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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 07-01-2011 and ending 06-30-2012

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

C Name of organization
YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF YORK PA

Doing Business As
YWCA YORK

Number and street (or P O box if mail is not delivered to street address) | Room/suite
320 EAST MARKET STREET

City or town, state or country, and ZIP + 4
YORK, PA 17403

D Employer identification number
23-1360889

E Telephone number
(717) 845-2631

G Gross receipts $ 7,963,582

F Name and address of principal officer
DEBRA STOCK
320 EAST MARKET STREET
YORK, PA 17403

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 YWCAYORK ORG

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

L Year of formation 1891

M State of legal domicile PA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
TO ELIMINATE RACISM, EMPOWER WOMEN, AND PROMOTE PEACE, JUSTICE, FREEDOM, AND DIGNITY FOR ALL

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	18
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	18
5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	236
6	Total number of volunteers (estimate if necessary)	6	325
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)	3,771,228	4,811,847
	9	Program service revenue (Part VIII, line 2g)	2,228,242	2,603,196
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	176,536	133,505
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	212,900	15,679
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	6,388,906	7,564,227
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	111,351	156,350
	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)	4,524,199	4,444,781
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶248,367		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	2,526,601	2,316,896
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	7,162,151	6,918,027
	19	Revenue less expenses Subtract line 18 from line 12	-773,245	646,200

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	13,730,701	13,668,572
	21	Total liabilities (Part X, line 26)	3,789,631	3,177,981
	22	Net assets or fund balances Subtract line 21 from line 20	9,941,070	10,490,591

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

****** | 2013-05-10
Signature of officer | Date

JOHN KLINEDINST PRESIDENT
Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶ DOUGLAS L BERMAN	Date 2013-05-07	Check if self-employed ▶ ☐	Preparer's taxpayer identification number (see instructions) P01269555
Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ REINSEL KUNTZ LESHER LLP, 3501 CONCORD ROAD PO BOX 21439, YORK, PA 17402			EIN ▶ 23-2108173 Phone no ▶ (717) 843-3804

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

THE PURPOSE OF THE YWCA YORK IS TO WORK PROACTIVELY AND COLLABORATIVELY TO PROVIDE PROGRAMS THAT PROMOTE RACIAL JUSTICE, EMPOWER WOMEN, ELIMINATE DOMESTIC VIOLENCE, SEXUAL ASSAULT AND OTHER VIOLENT CRIMES, AND STRENGTHEN OUR COMMUNITY

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . . ☐ 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 $ 3,116,669 including grants of $ 127,511) (Revenue $ 2,173,637)

CHILDREN AND YOUTH PROGRAMS OUR LEARNING CENTERS PROVIDE NURTURING AND EDUCATIONAL ENVIRONMENTS FOR HUNDREDS OF CHILDREN EACH YEAR WE SERVE INFANTS, TODDLERS, PRESCHOOLERS, AND SCHOOL-AGE CHILDREN OUR CLASSROOMS ARE PLACES WHERE CHILDREN DEVELOP EARLY LITERACY AND MATH SKILLS, AND LEARN TO RESPECT THE EARTH AND EACH OTHER OUR COMMITMENT TO END DISCRIMINATION AND PROMOTE PEACE, JUSTICE, FREEDOM AND DIGNITY FOR ALL PEOPLE IS REFLECTED THROUGHOUT OUR CURRICULUM, SPECIAL EVENTS AND CLASSROOMS AS CAREGIVERS TO APPROXIMATELY 620 CHILDREN, WE ARE COMMITTED TO REDUCING THE STRESS OF WORKING PARENTS WHO RELY ON US FOR AFFORDABLE AND QUALITY CHILD CARE PROGRAMS OUR YOUTH PROGRAMS (TEMPLE GUARD DRILL TEAM AND THE QUANTUM OPPORTUNITIES PROGRAM) FOCUS ON THE STRENGTHS OF YOUNG PEOPLE AND CHALLENGE THEM TO EXPECT AND CREATE GREAT THINGS IN THEIR LIVES AS SUCH, YOUTH HAVE THE OPPORTUNITY TO EXPLORE NEW WORLDS, DISCOVER THEIR FULL POTENTIAL, AND DEVELOP TOWARD HEALTHY ADULTHOOD THE TEMPLE GUARD DRILL TEAM IS A MENTORING PROGRAM BASED ON DISCIPLINE AND FOCUS THAT TRAINS YOUTH IN GRADES K-12 IN MILITARY-STYLE BOOT CAMP MARCHING AND DANCE DRILL TEAM MEMBERS PERFORM APPROXIMATELY TWICE A MONTH ACROSS THE MID-STATE REGION TEMPLE GUARD DRILL TEAM WON THE PENNSYLVANIA STATE DRILL TEAM COMPETITION FOR THE 4TH CONSECUTIVE YEAR THE QUANTUM OPPORTUNITIES PROGRAM (QOP) IS AN AFTER-SCHOOL PROGRAM FOR YOUTH IN GRADES 9-12 THAT FOCUSES ON EDUCATION, COMMUNITY SERVICE, AND LIFE-SKILLS DEVELOPMENT PROGRAM PARTICIPANTS FULFILL DAILY REQUIREMENTS AND EARN INCENTIVE ESCROW PAYMENTS TO HELP FUND CONTINUING EDUCATION AND THE EXPENSES ASSOCIATED WITH HIGHER EDUCATION IN 2011-2012 A QOP JR PROGRAM WAS ADDED TO SERVE 7TH & 8TH GRADERS THROUGH A GRANT PROVIDED BY PENNSYLVANIA COMMISSION ON CRIME AND DELINQUENCY FISCAL YEAR 2011-2012 ACCOMPLISHMENTS - LEARNING CENTERS * A TOTAL OF 430 CHILDREN AND THEIR FAMILIES WERE SUPPORTED THROUGH YWCA LICENSED LEARNING PROGRAMS * PROVIDED 188 YOUTH WITH A SUMMER CAMP FULL OF EDUCATIONAL EXPERIENCES AT CAMP CANN-EDI-ON OR THROUGH THE SUMMER EXPLORERS PROGRAM * MORE THAN 78% OF OUR YWCA CHILDREN RECEIVED FINANCIAL ASSISTANCE IN FISCAL YEAR 2011-2012 * ALL PRE-K COUNTS TEACHERS RECEIVED TEACHING CERTIFICATION IN EARLY CHILDHOOD EDUCATION * IMPLEMENTED ANTI BIAS CURRICULUM IN ALL OF OUR EARLY LEARNING AND SCHOOL-AGE PROGRAMS * ALL YWCA YORK EARLY LEARNING CENTERS MAINTAINED THEIR FOUR-STAR STATUSES IN THE KEYSTONE STARS QUALITY INITIATIVE AND NAEYC (NATIONAL ASSOCIATION FOR THE EDUCATION OF YOUNG CHILDREN) ACCREDITATION FISCAL YEAR 2011-2012 ACCOMPLISHMENTS -YOUTH PROGRAMS * OF THE 50 YOUTH SERVED IN THE QUANTUM OPPORTUNITIES PROGRAM (OR QOP) > 100% OF THE PARTICIPANTS REMAINED IN SCHOOL > 100% OF THE PARTICIPANTS ACHIEVED A GPA OF 2 0 OR HIGHER > 100% OF QOP SENIORS GRADUATED AND ARE ATTENDING POST-SECONDARY SCHOOLS OR TRAINING PROGRAMS IN THE FALL, INCLUDING LINCOLN UNIVERSITY, HARRISBURG AREA COMMUNITY COLLEGE, MILLERSVILLE UNIVERSITY, HARCUM COLLEGE, YTI CAREER INSTITUTE, CALIFORNIA UNIVERSITY OF PENNSYLVANIA, AND THE PENNSYLVANIA STATE UNIVERSITY * TEMPLE GUARD SERVED 61 YOUTH IN 2011-2012 OF THE 61 YOUTH SERVED > 95% REPORTED, AND THEIR PARENT CONFIRMED, THAT THEY SUCCESSFULLY AVOIDED PARTICIPATING IN RISK-TAKING BEHAVIORS (I E , DRUG/ALCOHOL USE, ILLEGAL ACTIVITIES, ETC) > THEY COMPLETED A COMBINED 1,905 HOURS OF COMMUNITY SERVICE VIA PUBLIC PERFORMANCES AT AWARENESS AND COMMUNITY EVENTS AND PERFORMED 18 TIMES THROUGHOUT THE YEAR

