIORS AND EDUCATIONAL ACHIEVEMENT OUR CARING ROLE MODELS HELP GUIDE YOUTH IN DISCOVERING AND PURSUING THEIR POTENTIAL ACADEMICALLY AND SOCIALLY, THROUGH A WIDE VARIETY OF ENRICHING PROGRAMS THAT HELP STRENGTHEN FAMILIES AND CREATE COMMUNITY CONNECTIONS FOR EXAMPLE, DAY AND OVERNIGHT CAMPS ENABLE YOUTH TO LEARN NEW SKILLS, MAKE NEW FRIENDS, GAIN CONFIDENCE AND ACQUIRE LEADERSHIP SKILLS THE Y ALSO PROVIDES HIGH-QUALITY, BEFORE AND AFTER SCHOOL DAY CARE THROUGHOUT THE REGION FINANCIAL ASSISTANCE IS MADE AVAILABLE FOR FEE-BASED PROGRAMS SO THAT A YOUNG PERSON'S ECONOMIC CIRCUMSTANCES DO NOT PRESENT A BARRIER TO PARTICIPATION CONTRIBUTIONS AND GOVERNMENT GRANTS PROVIDE PRIMARY FUNDING FOR PROGRAM EXPENSES

4c (Code) (Expenses $ 10,775,753 including grants of $ 1,170,157) (Revenue $ 291,789)

SOCIAL RESPONSIBILITY THE Y HAS BEEN LISTENING AND RESPONDING TO OUR REGION'S MOST CRITICAL SOCIAL NEEDS FOR MORE THAN 135 YEARS THROUGH EDUCATION AND TRAINING IN NEIGHBORHOODS, CONNECTING DIVERSE DEMOGRAPHIC POPULATIONS, AND PREVENTING CHRONIC DISEASE AND BUILDING HEALTHIER COMMUNITIES WITH PARTNERS, THE Y FOSTERS CARE AND RESPECT FOR ALL ANNUALLY, THE YMCA OF GREATER SEATTLE PROVIDES $19 MILLION IN FREE OR SUBSIDIZED SERVICES SO THAT INDIVIDUALS AND FAMILIES IN NEED CAN BENEFIT FROM OUR CONFIDENCE-BUILDING, HEALTH-ENHANCING PROGRAMS LIKE SUMMER CAMP, CHILD CARE, AND FACILITY MEMBERSHIP WE SERVE THE COMMUNITY WITH INNOVATIVE HOUSING PROGRAMS THAT PROVIDE YOUTH-AT-RISK, YOUNG ADULTS, AND SINGLE PARENTS WITH COMPREHENSIVE SUPPORT SERVICES INCLUDING CASE MANAGEMENT, MENTAL HEALTH SERVICES AND LIFE SKILLS TRAINING MANY PROGRAMS IN THIS CATEGORY ARE PROVIDED AT NO CHARGE TO THE PARTICIPANT FINANCIAL ASSISTANCE IS MADE AVAILABLE FOR FEE-BASED PROGRAMS SO THAT A YOUNG PERSON'S ECONOMIC CIRCUMSTANCES DO NOT PRESENT A BARRIER TO PARTICIPATION CONTRIBUTIONS AND GOVERNMENT GRANTS PROVIDE PRIMARY FUNDING FOR PROGRAM EXPENSES

4d Other program services (Describe in Schedule O)

(Expenses $ including grants of $) (Revenue $)

4e **Total program service expenses** ▶$ 57,874,508

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	Yes	
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		No
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? *If "Yes," complete Schedule D, Part II*	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9	Yes	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	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, line10? *If "Yes," complete Schedule D, Part VI.*	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII.*	11b	Yes	
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII.*	11c		No
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? *If "Yes," complete Schedule D, Part IX.*	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X.*	11e	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)? *If "Yes," complete Schedule D, Part X.*	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional*	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Part I*	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the U S ? *If "Yes," complete Schedule F, Part II and IV*	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the U S ? *If "Yes," complete Schedule F, Part III and IV*	16		No
17	Did the organization report a total of more than $15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I*	17		No
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18	Yes	
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No
20a	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? **Note.** All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

Part IV Checklist of Required Schedules *(continued)*

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V . . . . ☑

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	331		
b	Enter the number of Forms W-2G included in line 1a *Enter -0-* if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		1c	Yes	
2a	Enter the number of employees reported on Form W-3, *Transmittal of Wage and Tax Statements* filed for the calendar year ending with or within the year covered by this return	2a	3,082		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				
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 or securities 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		No
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		8		
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the organization make any taxable distributions under section 4966?		9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
10	**Section 501(c)(7) organizations.** Enter				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
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.** All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state		13a		
b	Enter the aggregate 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 aggregate amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		No
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
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 31			
b	Enter the number of voting members included in line 1a, above, who are independent	1b 31			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4	Yes	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		No
6	Did the organization have members or stockholders?		6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?		8a	Yes	
b	Each committee with authority to act on behalf of the governing body?		8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		No

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

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

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed ▶WA

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you made these available Check all that apply

☑ Own website ☑ Another's website ☑ Upon request

19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶

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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, or highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(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
See Additional Data Table										

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(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
See Additional Data Table										

		(D)	(E)	(F)
1b	Sub-Total			
c	Total from continuation sheets to Part VII, Section A			
d	Total (add lines 1b and 1c)	1,367,821	0	213,303

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶12

			Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	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? *If "Yes," complete Schedule J for such individual*	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? *If "Yes," complete Schedule J for such person*	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 Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
GLY CONSTRUCTION PO BOX 6728 BELLEVUE, WA 98008	BUILDING CONTRACTOR	443,093
CLEANING SOLUTIONS PO BOX 105 KENT, WA 98305	JANITORIAL SERVICES	371,861
MARKETING INTELLIGENCE 3620 CALIFORNIA AVE SW SEATTLE, WA 98116	ADVERTISING CONSULTANT	256,575
STANLEY ROOFING CO INC 19710 144TH AVE NE WOODINVILLE, WA 98072	BUILDING CONTRACTORS	232,421
NATIONAL MAINTENCE CONTRACTORS LLC 801 130TH AVE NE BELLEVUE, WA 98005	JANITORIAL SERVICES	183,304

