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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 09-01-2011 and ending 08-31-2012

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

C Name of organization
YOUNG MENS CHRISTIAN ASSOCIATION OF GREATER NASHUA

Doing Business As

Number and street (or P O box if mail is not delivered to street address) | Room/suite
6 HENRY CLAY DRIVE

City or town, state or country, and ZIP + 4
MERRIMACK, NH 03054

D Employer identification number
02-0222250

E Telephone number
(603) 598-1533

G Gross receipts $ 8,286,656

F Name and address of principal officer
MIKE LACHANCE
6 HENRY CLAY DRIVE
MERRIMACK,NH 03054

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 NMYMCA ORG

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

L Year of formation 1887

M State of legal domicile NH

Part I Summary

1 Briefly describe the organization's mission or most significant activities
THE MISSION OF THE YMCA OF GREATER NASHUA IS TO INSTILL VALUES AND PROVIDE OPPORTUNITIES FOR LIFELONG PERSONAL GROWTH AND DEVELOPMENT OF A HEALTHY SPIRIT, MIND, AND BODY FOR ALL WE HAVE THREE AREAS OF FOCUS 1) YOUTH DEVELOPMENT - NURTURING THE POTENTIAL OF EVERY CHILD AND TEEN 2) HEALTHY LIVING - IMPROVING THE NATION'S HEALTH AND WELL-BEING 3) SOCIAL RESPONSIBILITY - GIVING BACK AND PROVIDING SUPPORT FOR OUR NEIGHBORS DURING THE YEAR ENDING AUGUST 31, 2012, THE YMCA OF GREATER NASHUA SERVED 27,890 PEOPLE INCLUDING 10,000 CHILDREN, 15,890 ADULTS AND 2,000 SENIORS OVER 300 PROGRAMS AND SERVICES ARE OFFERED ANNUALLY TO ENGAGE THOSE OF ALL AGES AND ABILITIES IN ACTIVITIES THAT PROMOTE GOOD HEALTH, STRONG FAMILIES, YOUTH LEADERSHIP AND COMMUNITY DEVELOPMENTTHE YMCA IS OPEN TO EVERY MEMBER OF THE COMMUNITY, REGARDLESS OF THE ABILITY TO PAY FINANCIAL ASSISTANCE IS AVAILABLE FOR THOSE WHO CANNOT AFFORD TO PAY THE FULL COST OF ANY PROGRAM OR SERVICE

Activities & Governance

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**	22
4	Number of independent voting members of the governing body (Part VI, line 1b)	**4**	22
5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)	**5**	412
6	Total number of volunteers (estimate if necessary)	**6**	492
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)	3,960,140	4,431,424
9	Program service revenue (Part VIII, line 2g)	2,519,469	2,977,074
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	209,585	50,343
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	191,947	219,758
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	6,881,141	7,678,599
Expenses			
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	0	453,199
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)	3,288,587	4,116,464
16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b	Total fundraising expenses (Part IX, column (D), line 25) ▶189,690		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	2,828,169	2,935,635
18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	6,116,756	7,505,298
19	Revenue less expenses Subtract line 18 from line 12	764,385	173,301
Net Assets or Fund Balances		**Beginning of Current Year**	**End of Year**
20	Total assets (Part X, line 16)	17,101,235	15,749,875
21	Total liabilities (Part X, line 26)	8,506,364	7,615,821
22	Net assets or fund balances Subtract line 21 from line 20	8,594,871	8,134,054

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

****** | 2013-02-19
Signature of officer | Date

RICHARD OLSON CFO
Type or print name and title

Paid Preparer's Use Only

Preparer's signature	Date	Check if self-employed	Preparer's taxpayer identification number (see instructions)
LANCE R TURGEON		☐	P00627708

Firm's name (or yours if self-employed), address, and ZIP + 4
HOWE RILEY & HOWE PLLC
660 CHESTNUT STREET
MANCHESTER, NH 031043500