4b (Code) (Expenses $ 1,533,150 including grants of $ 28,839) (Revenue $ 0)

VICTIMS SERVICES THE VICTIM SERVICES DEPARTMENT OF YWCA YORK, AS RECOGNIZED BY THE PENNSYLVANIA COALITION AGAINST DOMESTIC VIOLENCE AND THE PENNSYLVANIA COALITION AGAINST RAPE, IS THE ONLY COMPREHENSIVE VICTIM SERVICES PROVIDER IN YORK COUNTY, OFFERING 24-HOUR HOTLINE ASSISTANCE, EMERGENCY SHELTER, TRANSITIONAL HOUSING, INFORMATION AND REFERRAL, HOSPITAL RESPONSE, INDIVIDUAL AND GROUP COUNSELING FOR ADULTS AND CHILDREN, LEGAL ADVOCACY, MEDICAL ADVOCACY, ABUSE AND SEXUAL VIOLENCE PREVENTION EDUCATION AND COMMUNITY OUTREACH ACCESS-YORK HAS BEEN MERGED WITH YWCA YORK FOR FIVE YEARS AND THE VICTIM ASSISTANCE CENTER (VAC) FOR FOUR YEARS AND WE ARE PROUD TO REPORT THAT THESE MERGERS CONTINUE TO RESULT IN AN ON-GOING ABILITY TO ASSIST MORE VICTIMS OF VIOLENCE THROUGH ENHANCED SERVICE PROVISIONS 2012 MARKED VAC'S 35TH ANNIVERSARY OVER THE YEARS, THE DEDICATED STAFF AND VOLUNTEERS OF THIS PROGRAM HAVE BEEN ABLE TO IMPACT THE LIVES OF THOUSANDS OF ADULTS AND CHILDREN AS THEY HEAL FROM THE VIOLENCE THEY SUSTAINED FISCAL YEAR 2011-2012 ACCOMPLISHMENTS * CONTINUED BEYOND THE BAR TRAINING CURRICULUM TO AREA BARS AND RESTAURANTS THE GOAL OF THIS TRAINING IS TO EXPAND THE PROFESSIONAL SKILLS OF THE EMPLOYEES OF BARS AND RESTAURANTS IN REGARDS TO SEXUAL VIOLENCE PREVENTION IN THESE TRAININGS, EMPLOYEES NOT ONLY RECEIVE INFORMATION ON HOW TO RECOGNIZE, PREVENT, AND RESPOND TO SITUATIONS, BUT THEY ALSO RECEIVE SEXUAL VIOLENCE PREVENTION RESOURCES THEY CAN DISTRIBUTE TO THEIR PATRONS * 8,271 HOTLINE CALLS WERE RECEIVED * REACHED 17,448 COMMUNITY MEMBERS THROUGH PREVENTION ACTIVITIES * PROVIDED EMERGENCY SHELTER OR TRANSITIONAL HOUSING TO 295 ADULTS AND 351 CHILDREN * PROVIDED SEXUAL ASSAULT AND DOMESTIC VIOLENCE SERVICES TO 2,096 ADULTS AND 603 CHILDREN DURING THE FISCAL YEAR