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶7

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	1,364,672				
	b	Membership dues 1b					
	c	Fundraising events 1c	78,631				
	d	Related organizations . . . 1d					
	e	Government grants (contributions) 1e	11,585,924				
	f	All other contributions, gifts, grants, and similar amounts not included above 1f	6,873,369				
	g	Noncash contributions included in lines 1a-1f $ 136,660					
	h	**Total.** Add lines 1a-1f		19,902,596			
Program Service Revenue			Business Code				
	2a	MEMBERSHIPS	900099	25,466,979	25,466,979		
	b	YOUTH DEVELOPMENT	900099	17,643,661	17,643,661		
	c	HEALTHY LIVING	900099	1,179,574	1,179,574		
	d	SOCIAL RESPONSIBILITY	900099	291,789	291,789		
	e						
	f	All other program service revenue					
	g	**Total.** Add lines 2a–2f		44,582,003			
Other Revenue	3	Investment income (including dividends, interest and other similar amounts)		1,203,696			1,203,696
	4	Income from investment of tax-exempt bond proceeds . .					
	5	Royalties					
			(i) Real / (ii) Personal				
	6a	Gross rents	102,482 /				
	b	Less rental expenses	53,065 /				
	c	Rental income or (loss)	49,417 /				
	d	Net rental income or (loss)		49,417			49,417
			(i) Securities / (ii) Other				
	7a	Gross amount from sales of assets other than inventory	6,151,138 / 233,540				
	b	Less cost or other basis and sales expenses	4,576,038 / 475,597				
	c	Gain or (loss)	1,575,100 / -242,057				
	d	Net gain or (loss)		1,333,043			1,333,043
	8a	Gross income from fundraising events (not including $ 78,631 of contributions reported on line 1c) See Part IV, line 18 . . . a	35,270				
	b	Less direct expenses . . . b	54,790				
	c	Net income or (loss) from fundraising events . .		-19,520			-19,520
	9a	Gross income from gaming activities See Part IV, line 19 . . . a					
	b	Less direct expenses . . . b					
	c	Net income or (loss) from gaming activities . . .					
	10a	Gross sales of inventory, less returns and allowances . a	285,629				
	b	Less cost of goods sold . . b	138,846				
	c	Net income or (loss) from sales of inventory . .		146,783			146,783
		Miscellaneous Revenue	Business Code				
	11a	LOCKER/TOWEL SALES	900099	56,787			56,787
	b						
	c						
	d	All other revenue					
	e	**Total.** Add lines 11a–11d		56,787			
	12	**Total revenue.** See Instructions . . .		67,254,805	44,582,003	0	2,770,206

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

	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 United States See Part IV, line 21	20,101	20,101		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	1,144,823	1,144,823		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	31,747	31,747		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	772,077		772,077	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	30,997,754	28,240,837	2,253,565	503,352
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	2,009,443	1,773,971	193,731	41,741
9	Other employee benefits	2,486,453	2,151,116	287,802	47,535
10	Payroll taxes	2,916,830	2,656,376	222,849	37,605
11	Fees for services (non-employees)				
a	Management				
b	Legal	35,035		35,035	
c	Accounting	88,446		88,446	
d	Lobbying	25,719		25,719	
e	Professional fundraising *See Part IV, line 17* . .				
f	Investment management fees	43,182		43,182	
g	Other	3,285,786	2,803,842	468,984	12,960
12	Advertising and promotion				
13	Office expenses	5,401,494	4,688,015	572,275	141,204
14	Information technology	435,897	358,898	76,958	41
15	Royalties . .				
16	Occupancy	5,994,310	5,919,804	72,292	2,214
17	Travel	1,419,825	1,260,063	125,470	34,292
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	507,517	285,332	204,698	17,487
20	Interest	761,700	761,700		
21	Payments to affiliates	266,679	266,679		
22	Depreciation, depletion, and amortization	3,870,701	3,550,380	320,321	
23	Insurance				
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	PUBLIC RELATIONS	1,381,332	1,203,786	84,775	92,771
b	EQUIPMENT RENTAL	762,332	703,918	52,898	5,516
c	AGENCY DUES	59,799	53,120	2,626	4,053
d					
e					
f	All other expenses				
25	**Total functional expenses.** Add lines 1 through 24f	64,718,982	57,874,508	5,903,703	940,771
26	**Joint costs.** Check here ▶ ☐ if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

			(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing	9,056	1	8,707
	2	Savings and temporary cash investments	7,661,489	2	8,060,500
	3	Pledges and grants receivable, net	3,096,086	3	2,533,313
	4	Accounts receivable, net	1,585,171	4	1,745,683
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net	2,172,643	7	1,977,640
	8	Inventories for sale or use	71,799	8	69,361
	9	Prepaid expenses and deferred charges	928,591	9	1,044,162
	10a	Land, buildings, and equipment cost or other basis *Complete Part VI of Schedule D* — 10a: 124,292,878			
	b	Less accumulated depreciation — 10b: 33,556,189	90,811,636	10c	90,736,689
	11	Investments—publicly traded securities	31,082,324	11	30,574,315
	12	Investments—other securities See Part IV, line 11	13,243,286	12	12,330,972
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	1,858,119	15	1,502,763
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	152,520,200	16	150,584,105
Liabilities	17	Accounts payable and accrued expenses	3,712,923	17	4,353,797
	18	Grants payable		18	
	19	Deferred revenue	5,543,211	19	5,315,142
	20	Tax-exempt bond liabilities	30,000,000	20	30,000,000
	21	Escrow or custodial account liability *Complete Part IV of Schedule D*	66,883	21	92,019
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons *Complete Part II of Schedule L*		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	1,362,962	25	2,498,835
	26	**Total liabilities.** Add lines 17 through 25	40,685,979	26	42,259,793
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	99,181,531	27	96,139,626
	28	Temporarily restricted net assets	5,014,553	28	4,184,481
	29	Permanently restricted net assets	7,638,137	29	8,000,205
		Organizations that do not follow SFAS 117, check here ▶ ☐ 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	111,834,221	33	108,324,312
	34	Total liabilities and net assets/fund balances	152,520,200	34	150,584,105