EIN ▶ 20-3985821

Phone no ▶ (603) 627-3838

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 MISSION OF THE YMCA OF GREATER NASHUA IS TO INSTILL VALUES AND PROVIDE OPPORTUNITIES FOR LIFELONG PERSONAL GROWTH AND DEVELOPMENT OF A HEALTHY SPIRIT, MIND, AND BODY FOR ALL WE HAVE THREE AREAS OF FOCUS 1) YOUTH DEVELOPMENT - NURTURING THE POTENTIAL OF EVERY CHILD AND TEEN 2) HEALTHY LIVING - IMPROVING THE NATION'S HEALTH AND WELL-BEING 3) SOCIAL RESPONSIBILITY - GIVING BACK AND PROVIDING SUPPORT FOR OUR NEIGHBORS THE YMCA IS OPEN TO EVERY MEMBER OF THE COMMUNITY, REGARDLESS OF THE ABILITY TO PAY FINANCIAL ASSISTANCE IS AVAILABLE FOR THOSE WHO CANNOT AFFORD TO PAY THE FULL COST OF ANY PROGRAM OR SERVICE

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 $ 3,105,530 including grants of $ 204,893) (Revenue $ 1,316,300)

CHILD CARE - WE ARE ONE OF THE LARGEST PROVIDERS OF AFFORDABLE CHILD CARE IN THE GREATER NASHUA COMMUNITY A COMMUNITY NEEDS ASSESSMENT CONDUCTED BY THE UNITED WAY OF GREATER NASHUA SHOWED THAT AFFORDABLE CHILD CARE WAS VIEWED BY 74% OF HUMAN SERVICE PROVIDERS AS A "MAJOR PROBLEM " THE CENTRAL FOCUS OF ALL YMCA CHILD CARE PROGRAMS IS TO FOSTER GROWTH AND DEVELOPMENT, NOT ONLY IN CHILDREN BUT ALSO IN THEIR PARENTS AND FAMILIES APPROXIMATELY 139 CHILDREN WERE ENROLLED IN THE MERRIMACK YMCA'S FULLTIME LICENSED CHILD CARE, FULL AND PART-TIME PRESCHOOL AND KINDERGARTEN PROGRAMS DURING THE 2011-12 SCHOOL YEAR THESE PROGRAMS EXPOSE CHILDREN TO A VARIETY OF ASSET-BUILDING PROGRAMS AS WELL AS ENRICHMENT PROGRAMS AN ADDITIONAL 237 CHILDREN WERE ENROLLED IN SCHOOL'S OUT AFTERSCHOOL PROGRAMS AT THE MERRIMACK AND NASHUA YMCAS DURING THE 11/12 SCHOOL YEAR DAILY ACTIVITIES FOR SCHOOL'S OUT PARTICIPANTS INCLUDE ARTS AND CRAFTS, GROUP GAMES, SPORTS, MUSIC, SWIMMING, FREE PLAY, AND HOMEWORK TIME THESE EDUCATIONAL PROGRAMS HELP KIDS DEVELOP MORAL AND ETHICAL BEHAVIOR, SELF-ESTEEM, AND LEADERSHIP PARENTS PLAY AN IMPORTANT ROLE IN POLICY AND PROGRAM DECISIONS TRANSPORTATION IS PROVIDED FROM ALL ELEMENTARY SCHOOLS IN THE AREA EACH DAY TO BOTH LOCATIONS THE MERRIMACK YMCA ALSO PROVIDES A BEFORE SCHOOL CARE PROGRAM WHICH INCLUDES BUSSING TO MERRIMACK SCHOOLS ON DAYS OFF FROM SCHOOL (VACATION, TEACHER SERVICE, SNOW DAYS, ETC) WHEN PARENTS STILL HAVE TO WORK, THE SCHOOL'S OUT PROGRAM RUNS ALL DAY FOR NO ADDITIONAL COST WITH THE EXCEPTIONS OF 5 MAJOR HOLIDAYS WHEN THE YMCA IS CLOSED IN MANY INSTANCES YMCA CHILD CARE ALLOWS PARENTS OF THE CHILDREN IN OUR PROGRAMS TO REMAIN GAINFULLY EMPLOYED, KNOWING THAT THEIR CHILDREN ARE THRIVING IN A SAFE, SUPPORTIVE ENVIRONMENT FOR PARENTS WHO CANNOT AFFORD THE FULL FEE, CARE IS PROVIDED ON A BELOW-COST BASIS THROUGH THE Y CARES FINANCIAL ASSISTANCE PROGRAM