4c (Code) (Expenses $ 547,654 including grants of $ 0) (Revenue $ 363,028)

HEALTH & FITNESS OUR FITNESS AND AQUATICS DEPARTMENTS AIM TO IMPROVE THE QUALITY OF LIFE FOR PEOPLE OF ALL AGES THROUGH PHYSICAL FITNESS AND HEALTH EDUCATION PROGRAMS AIM TO PREVENT HEALTH PROBLEMS IN ADULTS AND DEVELOP HEALTHY HABITS IN YOUTH OUR PROGRAMS STRENGTHEN BODIES AND BUILD SELF-ESTEEM AND CONFIDENCE YOUNG PEOPLE LEARN THE VALUE OF TEAMWORK AND THE IMPORTANCE OF SAFETY WHILE DEVELOPING SKILLS THAT WILL LAST A LIFETIME FISCAL YEAR 2011-2012 ACCOMPLISHMENTS * 87 INDIVIDUALS RECEIVED SCHOLARSHIPS TO PARTICIPATE IN YWCA YORK FITNESS/AQUATICS PROGRAM OFFERINGS TOTALING MORE THAN $27,000 * 302 CERTIFICATES WERE ISSUED TO INDIVIDUALS ACKNOWLEDGING THEIR SUCCESSFUL COMPLETION OF A SWIMMING LEVEL * CONTINUED TO OFFER A VARIETY OF NEW FITNESS CLASSES INCLUDING GROUP POWER, AQUA ZUMBA, AND A SYNCHRONIZED SWIMMING CLASS FOR THOSE 70+ YEARS OF AGE SINCE 2008, YWCA YORK'S COUNCIL OF THE NATIONWIDE GIRLS ON THE RUN HAS BEEN ENCOURAGING THE DEVELOPMENT OF YOUNG GIRLS IN A HOLISTIC MANNER, ADDRESSING THE PHYSICAL, MENTAL, EMOTIONAL, AND SOCIAL SELF THE MISSION OF GIRLS ON THE RUN IS TO EDUCATE AND PREPARE GIRLS FOR A LIFETIME OF SELF-RESPECT AND HEALTHY LIVING THROUGH RUNNING ACTIVITIES, IMPORTANT ISSUES LIKE SELF-ESTEEM, CHARACTER, AND NUTRITION ARE TAUGHT AND CULTIVATED LAST YEAR, GIRLS ON THE RUN IN YORK COUNTY HAD 234 PARTICIPANTS AT 13 DIFFERENT ELEMENTARY AND MIDDLE SCHOOLS AT THE CONCLUSION OF THE 12-WEEK PROGRAM, THE GIRLS ARE ENCOURAGED TO RACE IN EITHER THE YWCA LADY WHITE ROSE 5K, OR YMCA TURKEY TROT PROUDLY, 216 PARTICIPATED IN A 5K AT THE END OF THEIR SESSION SYNCHRONIZED SWIMMING IS AN EXCITING AND CHALLENGING SPORT THAT COMBINES BALLET AND GYMNASTIC MOVES CURRENTLY, YWCA YORK OFFERS THE ONLY SYNCHRONIZED SWIM TEAM IN YORK COUNTY, THE SYNCHRO-ETTES THIS PAST YEAR, OVER 30 GIRLS RANGING FROM 2ND TO 11TH GRADE PARTICIPATED IN THE SYNCHRO-ETTES THROUGH THEIR INSTRUCTION AT YWCA YORK AS WELL AS THROUGH CLINICS CONDUCTED BY USA OLYMPIC SWIMMERS, THESE GIRLS LEARNED BOTH ABOVE AND BELOW WATER PERFORMANCE SKILLS AND TECHNIQUES EACH YEAR, THE TEAM CONDUCTS ORGANIZED SHOWS FOR THE PUBLIC (THE PAST TWO PERFORMANCES WERE THE LION KING AND SNOW WHITE) THEY ALSO COMPETE IN APPROXIMATELY 10 MEETS PER SEASON AND, MOST YEARS, THE SENIOR TEAM PLACES IN THE TOP 10 AT JUNIOR ZONES IN ADDITION, YWCA YORK ALSO CONDUCTS A MASTER'S TEAM WHICH IS COMPRISED OF FORMER MEMBERS OF THE SYNCHRO-ETTES AS WELL AS MOTHERS OF CURRENT SWIMMERS THE MASTER'S SWIMMERS COMPETE IN THE KEYSTONE GAMES AND ALSO TRAVEL TO THE NATIONAL MASTER'S MEETS

(Code) (Expenses $ 431,311 including grants of $) (Revenue $ 66,531)