Part XI Reconcilliation 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	67,254,805
2	Total expenses (must equal Part IX, column (A), line 25)	2	64,718,982
3	Revenue less expenses Subtract line 2 from line 1	3	2,535,823
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . .	4	111,834,221
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-6,045,732
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	108,324,312

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 ☐ Cash ☑ Accrual ☐ 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? . .	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both ☑ Separate basis ☐ Consolidated basis ☐ 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?	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits . .	3b	Yes	

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

2011

Open to Public Inspection

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

Employer identification number
91-0482710

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

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

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

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

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

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

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

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

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

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

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

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

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

a ☐ Type I **b** ☐ Type II **c** ☐ Type III - Functionally integrated **d** ☐ Type III - Other

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

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

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

		Yes	No
(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?	**11g(i)**		
(ii) a family member of a person described in (i) above?	**11g(ii)**		
(iii) a 35% controlled entity of a person described in (i) or (ii) above?	**11g(iii)**		

h Provide the following information about the supported organization(s)

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

Part II **Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I 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)** 2007	**(b)** 2008	**(c)** 2009	**(d)** 2010	**(e)** 2011	**(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)** 2007	**(b)** 2008	**(c)** 2009	**(d)** 2010	**(e)** 2011	**(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 (Explain in Part IV) Do not include gain or loss from the sale of capital assets						
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 2011 (line 6 column (f) divided by line 11 column (f)) **14**

15 Public Support Percentage for 2010 Schedule A, Part II, line 14 **15**

16a **33 1/3% support test—2011.** 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—2010.** 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—2011.** 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—2010.** 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 III **Support Schedule for Organizations Described in IRC 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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	18,744,481	25,195,540	27,823,211	18,067,358	19,902,596	109,733,186
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	41,075,055	34,293,237	36,272,281	42,273,595	44,582,003	198,496,171
3 Gross receipts from activities that are not an unrelated trade or business under section 513	287,612	254,354	258,215	274,517	285,629	1,360,327
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5	60,107,148	59,743,131	64,353,707	60,615,470	64,770,228	309,589,684
7a Amounts included on lines 1, 2, and 3 received from disqualified persons					160,066	160,066
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						0
c Add lines 7a and 7b					160,066	160,066
8 **Public Support** (Subtract line 7c from line 6)						309,429,618

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6	60,107,148	59,743,131	64,353,707	60,615,470	64,770,228	309,589,684
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,695,291	1,153,754	510,557	430,346	1,306,178	5,096,126
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	1,695,291	1,153,754	510,557	430,346	1,306,178	5,096,126
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	670		3,246			3,916
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)				28,721	56,787	85,508
13 **Total support** (Add lines 9, 10c, 11 and 12)	61,803,109	60,896,885	64,867,510	61,074,537	66,133,193	314,775,234

14 **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

15 Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f))	15	98 300 %
16 Public support percentage from 2010 Schedule A, Part III, line 15	16	98 360 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2011** (line 10c column (f) divided by line 13 column (f))	17	1 620 %
18 Investment income percentage from **2010** Schedule A, Part III, line 17	18	1 630 %

19a **33 1/3% support tests—2011.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☑

b **33 1/3% support tests—2010.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

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

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

Facts And Circumstances Test

Explanation
SCHEDULE A, PART II, LINE 12, EXPLANATION OF OTHER INCOME LOCKER/TOWEL SALES

Additional Data

Software ID:
Software Version:
EIN: 91-0482710
Name: THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER SEATTLE

Form 990, Special Condition Description:

Special Condition Description

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			
CAROLYN S KELLY CHAIR	3 00	X		X				0	0	0
DIANE DEWBREY VICE CHAIR	3 00	X		X				0	0	0
HONORABLE RICHARD A JONES VICE CHAIR	3 00	X		X				0	0	0
SCOTT H LUTTINEN VICE CHAIR	3 00	X		X				0	0	0
H STEWART PARKER VICE CHAIR	3 00	X		X				0	0	0
STEPHEN V SUNDBORG SJ VICE CHAIR	3 00	X		X				0	0	0
JOHN F VYNNE TREASURER	3 00	X		X				0	0	0
NANCY J CHO SECRETARY	3 00	X		X				0	0	0
DOUGLAS T BOYDEN DIRECTOR	1 00	X						0	0	0
NATHANIEL BUSTER BROWN DIRECTOR	1 00	X						0	0	0
CHRIS CARR DIRECTOR	1 00	X						0	0	0
DOROTHY V FULLER DIRECTOR	1 00	X						0	0	0
MATT GRIFFIN DIRECTOR	1 00	X						0	0	0
CATHI HATCH DIRECTOR	1 00	X						0	0	0
JAMES HEREFORD DIRECTOR	1 00	X						0	0	0
TOM HULL DIRECTOR	1 00	X						0	0	0
FRED KIGA DIRECTOR	1 00	X						0	0	0
RICH KING DIRECTOR	1 00	X						0	0	0
JANE L LEWIS DIRECTOR	1 00	X						0	0	0
STEPHEN LOZANO DIRECTOR	1 00	X						0	0	0
RICHARD MAGNUSON DIRECTOR	1 00	X						0	0	0
FARUK MANJI DIRECTOR	1 00	X						0	0	0
MICHAEL MCQUAID DIRECTOR	1 00	X						0	0	0
KATIE O'SULLIVAN DIRECTOR	1 00	X						0	0	0
MARK A OWEN DIRECTOR	1 00	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) Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(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
JOHN RIZZARDINI DIRECTOR	1 00	X						0	0	0
PATRICIA RYAN DIRECTOR	1 00	X						0	0	0
MARK SANELLI DIRECTOR	1 00	X						0	0	0
FRANK X SHAW DIRECTOR	1 00	X						0	0	0
GREG SHAW DIRECTOR	1 00	X						0	0	0
PETER A SHIMER DIRECTOR	1 00	X						0	0	0
MOLLY STEARNS DIRECTOR	1 00	X						0	0	0
TREVOR STUART DIRECTOR	1 00	X						0	0	0
MARK N TABBUTT DIRECTOR	1 00	X						0	0	0
DAVID H WRIGHT DIRECTOR	1 00	X						0	0	0
ROBERT B GILBERTSON JR PRESIDENT & CEO	40 00			X				287,070	0	35,640
SUE CAMOU ARRANT SVP & COO	40 00			X				209,918	0	31,409
GLENN H TSUGAWA SVP & CFO	40 00			X				178,787	0	29,253
PETER MORRIS SVP PROPERTIES	40 00					X		155,432	0	25,448
JANE BRENNEMAN SVP HUMAN RESOURCES	40 00					X		146,183	0	24,466
ANDREW MINEAR VP & CDO	40 00					X		140,706	0	24,137
MARCIA ISENBERGER REGIONAL EXECUTIVE DIR	40 00					X		126,278	0	21,507
WENDY BART VP MEMBERSHIP, MKTG & COMM	40 00					X		123,447	0	21,443