4b (Code) (Expenses $ 1,279,848 including grants of $ 92,932) (Revenue $ 639,840)

YMCA DAY CAMP THE YMCA OF GREATER NASHUA SERVED LOCAL FAMILIES BY PROVIDING SUMMER CAMP EXPERIENCES TO HUNDREDS OF LOCAL CHILDREN SOME CAMPERS ATTEND ONE WEEK, WHILE OTHERS ATTEND ALL NINE WEEKS IN MANY INSTANCES CAMPING PROGRAMS SERVE AS CHILD CARE FOR PARENTS IN THE SUMMERTIME, ALLOWING THEM TO REMAIN GAINFULLY EMPLOYED ALL CAMP PROGRAMS ARE OFFERED ON A BELOW-COST BASIS TO PARENTS UNABLE TO AFFORD THE FULL FEE CAMP SARGENT IS LOCATED ON LAKE NATICOOK IN MERRIMACK AND HAS 13 CABINS, RECREATION HALL, NEWLY RENOVATED BATHROOMS, AN ARTS AND CRAFTS CABIN, A NEW PLAYGROUND, LARGE PAVILIONS, PLAYING FIELDS, AND BASKETBALL/VOLLEYBALL COURTS TRANSPORTATION TO AND FROM CAMP SARGENT IS PROVIDED ALONG WITH PRE AND POST CAMP DAY CARE THE SPECIAL INTEREST CAMPS BASED OUT OF THE MERRIMACK FACILITY (AGE 5 TO GRADE 8) ALL CAMPS INCLUDE RECREATIONAL SWIMMING, OUTSIDE PLAY, AND GROUP ACTIVITIES TO BALANCE THE CHILD'S DAY SPECIALTY CAMPS INCLUDE SPORTS (BASEBALL, BASKETBALL, SOCCER, SWIMMING, LACROSSE, TENNIS, FITNESS, CHEERLEADING), ARTS (CREATIVE, VISUAL, BALLET, TAP, JAZZ/HIP HOP, DANCE INTENSIVE, JUNIOR MUSIC), YOUNG EXPLORERS AND RECREATION CAMP IN EACH SPECIAL INTEREST CAMP, YOUTH ARE INVOLVED IN AGE AND SKILL APPROPRIATE ACTIVITIES, TAUGHT NEW TECHNIQUES AND ALLOWED TO EXPRESS THEMSELVES AND DEVELOP LEADERSHIP SKILLS THE YMCA'S DAY CAMPING PROGRAMS ARE EDUCATIONAL, THEY PROMOTE PHYSICAL ACTIVITY (INCLUDING SWIMMING AND BOATING), ARTS, EDUCATIONAL LESSONS, HANDS ON ACTIVITIES (INCLUDING WOODWORKING) AND A RESPECT AND UNDERSTANDING FOR THE ENVIRONMENT CAMPERS (AGES 5 TO GRADE 10) AT CAMP SARGENT ARE GROUPED BY AGE AND PARTICIPATE IN COED ACTIVITIES INCLUDING SWIMMING, BOATING AND CANOEING, ARCHERY, ARTS AND CRAFTS, SPORTS AND GAMES, AND OUTDOOR SKILLS SPECIAL EVENTS INCLUDE FAMILY NIGHTS AND THEME WEEKS THROUGH THESE ACTIVITIES AND THE USE OF NATURAL SURROUNDINGS, YMCA DAY CAMPING SEEKS TO HELP PARTICIPANTS ACHIEVE THEIR FULLEST POTENTIAL IN SPIRIT, MIND, AND BODY