COMMUNITY INITIATIVES OUR COMMUNITY RENAISSANCE PROJECT, ALSO KNOWN AS THE ELM STREET PROJECT, SEEKS TO IMPROVE THE SOCIAL, ECONOMIC AND PHYSICAL CONDITIONS IN THE OLDE TOWNE EAST NEIGHBORHOOD, AN 18-BLOCK NEIGHBORHOOD JUST EAST OF DOWNTOWN YORK THE LONG-TERM GOAL IS TO IMPROVE THE QUALITY OF LIFE FOR THOSE LIVING AND WORKING IN THE NEIGHBORHOOD PARTNERING WITH LOCAL ASSOCIATIONS, THE CITY OF YORK, YORK COUNTY, AND COMMONWEALTH AGENCIES, AND SEVERAL BANKS AND OTHER PRIVATE FOUNDATIONS, YWCA YORK HAS WORKED FOR A DECADE TO PROMOTE HOMEOWNERSHIP AND SUSTAINABLE ECONOMIC DEVELOPMENT IN THE NEIGHBORHOOD THE MISSION OF THE COMMUNITY RENAISSANCE PROJECT IS TO WORK TOGETHER TO PROMOTE AND SUSTAIN A CLEAN, ATTRACTIVE, AND RESPECTFUL COMMUNITY WHERE THOSE DESIRING A SAFE AND COMFORTABLE HOME FEEL WELCOME FISCAL YEAR 2011-2012 ACCOMPLISHMENTS * INVESTED APPROXIMATELY $8 6 MILLION IN INFRASTRUCTURE AND HOUSING IMPROVEMENTS SINCE THE PROGRAM'S INCEPTION * IN WORKING WITH COMMUNITY SERVICE DIVISION OF YORK CITY POLICY DEPARTMENT, A BLOCK WATCH PROGRAM WITHIN OLD TOWNE EAST WAS ESTABLISHED * THE OVERALL CRIME RATE FROM 2006 TO 2011, HAS DECREASED BY 46 0% AND THE RATE OF VIOLENT AND PROPERTY CRIMES HAS REDUCED BY 70% * THE MEDIAN HOME LISTING PRICE IN OLDE TOWNE EAST IS DOUBLE THAT OF THE REST OF THE CITY * HOSTED FAMILY-ORIENTED EVENTS FOCUSED ON SAFETY AND COMMUNITY PARTNERSHIPS (EX NATIONAL NIGHT OUT, AN ICE CREAM FESTIVAL, AN EASTER EGG HUNT, ETC) * COORDINATED 3 NEIGHBORHOOD BLOCK CLEAN-UPS

4d Other program services (Describe in Schedule O)

(Expenses $ 431,311 including grants of $) (Revenue $ 66,531)

4e **Total program service expenses** ▶$ 5,628,784

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		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X.*	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *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		No
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the U S ? *If "Yes," complete Schedule F, Part II and IV*	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the U S ? *If "Yes," complete Schedule F, 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		No
22	Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer questions 24b–24d and complete Schedule K. If "No," go to line 25*	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		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		No
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	23			
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	236			
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		
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** 18			
b	Enter the number of voting members included in line 1a, above, who are independent	**1b** 18			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		**2**		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		**3**		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		**4**		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		**5**		No
6	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**		No
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**		
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 ▶PA

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

JENNIFER ROBERTS CHIEF DEVELOPMENT
320 EAST MARKET STREET
YORK, PA 17403
(717) 845-2631

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)						(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			
(1) MIEKE WALSH DRISCOLL ESQ PRESIDENT	2 00	X		X				0	0	0
(2) EDQUINA WASHINGTON SECRETARY	2 00	X		X				0	0	0
(3) JULIE FELPEL TREASURER	2 00	X		X				0	0	0
(4) JOHN KLINEDINST PRESIDENT ELECT	2 00	X		X				0	0	0
(5) DAWN PAUL TREASURER ELECT	2 00	X						0	0	0
(6) DEB DIXON DIRECTOR	1 00	X						0	0	0
(7) MICHAEL J HEINE DIRECTOR	1 00	X						0	0	0
(8) BRAD KOSTELICH DIRECTOR	1 00	X						0	0	0
(9) ALICIA MILLER DIRECTOR	1 00	X						0	0	0
(10) NEIDA LAU DIRECTOR	1 00	X						0	0	0
(11) DELMA RIVERA-LYTLE DIRECTOR	1 00	X						0	0	0
(12) JOSETTE MYERS DIRECTOR	1 00	X						0	0	0
(13) LYNDA RANDALL DIRECTOR	1 00	X						0	0	0
(14) LESLIE SAFFIN DIRECTOR	1 00	X						0	0	0
(15) ANDREW SEEBOLD DIRECTOR	1 00	X						0	0	0
(16) SHERRY WASHINGTON DIRECTOR	1 00	X						0	0	0
(17) KEITH WENTZ DIRECTOR	1 00	X						0	0	0

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) 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
(18) DEBRA STOCK CHIEF EXECUTIVE OFFICER	40 00	X		X				162,906	0	18,862
(19) NANETTE BUNNER TILL 122011 CHIEF OPERATIONS OFFICER	40 00			X				73,768	0	6,838
(20) JENNIFER ROBERTS START 12012 CHIEF DEVELOPMENT OFFICER	40 00			X				64,909	0	51

		(D)	(E)	(F)
1b	**Sub-Total** ▶			
c	**Total from continuation sheets to Part VII, Section A** ▶			
d	**Total (add lines 1b and 1c)** ▶	301,583	0	25,751

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 ▶1

			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

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 ▶0

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . 1a	387,930				
	b	Membership dues 1b					
	c	Fundraising events 1c	100,912				
	d	Related organizations . . . 1d					
	e	Government grants (contributions) 1e	2,324,053				
	f	All other contributions, gifts, grants, and similar amounts not included above 1f	1,998,952				
	g	Noncash contributions included in lines 1a-1f $ 68,762					
	h	**Total.** Add lines 1a-1f . . . . ▶		4,811,847			
Program Service Revenue			Business Code				
	2a	EDUCATIONAL, RECREATIO	624200	2,587,869	2,587,869		
	b	MEMBERSHIP DUES	713940	15,327	15,327		
	c						
	d						
	e						
	f	All other program service revenue					
	g	**Total.** Add lines 2a–2f . . . . ▶		2,603,196			
Other Revenue	3	Investment income (including dividends, interest and other similar amounts) . . . . . ▶		112,870			112,870
	4	Income from investment of tax-exempt bond proceeds . . ▶					
	5	Royalties . . . . ▶					
			(i) Real / (ii) Personal				
	6a	Gross rents	38,606 /				
	b	Less rental expenses	0 /				
	c	Rental income or (loss)	38,606 /				
	d	Net rental income or (loss) . . . . ▶		38,606			38,606
			(i) Securities / (ii) Other				
	7a	Gross amount from sales of assets other than inventory	380,506 /				
	b	Less cost or other basis and sales expenses	359,871 /				
	c	Gain or (loss)	20,635 /				
	d	Net gain or (loss) . . . . ▶		20,635			20,635
	8a	Gross income from fundraising events (not including $ 100,912 of contributions reported on line 1c) See Part IV, line 18 . . . a	14,773				
	b	Less direct expenses . . . b	39,484				
	c	Net income or (loss) from fundraising events . . ▶		-24,711			-24,711
	9a	Gross income from gaming activities See Part IV, line 19 . . . a					
	b	Less direct expenses . . . b					
	c	Net income or (loss) from gaming activities . . . ▶					
	10a	Gross sales of inventory, less returns and allowances . a					
	b	Less cost of goods sold . . b					
	c	Net income or (loss) from sales of inventory . . ▶					
		Miscellaneous Revenue	Business Code				
	11a	MISCELLANEOUS INCOME	900099	1,784			1,784
	b						
	c						
	d	All other revenue					
	e	**Total.** Add lines 11a–11d . . . . . . ▶		1,784			
	12	**Total revenue.** See Instructions . . . ▶		7,564,227	2,603,196	0	149,184