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

2011

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, line 35c (Proxy Tax), then

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

Name of the organization	Employer identification number
THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER SEATTLE	91-0482710

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 on behalf of or in opposition to candidates for public office 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? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ 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 ▶ $

4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ 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 (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)

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		

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

	(a)	(b)
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? ☐ **Yes** ☐ **No**

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

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	**(a)** 2008	**(b)** 2009	**(c)** 2010	**(d)** 2011	**(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) Yes	(a) No	(b) Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?		No	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		
c	Media advertisements?		No	
d	Mailings to members, legislators, or the public?		No	
e	Publications, or published or broadcast statements?		No	
f	Grants to other organizations for lobbying purposes?		No	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		25,719
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	Yes		
i	Other activities? If "Yes," describe in Part IV		No	
j	Total lines 1c through 1i			25,719
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

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

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

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

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

Part IV Supplemental Information

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

Identifier	Return Reference	Explanation
PART IV, SUPPLEMENTAL INFORMATION		PART II-B - LOBBYING ACTIVITY EXPLANATION LOBBYISTS LOBBIED ON BEHALF OF THE YMCA'S IN WASHINGTON STATE

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

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

Employer identification number
91-0482710

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? ☐ Yes ☐ No

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 ☐ Yes ☐ No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)
☐ Preservation of land for public use (e g , recreation or pleasure)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of an historically importantly land area
☐ Preservation of a certified historic structure

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

			Held at the End of the Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06	2d	

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? ☐ Yes ☐ No

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)? ☐ Yes ☐ No

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

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

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

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

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

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

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

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

b Assets included in Form 990, Part X ▶ $ ______________

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

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

a ☐ Public exhibition

b ☐ Scholarly research

c ☐ Preservation for future generations

d ☐ Loan or exchange programs

e ☐ Other

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

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☑ No

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

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on 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	14,604,686	12,951,591	10,442,239	16,770,960	
b Contributions	7,357,152	850,091	620,092	458,165	
c Investment earnings or losses	-957,421	1,471,306	2,560,539	-5,232,519	
d Grants or scholarships	35,000	49,350	27,300	26,875	
e Other expenditures for facilities and programs	627,868	607,092	643,979	593,838	
f Administrative expenses	27,706	11,860		933,654	
g End of year balance	20,313,843	14,604,686	12,951,591	10,442,239	

2 Provide the estimated percentage of the year end balance held as

a Board designated or quasi-endowment ▶ 63 000 %

b Permanent endowment ▶ 30 000 %

c Term endowment ▶ 7 000 %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

		Yes	No
(i) unrelated organizations	3a(i)	Yes	
(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 Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	**(a)** Cost or other basis (investment)	**(b)** Cost or other basis (other)	**(c)** Accumulated depreciation	**(d)** Book value
1a Land		14,585,748		14,585,748
b Buildings		96,316,589	25,865,742	70,450,847
c Leasehold improvements				
d Equipment		2,035,806	1,747,767	288,039
e Other		11,354,735	5,942,680	5,412,055
Total. Add lines 1a-1e *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)* ▶				90,736,689

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) INVESTMENT IN 909 4TH YMCA LP	9,109,138	F
(B) NONMARKETABLE INVESTMENTS	161,460	F
(C) ALTERNATIVE INVESTMENTS	3,060,374	F
Total. *(Column (b) should equal Form 990, Part X, col (B) line 12)* ▶	12,330,972	

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. *(Column (b) should equal Form 990, Part X, col (B) line 13)* ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
Total. *(Column (b) should equal Form 990, Part X, col.(B) line 15.)* . . . . ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

1 (a) Description of Liability	(b) Amount
Federal Income Taxes	
SPLIT INTEREST AGREEMENTS	439,363
INTEREST RATE SWAP AGREEMENTS	1,852,199
CAPITAL LEASE PAYABLE	207,273
Total. *(Column (b) should equal Form 990, Part X, col (B) line 25)* ▶	2,498,835

2. Fin 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC740)

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	67,254,805
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	64,718,982
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	2,535,823
4	Net unrealized gains (losses) on investments	4	-4,995,534
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-1,050,198
9	Total adjustments (net) Add lines 4 - 8	9	-6,045,732
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-3,509,909

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	61,347,276
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	-4,995,534		
b	Donated services and use of facilities	2b	45,823		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d	-1,065,673		
e	Add lines **2a** through **2d**			2e	-6,015,384
3	Subtract line **2e** from line **1**			3	67,362,660
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b	-107,855		
c	Add lines **4a** and **4b**			4c	-107,855
5	Total Revenue Add lines **3** and **4c.** (This should equal Form 990, Part I, line 12)			5	67,254,805