4c (Code) (Expenses $ 1,219,852 including grants of $ 75,387) (Revenue $ 502,061)

YMCA AQUATICS YMCA AQUATIC PROGRAMS ARE PART OF THE YMCA'S OVERALL GOAL OF BUILDING HEALTHY SPIRIT, MIND, AND BODY THE AQUATIC DEPARTMENT CONTINUES TO BE A LEADER IN AQUATIC PROGRAMMING AND IN OFFERING A FULL RANGE OF PROGRAMS FOR ALL AGES ALONG WITH THE REGULAR PRESCHOOL AND GRADE SCHOOL SWIMMING PROGRAMS THE YMCA ALSO OFFERS AQUATIC EXERCISE (INCLUDING CLASSES SPECIFICALLY FOR SENIORS AND THOSE WITH ARTHRITIS), LIFE GUARDING, SCUBA, AND TIME FOR RECREATIONAL LAP SWIMMING WITH THE OPENING OF THE NEW NASHUA YMCA IN MAY 2011, THE NUMBERS OF KIDS ENROLLED IN SUMMER SWIM LESSONS TRIPLED OVER THE PRIOR YEAR IN ADDITION TO PROVIDING SPECIFIC SWIMMING AND WATER SAFETY SKILLS, YMCA AQUATICS PROMOTES GOOD HEALTH THROUGH REGULAR EXERCISE THE YMCA'S AQUATIC PROFESSIONALS ARE RECOGNIZED AS LEADERS IN THE AQUATIC FIELD AND SERVE AS TRAINERS FOR THE YMCA OF THE USA IN THIS REGION FOR NATIONAL AQUATIC CERTIFICATIONS THE YMCA'S AQUATIC PROGRAMS ARE OFFERED AT FEES AFFORDABLE TO THE COMMUNITY AT LARGE, WITH FINANCIAL ASSISTANCE FOR THOSE WHO CAN'T AFFORD THE FULL FEE ADDITIONALLY, THE YMCA OFFERS THE POOL, LIFEGUARDS AND INSTRUCTORS AT NO CHARGE TO GROUPS SUCH AS SPECIAL OLYMPICS, AREA AGENCY AND OTHERS WHO USE AQUA THERAPY WITH THEIR DISABLED CLIENTS

(Code) (Expenses $ 1,329,100 including grants of $ 79,987) (Revenue $ 645,883)