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				
2 Grants and other assistance to individuals in the United States See Part IV, line 22	156,350	156,350		
3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	256,875	207,766	38,516	10,593
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	3,242,071	2,623,033	484,400	134,638
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	137,817	110,930	21,875	5,012
9 Other employee benefits	553,093	442,013	90,180	20,900
10 Payroll taxes	254,925	206,838	37,519	10,568
11 Fees for services (non-employees)				
a Management				
b Legal	848	94	754	
c Accounting	29,600	3,286	26,314	
d Lobbying				
e Professional fundraising *See Part IV, line 17* . .				
f Investment management fees	10,266	10,266		
g Other	189,578	164,834	24,712	32
12 Advertising and promotion	15,211	14,022		1,189
13 Office expenses	228,714	113,881	99,971	14,862
14 Information technology				
15 Royalties . .				
16 Occupancy	301,603	279,797	16,781	5,025
17 Travel	128,909	126,176	981	1,752
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	16,637	15,386	350	901
20 Interest	95,896	893	95,000	3
21 Payments to affiliates	30,000		30,000	
22 Depreciation, depletion, and amortization	366,633	296,628	54,779	15,226
23 Insurance	53,350	43,164	7,971	2,215
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a PROGRAM COSTS	506,516	496,430	4,687	5,399
b FOOD	208,091	207,995	33	63
c PRINTING AND PUBLICATIO	39,167	18,843	2,400	17,924
d DUES	33,629	30,647	1,308	1,674
e				
f All other expenses	62,248	59,512	2,345	391
25 **Total functional expenses.** Add lines 1 through 24f	6,918,027	5,628,784	1,040,876	248,367
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			650	1	650
	2	Savings and temporary cash investments			17,953	2	77,386
	3	Pledges and grants receivable, net			2,224,673	3	1,572,595
	4	Accounts receivable, net			88,298	4	149,434
	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			58,766	7	31,260
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			34,613	9	33,381
	10a	Land, buildings, and equipment cost or other basis *Complete Part VI of Schedule D*	10a	12,093,905			
	b	Less accumulated depreciation	10b	3,614,872	8,770,829	10c	8,479,033
	11	Investments—publicly traded securities			1,449,665	11	2,302,987
	12	Investments—other securities See Part IV, line 11			562,998	12	534,001
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			522,256	15	487,845
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)			13,730,701	16	13,668,572
Liabilities	17	Accounts payable and accrued expenses			421,794	17	384,988
	18	Grants payable				18	
	19	Deferred revenue			38,285	19	99,585
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability *Complete Part IV of Schedule D*			35,130	21	29,049
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons *Complete Part II of Schedule L*				22	
	23	Secured mortgages and notes payable to unrelated third parties			3,294,422	23	2,664,359
	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				25	
	26	**Total liabilities.** Add lines 17 through 25			3,789,631	26	3,177,981
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			7,170,452	27	8,470,412
	28	Temporarily restricted net assets			2,207,620	28	1,486,178
	29	Permanently restricted net assets			562,998	29	534,001
		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			9,941,070	33	10,490,591
	34	Total liabilities and net assets/fund balances			13,730,701	34	13,668,572

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	7,564,227
2	Total expenses (must equal Part IX, column (A), line 25)	2	6,918,027
3	Revenue less expenses Subtract line 2 from line 1	3	646,200
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . .	4	9,941,070
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-96,679
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	10,490,591

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	

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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
YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF YORK PA

Employer identification number
23-1360889

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 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

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	No	**(v)** Did you notify the organization in col (i) of your support? Yes	No	**(vi)** Is the organization in col (i) organized in the U S ? Yes	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 ")	7,273,163	5,113,210	3,900,008	3,771,228	4,811,847	24,869,456
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	1,659,847	1,982,064	1,971,190	2,268,523	2,617,969	10,499,593
3 Gross receipts from activities that are not an unrelated trade or business under section 513	99,689	15,830	87,604			203,123
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	9,032,699	7,111,104	5,958,802	6,039,751	7,429,816	35,572,172
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	345,000		104,312	326,502	214,500	990,314
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	345,000		104,312	326,502	214,500	990,314
8 **Public Support** (Subtract line 7c from line 6)						34,581,858

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	9,032,699	7,111,104	5,958,802	6,039,751	7,429,816	35,572,172
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	135,490	141,117	126,060	138,725	151,476	692,868
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	135,490	141,117	126,060	138,725	151,476	692,868
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	5,274	18,373	1,083	179,974	1,784	206,488
13 **Total support** (Add lines 9, 10c, 11 and 12)	9,173,463	7,270,594	6,085,945	6,358,450	7,583,076	36,471,528