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	64,857,185
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a	45,823		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIV)	2d	107,855		
e	Add lines **2a** through **2d**			2e	153,678
3	Subtract line **2e** from line **1**			3	64,703,507
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	15,475		
b	Other (Describe in Part XIV)	4b			
c	Add lines **4a** and **4b**			4c	15,475
5	Total expenses Add lines **3** and **4c.** (This should equal Form 990, Part I, line 18)			5	64,718,982

Part XIV Supplemental Information

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

Identifier	Return Reference	Explanation
	PART IV, LINE 2B	THERE ARE THREE CUSTODY ACCOUNTS FOR ACTIVITIES OF THREE NORTHWEST YMCA GROUPS NORTHWEST YMCA ASSOCIATION OF PROFESSIONAL DIRECTORS, WASHINGTON YMCA STATE ALLIANCE, AND DISTRICT 2 YMCA YOUTH AND GOVERNMENT FUNDS ARE RECEIVED FROM AREA-WIDE YMCAS TO FACILITATE COORDINATION OF AREA-WIDE PROGRAMS
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	YMCA OF GREATER SEATTLE ENDOWMENT FUNDS ARE INVESTED TO RETAIN 'PURCHASING POWER' OF FUNDS OVER TIME INVESTMENT OF FUNDS AND DISTRIBUTIONS ARE GUIDED BY DONOR WISHES, BOARD DIRECTION AND BOARD POLICY MOST ENDOWMENT FUNDS ARE CREATED TO SUPPORT SPECIFIC PROGRAMS, POPULATIONS OR COMMUNITIES SOME ENDOWMENT FUNDS ARE CREATED TO MAINTAIN OR ENHANCE FIXED ASSETS
PART XI, LINE 8 - OTHER ADJUSTMENTS		CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS -67,028 CHANGE IN VALUE OF INTEREST RATE SWAP AGREEMENTS -983,170 TOTAL TO SCHEDULE D, PART XI, LINE 8 -1,050,198
PART XII, LINE 2D - OTHER ADJUSTMENTS		CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS -67,028 INVESTMENT EXPENSES -15,475 CHANGE IN VALUE OF INTEREST RATE SWAP AGREEMENTS -983,170
PART XII, LINE 4B - OTHER ADJUSTMENTS		SPECIAL EVENT EXPENSES -54,790 RENTAL EXPENSES -53,065
PART XIII, LINE 2D - OTHER ADJUSTMENTS		SPECIAL EVENT EXPENSES 54,790 RENTAL EXPENSES 53,065

SCHEDULE F
(Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

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

Employer identification number
91-0482710

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1 **For grantmakers.** 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 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States

3 Activities per Region (Use Part V if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region/investments in region
EAST ASIA AND THE PACIFIC	0	0	GRANTS TO RECIPIENTS LOCATED IN THE REGION		18,000
SOUTH AMERICA	0	0	PROGRAM SERVICES	TO SET UP INFRASTRUCTURES FOR FUTURE MICROLENDING	1,433
SOUTH ASIA	0	0	PROGRAM SERVICES	TO SET UP INFRASTRUCTURES FOR FUTURE MICROLENDING	1,433
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	TO SET UP INFRASTRUCTURES FOR FUTURE MICROLENDING	2,868
NORTH AMERICA	0	0	GRANTS TO RECIPIENTS LOCATED IN THE REGION		8,000
3a Sub-total	0	0			31,734
b Total from continuation sheets to Part I	0	0			0
c **Totals** (add lines 3a and 3b)	0	0			31,734

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than $5,000. Check this box if no one recipient received more than $5,000 . . . . ▶ ☐
Use Part V if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	DISASTER RELIEF	8,000	WIRE TRANSFER			
		EAST ASIA AND THE PACIFIC	DISASTER RELIEF	10,000	WIRE TRANSFER			
		NORTH AMERICA	TO RAISE AWARENESS AND FINANCIAL SUPPORT OF THE GLOBAL ORGANIZATION	8,000	WIRE TRANSFER			

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . . ▶ 3

3 Enter total number of other organizations or entities . . . . ▶ 0

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Part V if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)*	☑ Yes	☐ No
2	Did the organization have an interest in a foreign trust during the tax year? *If " Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)*	☐ Yes	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)*	☐ Yes	☑ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)*	☐ Yes	☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)*	☐ Yes	☑ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).*	☐ Yes	☑ No

Part V **Supplemental Information**

Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information.

Identifier	ReturnReference	Explanation
PROCEDURE FOR MONITORING GRANTS OUTSIDE THE U S		SCHEDULE F, PART I, LINE 2 METHODS FOR MONITORING USE OF GRANT FUNDS INCLUDE DIRECT CONVERSATIONS WITH GRANTEE LEADERSHIP, DIRECT OBSERVATION (VISITS) AND REVIEW OF ANNUAL FINANCIAL MATERIAL

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SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

OMB No 1545-0047

2011

Open to Public Inspection

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

Employer identification number
91-0482710

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
- **b** ☐ Internet and e-mail solicitations
- **c** ☐ Phone solicitations
- **d** ☐ In-person solicitations
- **e** ☐ Solicitation of non-government grants
- **f** ☐ Solicitation of government grants
- **g** ☐ Special fundraising events

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? Yes	No	**(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
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.

			(a) Event #1 GOLF TOURNAMENT W. SEATTLE YMCA (event type)	(b) Event #2 GOLF TOURNAMENT MMEM YMCA (event type)	(c) Other Events 9 (total number)	(d) Total Events (Add col (a) through col (c))
Revenue	1	Gross receipts	36,650	33,805	43,446	113,901
	2	Less Charitable contributions	22,250	20,305	36,076	78,631
	3	Gross income (line 1 minus line 2)	14,400	13,500	7,370	35,270
Direct Expenses	4	Cash prizes				
	5	Non-cash prizes	847	2,376		3,223
	6	Rent/facility costs		22,066	698	22,764
	7	Food and beverages		204	17,205	17,409
	8	Entertainment			300	300
	9	Other direct expenses	10,331		763	11,094
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶				(54,790)
	11	Net income summary Combine lines 3 and 10 in column (d). ▶				-19,520

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.