YOUTH, TEEN & FAMILY SERVICES YOUTH - THESE PROGRAMS PROMOTE AN APPRECIATION OF ONE'S OWN WORTH WHATEVER THE PROGRAM, THE FOCUS IS ON FULL AND EQUAL PARTICPATION OF ALL, EVERY CHILD PLAYS IN EVERY GAME LEAGUES ARE ORGANIZED ON THE BASIS OF SKILLS CLINICS WIN OR LOSE, YMCA YOUTH SPORTS PROGRAMS EMPHASIZE THE DEVELOPMENT OF SKILL, HEALTH AND FITNESS, SAFETY, COOPERATION, SELF-ESTEEM, AND RESPECT FOR OTHERS DANCE AND ARTS PROGRAMMING PLACES A STRONG IMPORTANCE ON SELF-ESTEEM TEENS - THESE PROGRAMS GIVE TEENS GOOD ROLE MODELS TO HELP THEM DEVELOP SELF ESTEEM AND GOOD VALUES, INCLUDING COOPERATION, RESPECT FOR THE BODY, GOOD CITIZENSHIP, AND A STRONG WORK ETHIC TEEN PROGRAMS INCLUDE *YMCA YOUTH AND GOVERNMENT - THE YMCA SPONSORS TEENAGERS FROM THE SURROUNDING COMMUNITIES IN THE STATE WIDE YMCA YOUTH AND GOVERNMENT MODEL LEGISLATIVE ASSEMBLY AT THE STATE HOUSE IN CONCORD THIS PROGRAM SERVES AS AN EXCELLENT TRAINING TOOL FOR FUTURE LEADERS *CHURCH BASKETBALL LEAGUE - THIS IS A TEEN BASKETBALL LEAGUE UTILIZING THE YMCA FACILITY EACH WEEK THE LEAGUE IS MADE UP OF THE CHURCHES FROM GREATER NASHUA TO PROVIDE COOPERATION AND FRIENDLY COMPETITION AMONGST THE CHURCHES *POLICE OFFICERS/TEEN LEAGUE - NASHUA POLICE OFFICERS PLAY PICK-UP BASKETBALL GAMES ON THEIR OWN TIME WITH LOCAL TEENS AT THE NASHUA YMCA ON A WEEKLY BASIS *EMPLOYMENT OPPORTUNITIES - EMPLOYMENT OPPORTUNITIES FOR HIGH SCHOOL STUDENTS ARE AVAILABLE IN AQUATICS, YOUTH SPORTS, CAMP, CUSTODIAL SERVICES, AND DESK RECEPTIONIST DUTIES FAMILY - THESE PROGRAMS HELP PEOPLE GROW AS RESPONSIBLE MEMBERS OF FAMILIES THEY PROVIDE CHILDREN AND THEIR PARENTS WITH ACTIVITIES THAT FOSTER UNDERSTANDING AND COMPANIONSHIP ACTIVITIES DURING THE YEAR SUCH AS HEALTHY KIDS DAY AND A HALLOWEEN PARTY HELP TO BRING GROUPS OF FAMILIES TOGETHER TO SUPPORT EACH OTHER PARENTS HAVE THE OPPORTUNITY TO LEARN FROM EACH OTHER AND FROM THEIR CHILDREN IN A NURTURING AND EDUCATIONAL ENVIRONMENT

4d Other program services (Describe in Schedule O)

(Expenses $ 1,329,100 including grants of $ 79,987) (Revenue $ 645,883)

4e Total program service expenses ▶ $ 6,934,330

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		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *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		No
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		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII.*	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX.*	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X.*	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X.*	11f	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)*

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**		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer questions 24b–24d and complete Schedule K. If "No," go to line 25*	**24a**	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	**24b**		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	**24c**		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	**24d**		No
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	**25a**		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	**25b**		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	**26**		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? *If "Yes," complete Schedule L, Part III*	**27**		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	**28a**		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	**28b**		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? *If "Yes," complete Schedule L, Part IV*	**28c**		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	**29**	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	**30**	Yes	
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**	7		
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**	412			
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	22		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	22		
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		Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?	8a		Yes	
b	Each committee with authority to act on behalf of the governing body?	8b		Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9			No