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	94 820 %
16	Public support percentage from 2010 Schedule A, Part III, line 15	16	93 800 %

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2011** (line 10c column (f) divided by line 13 column (f))	17	1 900 %
18	Investment income percentage from **2010** Schedule A, Part III, line 17	18	2 120 %

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 MISC INCOME

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493133038053

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
YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF YORK PA	23-1360889

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?	Yes		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		
c	Media advertisements?		No	
d	Mailings to members, legislators, or the public?		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?		No	
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
i	Other activities? If "Yes," describe in Part IV		No	
j	Total lines 1c through 1i			0
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
EXPLANATION OF LOBBYING ACTIVITIES	PART II-B, LINE 1	THE ORGANIZATION OCCASSIONALLY ATTEMPTS TO INFLUENCE LEGISLATION BY WRITING TO AND VISITING STATE AND LOCAL REPRESENTATIVES IN FISCAL YEAR 2011 THERE WERE NO DIRECT EXPENSES RELATING TO THESE ACTIVITIES

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
YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF YORK PA

Employer identification number
23-1360889

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)
- ☐ Preservation of an historically importantly land area
- ☐ Protection of natural habitat
- ☐ Preservation of a certified historic structure
- ☐ Preservation of open space

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

			Held at the End of the Year
a	Total number of conservation easements	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	499,674	426,398	398,486		
b Contributions					
c Investment earnings or losses	-7,322	107,384	60,079		
d Grants or scholarships					
e Other expenditures for facilities and programs	24,764	28,697	27,282		
f Administrative expenses	2,702	5,411	4,885		
g End of year balance	464,886	499,674	426,398		

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

a Board designated or quasi-endowment ▶ 100 000 %

b Permanent endowment ▶ 0 %

c Term endowment ▶ 0 %

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

		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		189,566		189,566
b Buildings		10,902,388	2,905,925	7,996,463
c Leasehold improvements				
d Equipment		910,763	642,549	268,214
e Other		91,188	66,398	24,790
Total. Add lines 1a-1e *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)* ▶				8,479,033

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		
Other		
Total. *(Column (b) should equal Form 990, Part X, col (B) line 12)* ▶		

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	
Total. *(Column (b) should equal Form 990, Part X, col (B) line 25)* ▶	

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	7,564,227
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	6,918,027
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	646,200
4	Net unrealized gains (losses) on investments	4	-337
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-96,342
9	Total adjustments (net) Add lines 4 - 8	9	-96,679
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	549,521

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	7,467,548
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	-337		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d	-96,342		
e	Add lines **2a** through **2d**			2e	-96,679
3	Subtract line **2e** from line **1**			3	7,564,227
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
c	Add lines **4a** and **4b**			4c	0
5	Total Revenue Add lines **3** and **4c.** (This should equal Form 990, Part I, line 12)			5	7,564,227

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

1	Total expenses and losses per audited financial statements			1	6,918,027
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines **2a** through **2d**			2e	0
3	Subtract line **2e** from line **1**			3	6,918,027
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
c	Add lines **4a** and **4b**			4c	0
5	Total expenses Add lines **3** and **4c.** (This should equal Form 990, Part I, line 18)			5	6,918,027

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	AFTER-SCHOOL PROGRAM WHERE PARTICIPANTS IN GRADES 9-12 FULFILL DAILY REQUIREMENTS AND EARN FINANCIAL INCENTIVES TO HELP FUND CONTINUING EDUCATION AND THE EXPENSES ASSOCIATED WITH HIGHER EDUCATION AMOUNTS EARNED ARE MAINTAINED IN A SEPARATE ACCOUNT
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA REQUIRE MANAGEMENT TO EVALUATE TAX POSITIONS TAKEN BY THE ASSOCIATION, INCLUDING WHETHER THE ENTITY IS EXEMPT FROM INCOME TAXES MANAGEMENT EVALUATED THE TAX POSITIONS TAKEN AND CONCLUDED THAT THE ASSOCIATION HAS TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS THEREFORE, NO PROVISION OR LIABILITY FOR INCOME TAXES HAS BEEN INCLUDED IN THE FINANCIAL STATEMENTS WITH FEW EXCEPTIONS, THE ASSOCIATION IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY THE U S FEDERAL, STATE, OR LOCAL TAX AUTHORITIES FOR YEARS BEFORE JUNE 30, 2009
PART XI, LINE 8 - OTHER ADJUSTMENTS		CHANGE IN VALUE OF PERPETUAL TRUSTS -28,997 CHANGE IN INTEREST OF A COMMUNITY FOUNDATION - 34,788 GAAP TO TAX PRESENTATION DIFFERENCE - 32,557 TOTAL TO SCHEDULE D, PART XI, LINE 8 -96,342
PART XII, LINE 2D - OTHER ADJUSTMENTS		CHANGE IN NET ASSETS OF COMMUNITY FOUNDATION - 34,788 CHANGE IN VALUE OF PERPETUAL TRUSTS - 28,997 GAAP TO TAX PRESENTATION DIFFERENCE - 32,557

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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
YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF YORK PA

Employer identification number
23-1360889

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 WALK-A-MILE (event type)	(b) Event #2 Y-TRIATHLON (event type)	(c) Other Events 4 (total number)	(d) Total Events (Add col (a) through col (c))
Revenue	1	Gross receipts	38,732	25,150	40,825	104,707
	2	Less Charitable contributions	36,932	22,450	32,575	91,957
	3	Gross income (line 1 minus line 2)	1,800	2,700	8,250	12,750
Direct Expenses	4	Cash prizes				
	5	Non-cash prizes	47	6,228	2,715	8,990
	6	Rent/facility costs		4,498	1,074	5,572
	7	Food and beverages			3,146	3,146
	8	Entertainment	4,993			4,993
	9	Other direct expenses	3,344	1,918	7,671	12,933
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶				(35,634)
	11	Net income summary Combine lines 3 and 10 in column (d). ▶				-22,884