			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
Revenue	1	Gross revenue				
Direct Expenses	2	Cash prizes				
	3	Non-cash prizes				
	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	☐ Yes ________ ☐ No	☐ Yes ________ ☐ No	☐ Yes ________ ☐ No	
	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 quuestion on Schedule G (see instructions.)

Identifier	ReturnReference	Explanation

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

2011

Open to Public Inspection

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

Employer identification number
91-0482710

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. Use Part IV and Schedule I-1 (Form 990) if additional space is needed . . . ▶ ☐

(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
(1) YMCA WENATCHEE VALLEY217 ORONDO AVENUE WENATCHEE,WA 98801	91-0578224	501(C)(3)	6,021				DIABETES PREVENTION PROGRAM
(2) GIG HARBOR FAMILY YMCA10550 HARBOR HILL DR GIG HARBOR,WA 98332	91-0565562	501(C)(3)	6,566				DIABETES PREVENTION PROGRAM

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . ▶ 2

3 Enter total number of other organizations listed in the line 1 table . . . ▶ 0

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) TRANSPORTATION	120		51,167	FMV	BUS PASSES, BUS TICKETS, ETC
(2) HOUSING ASSISTANCE	367		583,862	FMV	HOUSING & RENTAL ASSISTANCE FOR LOW-INCOME YOUNG ADULTS
(3) SCHOLARSHIPS AND EDUCATION	120		83,062	FMV	TUITION ASSISTANCE, BOOKS, ETC
(4) FOOD, CLOTHING, OTHER	130		99,687	FMV	GROCERIES, WORK CLOTHING, ETC
(5) MATCHING CASH FOR LOW INCOME FAMILIES THROUGH INDIVIDUAL DEVELOPMENT ACCOUNT PROGRAM	273	327,045			

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
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 SELECTED ENDOWMENT FUNDS PROVIDE FOR EDUCATION SCHOLARSHIPS FOR QUALIFYING INDIVIDUALS A COMMITTEE OF VOLUNTEERS AND STAFF MEET AND REVIEW APPLICATIONS, THEN MEET WITH CANDIDATES TO DETERMINE ELIGIBILITY AS DEFINED BY EACH FUND FOR HOUSING AND EDUCATION ASSISTANCE, FUNDS ARE NOT GIVEN DIRECTLY TO PARTICIPANTS, BUT ARE PROVIDED DIRECTLY TO LANDLORDS, UTILITY COMPANIES, SCHOOLS, ETC

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Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

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

Employer identification number
91-0482710

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☑ Travel for companions ☐ Payments for business use of personal residence ☐ Tax idemnification and gross-up payments ☑ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain	**1b**	Yes	
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**	Yes	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply ☑ Compensation committee ☐ Written employment contract ☐ Independent compensation consultant ☑ Compensation survey or study ☑ Form 990 of other organizations ☑ Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
a	Receive a severance payment or change-of-control payment?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**		No
c	Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	**4c**		No
	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? If "Yes," to line 5a or 5b, describe in Part III	**5b**		No
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? If "Yes," to line 6a or 6b, describe in Part III	**6b**		No
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	**8**		No
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 Schedule J-1 if additional space needed.

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

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

(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) ROBERT B GILBERTSON JR	(i)	287,070	0	0	29,400	6,240	322,710	0
	(ii)	0	0	0	0	0	0	0
(2) SUE CAMOU ARRANT	(i)	209,918	0	0	25,169	6,240	241,327	0
	(ii)	0	0	0	0	0	0	0
(3) GLENN H TSUGAWA	(i)	178,787	0	0	23,013	6,240	208,040	0
	(ii)	0	0	0	0	0	0	0
(4) PETER MORRIS	(i)	155,432	0	0	19,208	6,240	180,880	0
	(ii)	0	0	0	0	0	0	0
(5) JANE BRENNEMAN	(i)	146,183	0	0	18,226	6,240	170,649	0
	(ii)	0	0	0	0	0	0	0
(6) ANDREW MINEAR	(i)	140,706	0	0	17,897	6,240	164,843	0
	(ii)	0	0	0	0	0	0	0

Part III **Supplemental Information**

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

Identifier	Return Reference	Explanation
	PART I, LINE 1A	SPECIFIED AND LIMITED SPOUSE TRAVEL FOR THE CEO IS TREATED AS TAXABLE COMPENSATION PARTICIPATION IN BUSINESS ORIENTED SOCIAL AND SERVICE CLUBS IS ENCOURAGED TO DEVELOP IMPORTANT COMMUNITY RELATIONSHIPS SOCIAL CLUB USE IS PRIMARILY FOR BUSINESS MEETINGS

Schedule K (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax Exempt Bonds

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

OMB No 1545-0047

2011

Open to Public Inspection

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

Employer identification number
91-0482710

Part I Bond Issues

	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Price	(f) Description of Purpose	(g) Defeased Yes	(g) Defeased No	(h) On Behalf of Issuer Yes	(h) On Behalf of Issuer No	(i) Pool financing Yes	(i) Pool financing No
A	WA STATE HOUSING FINANCE COMMISSION	91-1874730	93978LES1	09-01-2007	30,000,000	CONSTRUCTION, RENOVATION, EXPANSION		X		X		X

Part II Proceeds

		A	B	C	D
1	Amount of bonds retired				
2	Amount of bonds defeased				
3	Total proceeds of issue	30,000,000			
4	Gross proceeds in reserve funds				
5	Capitalized interest from proceeds				
6	Proceeds in refunding escrow				
7	Issuance costs from proceeds	342,056			
8	Credit enhancement from proceeds				
9	Working capital expenditures from proceeds				
10	Capital expenditures from proceeds	29,657,944			
11	Other spent proceeds				
12	Other unspent proceeds				
13	Year of substantial completion	2009			