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

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

Section C. Disclosure

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

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 ▶

RICHARD OLSON
6 HENRY CLAY DR
MERRIMACK,NH 030544848
(603)598-1533

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) JAY MAIONA BOARD OF DIRECTROS - BOARD CHAIR/CVO	70	X						0	0	0
(2) DR MICHAEL CHOW BOARD OF DIRECTORS	60	X						0	0	0
(3) MARK COOKSON BOARD OF DIRECTORS	20	X						0	0	0
(4) DENIS DANCOES II VP - BOARD OF DIRECTORS	1 00	X						0	0	0
(5) KELLY DINOFF BOARD OF DIRECTORS	30	X						0	0	0
(6) NANCY EPSTEIN BOARD OF DIRECTORS	20	X						0	0	0
(7) JAY JACOBS BOARD OF DIRECTORS	20	X						0	0	0
(8) NORMAN KOSSAYDA BOARD OF DIRECTORS	10	X						0	0	0
(9) SURESH KUMAR BOARD OF DIRECTORS	30	X						0	0	0
(10) BRIAN LOGUE BOARD OF DIRECTORS	0 00	X						0	0	0
(11) DAVID MAHONEY BOARD OF DIRECTORS	20	X						0	0	0
(12) BETH GOLDBERG BOARD OF DIRECTORS	20	X						0	0	0
(13) JOHN MOKAS BOARD OF DIRECTORS - TREASURER	1 30	X						0	0	0
(14) ANDREA RILEY-ARNESEN BOARD OF DIRECTORS	50	X						0	0	0
(15) STEVE RUSSELL BOARD OF DIRECTORS	60	X						0	0	0
(16) MELISSA SEARS BOARD OF DIRECTORS	0 00	X						0	0	0
(17) CHAD TANGUAY BOARD OF DIRECTORS	20	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) 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			
(18) MICHAEL TRAMACK BOARD OF DIRECTORS	40	X						0	0	0
(19) TONY TREMBLAY BOARD OF DIRECTORS	60	X						0	0	0
(20) TIMOTHY VADNEY BOARD OF DIRECTORS	30	X						0	0	0
(21) ANDREA HEBERT BOARD OF DIRECTORS	20	X						0	0	0
(22) DANIEL OHLSON BOARD OF DIRECTORS	30	X						0	0	0
(23) RICHARD OLSON CFO	40 00			X				68,115	0	6,812
(24) MIKE LACHANCE PRESIDENT & CEO	40 00			X				102,308	0	10,231
1b Sub-Total . . . . . ▶										
c Total from continuation sheets to Part VII, Section A . . . . ▶										
d Total (add lines 1b and 1c) . . . . . ▶								170,423	0	17,043

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		No
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
HARVEY CONSTRUCTION 10 HARVEY ROAD BEDFORD, NH 03110	CONSTRUCTION - BUILDING	5,230,727
BANK OF AMERICA PO BOX 15796 WILMINGTON, DE 19886	VARIOUS EXPENSES-CREDIT CARD PROVIDER	107,736

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 ▶ 2

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				
	b	Membership dues	1b	4,004,271			
	c	Fundraising events	1c	4,472			
	d	Related organizations	1d				
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	422,681			
	g	Noncash contributions included in lines 1a-1f $ 41,986					
	h	**Total.** Add lines 1a-1f		4,431,424			
Program Service Revenue			Business Code				
	2a	CHILD CARE	611600	1,316,300	1,316,300		
	b	SUMMER CAMP	713940	639,840	639,840		
	c	AQUATICS PROGRAM	713940	502,061	502,061		
	d	ADULT FITNESS	713940	201,818	201,818		
	e	DANCE	713940	197,970	197,970		
	f	All other program service revenue		119,085	119,085		
	g	**Total.** Add lines 2a–2f		2,977,074			
	3	Investment income (including dividends, interest and other similar amounts)		64,187			64,187
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
			(i) Real	(ii) Personal			
	6a	Gross rents					
	b	Less rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss)					
			(i) Securities	(ii) Other			
	7a	Gross amount from sales of assets other than inventory	471,564				
	b	Less cost or other basis and sales expenses	485,408				
	c	Gain or (loss)	-13,844				
	d	Net gain or (loss)		-13,844			-13,844
Other Revenue	8a	Gross income from fundraising events (not including $ 4,472 of contributions reported on line 1c) See Part IV, line 18	a 129,229				
	b	Less direct expenses	b 95,245				
	c	Net income or (loss) from fundraising events		33,984			33,984
	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 86,168				
	b	Less cost of goods sold	b 27,404				
	c	Net income or (loss) from sales of inventory		58,764			58,764
		Miscellaneous Revenue	Business Code				
	11a	MISCELLANEOUS	900099	127,010	127,010		
	b						
	c						
	d	All other revenue					
	e	**Total.** Add lines 11a–11d		127,010			
	12	**Total revenue.** See Instructions		7,678,599	3,104,084	0	143,091