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
YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF YORK PA

Employer identification number
23-1360889

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

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

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

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) REDUCED FEES FOR FITNESS CENTER, AQUATIC AND CHILD CARE PROGRAMS BASED UPON INCOME GUIDELINES	351	127,511		BASED ON 50% FEE REDUCTION	
(2) FUNDS SPENT TO RELOCATE CLIENTS WHO ARE VICTIMS OF DOMESTIC VIOLENCE AND ARE NOT SAFE IN THE YORK AREA	68	25,398		FMV	
(3) EXPENSES NEEDED TO ASSIST THE DOMESTIC VIOLENCE CLIENT THAT HAS LEFT THEIR HOME IN AN EMERGENCY (I E CLOTHING, TOILETRIES, MEDICATIONS, ESSENTIALLY ANYTHING THEY NEED THAT HAD TO BE LEFT BEHIND)	325	3,441		FMV	

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 THE ORGANIZATION REDUCES THEIR FEES FOR THE PROGRAM, THE INDIVIDUAL RECEIVING THE ASSISTANCE DOES NOT RECIEVE THE FUNDS DIRECTLY

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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
YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF YORK PA

Employer identification number
23-1360889

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 ☐ Travel for companions ☐ Tax idemnification and gross-up payments ☐ Discretionary spending account ☐ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☐ Health or social club dues or initiation fees ☐ Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain	**1b**		No
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	**2**		No
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply ☑ Compensation committee ☐ Independent compensation consultant ☑ Form 990 of other organizations ☐ Written employment contract ☑ Compensation survey or study ☑ 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) DEBRA STOCK	(i)	147,906	0	15,000	14,791	4,071	181,768	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	THE CEO SUBMITS ALL TRAVEL EXPENSES DIRECTLY TO THE NATIONAL YWCA AND THEY ARE REIMBURSED DIRECTLY ON AN AS NEEDED BASIS - IF IT IS A NATIONAL EVENT OR REQUIRED MEETING FOR NATIONAL BOARD CHAIR EXPENSES PAID FOR BY THE YWCA YORK ARE SOLELY MEETINGS AND EXPENSES TO MEET LOCAL CEO REQUIREMENTS THOSE EXPENSES ARE SUBMITTED TO THE YWCA YORK AND PAID TO THE CEO DIRECTLY ON AN AS NEEDED BASIS

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SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

NonCash Contributions

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

OMB No 1545-0047

2011

Open to Public Inspection

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

Employer identification number
23-1360889

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 . .				
7 Boats and planes				
8 Intellectual property . . .				
9 Securities—Publicly traded .	X	2	14,668	FMV OF STOCK
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 ▶ (PROGRAM COSTS)	X	13	54,094	FMV DETERMINED BY DONOR
26 Other ▶( )				
27 Other ▶( )				
28 Other ▶ ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . .	29	0

		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)	CONTRIBUTIONS REPORTED ARE BASED ON THE NUMBER OF CONTRIBUTIONS RECEIVED

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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
YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF YORK PA