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No
14	Were the bonds issued as part of a current refunding issue?		X						
15	Were the bonds issued as part of an advance refunding issue?		X						
16	Has the final allocation of proceeds been made?	X							
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X							

Part III Private Business Use

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

Part III Private Business Use *(Continued)*

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

Part IV Arbitrage

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		X						
2	Is the bond issue a variable rate issue?	X							
3a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?	X							
b	Name of provider	BANK OF AMERICA							
c	Term of hedge	10 000000000000							
d	Was the hedge superintegrated?		X						
e	Was a hedge terminated?		X						
4a	Were gross proceeds invested in a GIC?		X						
b	Name of provider								
c	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
5	Were any gross proceeds invested beyond an available temporary period?	X							
6	Did the bond issue qualify for an exception to rebate?	X							

Part V Procedures To Undertake Corrective Action

Check the box if the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations . . . . ☑ Yes ☐ No

Part VI Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule K (see instructions)

Identifier	Return Reference	Explanation

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

2011

Open to Public Inspection

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

Employer identification number
91-0482710

Part I Types of Property

	(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining 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	X	3	28,010	COST/SELLING PRICE
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded				
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 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 ▶ (SUPPLIES)	X	19	28,660	COST/SELLING PRICE
26 Other ▶ (SOFTWARE)	X	1	79,990	COST/SELLING PRICE
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

			Yes	No
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		No
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
METHOD FOR DETERMINING NUMBER OF CONTRIBUTORS	PART I, COLUMN (B)	MOST CONTRIBUTIONS ARE GOODS OR SERVICES PROVIDED BY REGULAR VENDORS CONTRIBUTIONS APPEAR AS A REDUCTION OF AMOUNT DUE ON VENDOR INVOICES

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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.

OMB No 1545-0047

2011

Open to Public Inspection

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

Employer identification number
91-0482710

Identifier	Return Reference	Explanation
	FORM 990, PART I, LINE 6	VOLUNTEERS FOR THE YMCA OF GREATER SEATTLE SERVE IN MANY WAYS POLICY VOLUNTEERS SERVE ON COMMITTEES AND BOARDS FUNDRAISING VOLUNTEERS SUPPORT EFFORTS TO RAISE FUNDS TO FURTHER THE ORGANIZATION'S EXEMPT PURPOSE. THE LARGEST NUMBER OF VOLUNTEERS DIRECTLY SUPPORT PROGRAMS AND EVENTS DELIVERED BY THE YMCA OF GREATER SEATTLE. VOLUNTEER COUNT IS A COMPILATION OF DATA FROM ALL PROGRAMS AND ALL BRANCHES OF THE YMCA OF GREATER SEATTLE.
	FORM 990, PART V, LINE 7H	NO FORM 1098-C WAS ISSUED AS THE ORGANIZATION RECEIVED A DONATED AUTOMOBILE FROM ANOTHER EXEMPT ORGANIZATION
	FORM 990, PART VI, SECTION A, LINE 2	MATT GRIFFIN AND JANE L LEWIS - BUSINESS RELATIONSHIP
	FORM 990, PART VI, SECTION A, LINE 4	THE BYLAWS WERE AMENDED TO STATE THAT THE BOARD CHAIR MAY MAKE BOARD APPOINTMENTS, AND DOES NOT HAVE TO WAIT UNTIL THE APRIL ANNUAL MEETING FOR APPROVAL BY THE BOARD MEMBERS
	FORM 990, PART VI, SECTION A, LINE 6	YMCA OF GREATER SEATTLE HAS NON-VOTING MEMBERS AND VOTING CORPORATE MEMBERS
	FORM 990, PART VI, SECTION A, LINE 7A	THE CORPORATE MEMBERS MAY SERVE ON THE BOARD OF DIRECTORS AND ELECT THE MEMBERS OF THE GOVERNING BODY
	FORM 990, PART VI, SECTION B, LINE 11	THE AUDIT COMMITTEE OF THE GOVERNING BODY REVIEWED THE FORM 990 AND A COPY OF THE FORM 990 WAS MADE AVAILABLE TO EACH MEMBER OF THE GOVERNING BODY PRIOR TO IT BEING FILED
	FORM 990, PART VI, SECTION B, LINE 12C	IDENTIFIED SIGNIFICANT PARTIES ARE REQUIRED TO ANNUALLY COMPLETE A CONFLICT OF INTEREST QUESTIONNAIRE THAT IS SUBMITTED TO AND REVIEWED BY THE AUDIT COMMITTEE. WHERE A CONFLICT OF INTEREST IS DETERMINED TO EXIST, THE YMCA SHALL NOT ENTER INTO THE PROPOSED CONTRACT, TRANSACTION OR ARRANGEMENT UNLESS THE BOARD HAS COMPLIED WITH THE FOLLOWING A THE CHAIRPERSON OF THE BOARD SHALL, IF APPROPRIATE, APPOINT A DISINTERESTED PERSON OR COMMITTEE TO INVESTIGATE ALTERNATIVES TO THE PROPOSED CONTRACT, TRANSACTION OR ARRANGEMENT B AFTER EXERCISING DUE DILIGENCE, THE BOARD SHALL DETERMINE WHETHER THE YMCA CAN, WITH REASONABLE EFFORTS, GET A MORE ADVANTAGEOUS CONTRACT, TRANSACTION OR ARRANGEMENT FROM A PERSON OR ENTITY WITHOUT A CONFLICT OF INTEREST C IF A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT IS NOT REASONABLY POSSIBLE, THE BOARD SHALL DETERMINE BY A MAJORITY VOTE OF THE DISINTERESTED DIRECTORS WHETHER THE TRANSACTION OR ARRANGEMENT IS IN THE YMCA'S BEST INTEREST, FOR ITS OWN BENEFIT, AND WHETHER IT IS FAIR AND REASONABLE. IN CONFORMITY WITH THE ABOVE DETERMINATION, THE BOARD SHALL MAKE ITS DECISION AS TO WHETHER TO ENTER INTO THE CONTRACT, TRANSACTION OR ARRANGEMENT
	FORM 990, PART VI, SECTION B, LINE 15	YMCA OF THE USA, USING AN INDEPENDENT CONSULTANT, STUDIES YMCA CEO SALARIES AND COMPARES THEM TO OTHER COMPARABLE INDUSTRIES YMCA OF GREATER SEATTLE ACQUIRES SEATTLE MARKET AND COMPARABLE INDUSTRY COMPENSATION DATA THE HR COMMITTEE OF THE BOARD OF DIRECTORS ENGAGES A CONSULTANT ANNUALLY TO PERFORM AN 'EXCESS COMPENSATION' SURVEY AND EVALUATES THE COMPENSATION OF 5 SENIOR MANAGEMENT POSITIONS THIS PROCESS WAS LAST PERFORMED DURING 2011 AT THE HIRE OF A CEO, THE COMPENSATION PACKAGE GOES TO THE BOARD FOR APPROVAL
	FORM 990, PART VI, SECTION C, LINE 19	GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE ON REQUEST
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -4,995,534 CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS -67,028 CHANGE IN VALUE OF INTEREST RATE SWAP AGREEMENTS -983,170 TOTAL TO FORM 990, PART XI, LINE 5 -6,045,732