Employer identification number
23-1360889

Identifier	Return Reference	Explanation
	FORM 990, PART V, LINE 1C	THE ORGANIZATION DID NOT HAVE ANY INSTANCES WHERE BACKUP WITHHOLDING WAS REQUIRED, HOWEVER, IF THE SITUATION WOULD ARISE, THE ORGANIZATION IS AWARE OF THE REPORTING REQUIREMENTS AND WOULD HANDLE THAT ACCORDINGLY
	FORM 990, PART VI, SECTION A, LINE 6	THERE ARE NOT CLASSES OF MEMBERS, ALL MEMBERS HAVE THE SAME RIGHTS MEMBERS DO NOT RECEIVE A SHARE OF THE ORGANIZATIONS PROFITS OR EXCESS DUES, NOR ARE THEY ENTITLED TO A SHARE OF THE ORGANIZATIONS ASSETS UPON DISSOLUTION
	FORM 990, PART VI, SECTION A, LINE 7A	THE MEMBERS ARE ENTITLED TO ATTEND THE ANNUAL MEETING AND VOTE FOR THE BOARD MEMBERS
	FORM 990, PART VI, SECTION B, LINE 11	THE REVIEW WILL BE CONDUCTED BY THE BOARD TREASURER THE BOARD TREASURER WILL DISTRIBUTE A DRAFT COPY OF THE 990 RETURN VIA EMAIL AS SOON AS IT IS AVAILABLE AND READY OPPORTUNITY WILL BE GIVEN TO THE BOARD TO ASK QUESTIONS AND PROVIDE FEEDBACK ALL FEEDBACK WILL BE CONSIDERED AND ADDRESSED BEFORE THE FINAL 990 RETURN IS COMPLETED AND SUBMITTED
	FORM 990, PART VI, SECTION B, LINE 12C	THE ORGANIZATION'S EMPLOYEE HANDBOOK OUTLINES A CONFLICT OF INTEREST POLICY FOR BOTH EMPLOYEES AND BOARD MEMBERS IN THE EVENT AN EMPLOYEE FEELS THAT A CONFLICT OF INTEREST MAY EXIST, THE EMPLOYEE HANDBOOK REQUIRES FULL DISCLOSURE OF THE CONFLICT TO THE CEO OR HIS/HER DESIGNEE IF A CONFLICT OF INTEREST IS FOUND TO EXIST, THE SITUATION WILL BE DISCUSSED AND CORRECTIVE ACTION TO ELIMINATE THE CONFLICT OF INTEREST WILL BE TAKEN BY EITHER THE EMPLOYEE OR THE YWCA BOARD MEMBERS ARE REQUIRED TO REVIEW THE CONFLICT OF INTEREST POLICY AND SIGN THE CONFLICT OF INTEREST DISCLOSURE STATEMENT ANNUALLY SHOULD A CONFLICT OF INTEREST EXIST WITH A BOARD MEMBER, THEY WOULD BE PROHIBITED FROM VOTING ON SUCH MATTERS RELATED TO THE CONFLICT BOARD MEMBERS MUST ALSO DISCLOSE FULLY THE NATURE OF ANY POTENTIAL CONFLICT OF INTEREST, AND FAILURE TO DO SO WILL BE CAUSE FOR IMMEDIATE REMOVAL FROM THE BOARD OF DIRECTORS
	FORM 990, PART VI, SECTION B, LINE 15	THE YWCA PERSONNEL COMMITTEE AND THE DIRECTOR OF HUMAN RESOURCES MAINTAIN A PAY GRADE SCALE FOR THE ORGANIZATION WHICH INCLUDES COMPENSATION FOR THE CEO AND TOP MANAGEMENT POSITIONS VARIOUS SOURCES AND PARTNERS ARE USED TO DETERMINE AND ASSESS THE SALARY SCALE ANNUALLY INCLUDING PANO, PCADV, PCAR THE CEO IS FORMALLY REVIEWED ANNUALLY BY THE ORGANIZATION'S EXECUTIVE COMMITTEE WHICH INCLUDES A FULL BOARD SURVEY PROCESS THE PROCESS IS DOCUMENTED IN EXECUTIVE COMMITTEE MINUTES RECOMMENDATIONS FOR CEO SALARY ADJUSTMENTS ARE FORWARDED TO THE FULL BOARD FOR APPROVAL PRIOR TO IMPLEMENTATION
	FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES ITS FINANCIAL STATEMENTS AVAILABLE FOR PUBLIC INSPECTION ON ITS WEBSITE THE CONFLICT OF INTEREST POLICY AND GOVERNING DOCUMENTS ARE MADE AVAILABLE UPON REQUEST
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -337 CHANGE IN VALUE OF PERPETUAL TRUSTS -28,997 CHANGE IN INTEREST OF A COMMUNITY FOUNDATION -34,788 GAAP TO TAX PRESENTATION DIFFERENCE -32,557 TOTAL TO FORM 990, PART XI, LINE 5 -96,679
	FORM 990, PART XII, LINE 2C	EVERY THREE YEARS FORMAL REQUESTS FOR PROPOSAL LETTERS ARE SUBMITTED TO INTERESTED ACCOUNTING FIRMS PROPOSALS ARE RECEIVED AND REVIEWED BY THE FINANCE COMMITTEE A DECISION IS MADE BASED UPON THE SCOPE OF WORK, THE AMOUNT OF FEES, AND THE QUALIFICATIONS OF THE FIRM THE FINANCE COMMITTEE HAS RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR

Additional Data

Software ID:
Software Version:
EIN: 23-1360889
Name: YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF YORK PA

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

4d. Other program services

(Code) (Expenses $ 431,311 including grants of $) (Revenue $ 66,531)

COMMUNITY INITIATIVES OUR COMMUNITY RENAISSANCE PROJECT, ALSO KNOWN AS THE ELM STREET PROJECT, SEEKS TO IMPROVE THE SOCIAL, ECONOMIC AND PHYSICAL CONDITIONS IN THE OLDE TOWNE EAST NEIGHBORHOOD, AN 18-BLOCK NEIGHBORHOOD JUST EAST OF DOWNTOWN YORK THE LONG-TERM GOAL IS TO IMPROVE THE QUALITY OF LIFE FOR THOSE LIVING AND WORKING IN THE NEIGHBORHOOD PARTNERING WITH LOCAL ASSOCIATIONS, THE CITY OF YORK, YORK COUNTY, AND COMMONWEALTH AGENCIES, AND SEVERAL BANKS AND OTHER PRIVATE FOUNDATIONS, YWCA YORK HAS WORKED FOR A DECADE TO PROMOTE HOMEOWNERSHIP AND SUSTAINABLE ECONOMIC DEVELOPMENT IN THE NEIGHBORHOOD THE MISSION OF THE COMMUNITY RENAISSANCE PROJECT IS TO WORK TOGETHER TO PROMOTE AND SUSTAIN A CLEAN, ATTRACTIVE, AND RESPECTFUL COMMUNITY WHERE THOSE DESIRING A SAFE AND COMFORTABLE HOME FEEL WELCOME FISCAL YEAR 2011-2012 ACCOMPLISHMENTS * INVESTED APPROXIMATELY $8 6 MILLION IN INFRASTRUCTURE AND HOUSING IMPROVEMENTS SINCE THE PROGRAM'S INCEPTION * IN WORKING WITH COMMUNITY SERVICE DIVISION OF YORK CITY POLICY DEPARTMENT, A BLOCK WATCH PROGRAM WITHIN OLD TOWNE EAST WAS ESTABLISHED * THE OVERALL CRIME RATE FROM 2006 TO 2011, HAS DECREASED BY 46 0% AND THE RATE OF VIOLENT AND PROPERTY CRIMES HAS REDUCED BY 70% * THE MEDIAN HOME LISTING PRICE IN OLDE TOWNE EAST IS DOUBLE THAT OF THE REST OF THE CITY * HOSTED FAMILY-ORIENTED EVENTS FOCUSED ON SAFETY AND COMMUNITY PARTNERSHIPS (EX NATIONAL NIGHT OUT, AN ICE CREAM FESTIVAL, AN EASTER EGG HUNT, ETC) * COORDINATED 3 NEIGHBORHOOD BLOCK CLEAN-UPS