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

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

Employer identification number
91-0482710

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

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization Yes	No

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations? Yes	(h) No	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership
(1) 909 4TH YMCA LIMITED PARTNERSHIP 909 FOURTH AVENUE SEATTLE, WA 98104 91-1899977	PROVIDE LOW-INCOME HOUSING	WA	N/A	RELATED	2	10,889,193		No		Yes		0 010 %

Part IV **Identification of Related Organizations Taxable as a Corporation or Trust** (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
(1) CHARITABLE REMAINDER TRUSTS (2)	INVESTMENTS	WA	YMCA OF GREATER SEATTLE	T			

Part V **Transactions With Related Organizations** (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)

			Yes	No
	Note. Complete line 1 if any entity is listed in Parts II, III or IV			
1	During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a	Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties **(iv)** rent from a controlled entity	**1a**	Yes	
b	Gift, grant, or capital contribution to related organization(s)	**1b**		No
c	Gift, grant, or capital contribution from related organization(s)	**1c**		No
d	Loans or loan guarantees to or for related organization(s)	**1d**		No
e	Loans or loan guarantees by related organization(s)	**1e**		No
f	Sale of assets to related organization(s)	**1f**		No
g	Purchase of assets from related organization(s)	**1g**		No
h	Exchange of assets with related organization(s)	**1h**		No
i	Lease of facilities, equipment, or other assets to related organization(s)	**1i**		No
j	Lease of facilities, equipment, or other assets from related organization(s)	**1j**	Yes	
k	Performance of services or membership or fundraising solicitations for related organization(s)	**1k**	Yes	
l	Performance of services or membership or fundraising solicitations by related organization(s)	**1l**		No
m	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	**1m**		No
n	Sharing of paid employees with related organization(s)	**1n**		No
o	Reimbursement paid to related organization(s) for expenses	**1o**		No
p	Reimbursement paid by related organization(s) for expenses	**1p**	Yes	
q	Other transfer of cash or property to related organization(s)	**1q**		No
r	Other transfer of cash or property from related organization(s)	**1r**		No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of other organization	**(b)** Transaction type(a-r)	**(c)** Amount involved	**(d)** Method of determining amount involved
(1) CHARITABLE REMAINDER TRUSTS (2)	A	26,402	FMV
(2)			
(3)			
(4)			
(5)			
(6)			

Part VI **Unrelated Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier	Return Reference	Explanation

TY 2011 Taxation of Excess Distribution Statement

Name: THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER SEATTLE

EIN: 91-0482710

Statement: DATE STOCK ACQUIRED = 01/01/2011 DATE STOCK DISPOSED OR DISTRIBUTED = 12/31/2011 TOTAL ALLOCABLE TO EACH YEAR IN HOLDING PERIOD = $520725. TOTAL TO FORM 8621, LINE 11B = $520725.

TY 2011 Taxation of Excess Distribution Statement

Name: THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER SEATTLE

EIN: 91-0482710

Statement: DATE STOCK ACQUIRED = 01/01/2011 DATE STOCK DISPOSED OR DISTRIBUTED = 12/31/2011 TOTAL ALLOCABLE TO EACH YEAR IN HOLDING PERIOD = $143138. TOTAL TO FORM 8621, LINE 11B = $143138.

TY 2011 Taxation of Excess Distribution Statement

Name: THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER SEATTLE

EIN: 91-0482710

Statement: DATE STOCK ACQUIRED = 01/01/2011 DATE STOCK DISPOSED OR DISTRIBUTED = 12/31/2011 TOTAL ALLOCABLE TO EACH YEAR IN HOLDING PERIOD = $95425. TOTAL TO FORM 8621, LINE 11B = $95425.

TY 2011 Taxation of Excess Distribution Statement

Name: THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER SEATTLE

EIN: 91-0482710

Statement: DATE STOCK ACQUIRED = 01/01/2011 DATE STOCK DISPOSED OR DISTRIBUTED = 12/31/2011 TOTAL ALLOCABLE TO EACH YEAR IN HOLDING PERIOD = $214706. TOTAL TO FORM 8621, LINE 11B = $214706.

TY 2011 Taxation of Excess Distribution Statement

Name: THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER SEATTLE

EIN: 91-0482710

Statement: DATE STOCK ACQUIRED = 01/01/2011 DATE STOCK DISPOSED OR DISTRIBUTED = 12/31/2011 TOTAL ALLOCABLE TO EACH YEAR IN HOLDING PERIOD = $23856. TOTAL TO FORM 8621, LINE 11B = $23856.