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	453,199	453,199		
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	197,071	86,078	47,116	63,877
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	3,229,659	3,087,782	32,568	109,309
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	199,267	182,909	11,165	5,193
9	Other employee benefits	161,557	153,408	8,149	
10	Payroll taxes	328,910	308,536	13,381	6,993
11	Fees for services (non-employees)				
a	Management				
b	Legal	1,897	1,659	238	
c	Accounting	7,575	6,624	951	
d	Lobbying				
e	Professional fundraising *See Part IV, line 17* . .				
f	Investment management fees	10,659		10,659	
g	Other	183,794	169,334	13,400	1,060
12	Advertising and promotion	86,549	75,689	10,860	
13	Office expenses	23,223	20,347	2,876	
14	Information technology	125,870	110,073	15,797	
15	Royalties . .				
16	Occupancy	665,613	584,390	81,223	
17	Travel	140,269	136,866	3,303	100
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	9,710	8,369	1,166	175
20	Interest	325,659	284,797	40,862	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	634,072	625,135	8,937	
23	Insurance	71,400	62,441	8,959	
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	SUPPLIES	434,498	395,767	36,448	2,283
b	DUES & MEMBERSHIPS	83,020	76,847	6,173	0
c	NON-CAPITALIZED PURCHAS	14,547	12,722	1,825	0
d					
e					
f	All other expenses	117,280	91,358	25,222	700
25	**Total functional expenses.** Add lines 1 through 24f	7,505,298	6,934,330	381,278	189,690
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		2,296,764	1	1,506,740
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net		384,371	3	268,033
	4	Accounts receivable, net		11,184	4	450
	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			7	
	8	Inventories for sale or use		350	8	
	9	Prepaid expenses and deferred charges		63,566	9	114,556
	10a	Land, buildings, and equipment cost or other basis *Complete Part VI of Schedule D*	10a 15,270,624			
	b	Less accumulated depreciation	10b 3,866,731	11,858,207	10c	11,403,893
	11	Investments—publicly traded securities		2,384,850	11	2,456,203
	12	Investments—other securities See Part IV, line 11			12	
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		101,943	15	
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		17,101,235	16	15,749,875
Liabilities	17	Accounts payable and accrued expenses		147,049	17	123,119
	18	Grants payable			18	
	19	Deferred revenue		144,386	19	182,819
	20	Tax-exempt bond liabilities		7,871,654	20	6,263,339
	21	Escrow or custodial account liability *Complete Part IV of Schedule D*			21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons *Complete Part II of Schedule L*			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		343,275	25	1,046,544
	26	**Total liabilities.** Add lines 17 through 25		8,506,364	26	7,615,821
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		8,045,597	27	7,584,276
	28	Temporarily restricted net assets		48,030	28	48,534
	29	Permanently restricted net assets		501,244	29	501,244
		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		8,594,871	33	8,134,054
	34	Total liabilities and net assets/fund balances		17,101,235	34	15,749,875

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	7,678,599
2	Total expenses (must equal Part IX, column (A), line 25)	2	7,505,298
3	Revenue less expenses Subtract line 2 from line 1	3	173,301
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	8,594,871
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-634,118
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	8,134,054

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		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

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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 MENS CHRISTIAN ASSOCIATION OF GREATER NASHUA

Employer identification number
02-0222250

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

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

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

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

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

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

_____

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

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

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

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

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

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

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

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

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

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

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

	Yes	No
(i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization? **11g(i)**		
(ii) a family member of a person described in (i) above? **11g(ii)**		
(iii) a 35% controlled entity of a person described in (i) or (ii) above? **11g(iii)**		

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

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

Part II **Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public Support.** Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets						
11 **Total support** (Add lines 7 through 10)						

12 Gross receipts from related activities, etc (See instructions) **12**

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

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2011 (line 6 column (f) divided by line 11 column (f)) **14**

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

16a **33 1/3% support test—2011.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

b **33 1/3% support test—2010.** If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

17a **10%-facts-and-circumstances test—2011.** If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization

b **10%-facts-and-circumstances test—2010.** If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization

18 **Private Foundation** If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions

Part III **Support Schedule for Organizations Described in IRC 509(a)(2)**
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	3,362,932	3,727,362	3,696,204	3,960,140	4,384,966	19,131,604
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	2,553,793	2,435,902	2,456,966	2,519,469	2,977,074	12,943,204
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
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	5,916,725	6,163,264	6,153,170	6,479,609	7,362,040	32,074,808
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0
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						0
8 **Public Support** (Subtract line 7c from line 6)						32,074,808

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	5,916,725	6,163,264	6,153,170	6,479,609	7,362,040	32,074,808
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	174,031	88,168	57,494	293,222	185,512	798,427
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	174,031	88,168	57,494	293,222	185,512	798,427
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)						
13 **Total support** (Add lines 9, 10c, 11 and 12)	6,090,756	6,251,432	6,210,664	6,772,831	7,547,552	32,873,235

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	97 570 %
16	Public support percentage from 2010 Schedule A, Part III, line 15	16	98 090 %

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2011** (line 10c column (f) divided by line 13 column (f))	17	2 430 %
18	Investment income percentage from **2010** Schedule A, Part III, line 17	18	1 910 %

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

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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 MENS CHRISTIAN ASSOCIATION OF GREATER NASHUA

Employer identification number
02-0222250

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	2,384,850	2,226,565	2,184,111	2,557,983	
b Contributions					
c Investment earnings or losses	174,853	282,630	156,454	-263,472	
d Grants or scholarships					
e Other expenditures for facilities and programs	103,500	124,345	114,000	110,400	
f Administrative expenses					
g End of year balance	2,456,203	2,384,850	2,226,565	2,184,111	

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

- a Board designated or quasi-endowment ▶ 79 600 %
- b Permanent endowment ▶ 20 400 %
- c Term endowment ▶

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)		No
(ii) related organizations	3a(ii)		No
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

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

Part VI 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		281,649		281,649
b Buildings		13,252,928	2,633,808	10,619,120
c Leasehold improvements				
d Equipment				
e Other		1,736,047	1,232,923	503,124
Total. Add lines 1a-1e *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)* ▶				11,403,893

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	
CAPITAL LEASE OBLIGATION	277,257
FAIR VALUE OF INTEREST RATE SWAP	769,287
Total. *(Column (b) should equal Form 990, Part X, col (B) line 25)* ▶	1,046,544

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	7,678,599
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	7,505,298
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	173,301
4	Net unrealized gains (losses) on investments	4	135,169
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	-543,406
8	Other (Describe in Part XIV)	8	-225,881
9	Total adjustments (net) Add lines 4 - 8	9	-634,118
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-460,817

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	8,237,619
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	135,169		
b	Donated services and use of facilities	2b	370,592		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines **2a** through **2d**			2e	505,761
3	Subtract line **2e** from line **1**			3	7,731,858
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	-53,259		
c	Add lines **4a** and **4b**			4c	-53,259
5	Total Revenue Add lines **3** and **4c.** (This should equal Form 990, Part I, line 12)			5	7,678,599

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

1	Total expenses and losses per audited financial statements			1	7,929,149
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a	370,592		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIV)	2d	53,259		
e	Add lines **2a** through **2d**			2e	423,851
3	Subtract line **2e** from line **1**			3	7,505,298
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	7,505,298

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
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	THE DONOR DESIGNATED FUND'S INCOME IS TO BE USED FOR THE GENERAL PURPOSES OF THE ORGANIZATION THE BOARD DESIGNATED INVESTMENT FUND MAY BE USED AT THE BOARD'S DISCRETION AND IS NOT SUBJECT TO THE NEW HAMPSHIRE UNIFORM PRUDENT MANAGEMENT OF INSTITUTIONAL FUNDS ACT
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	THE YMCA IS A NONPROFIT CORPORATION EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE THE INTERNAL REVENUE SERVICE HAS DETERMINED THE YMCA TO BE OTHER THAN A PRIVATE FOUNDATION THE YMCA HAS ADOPTED THE ACCOUNTING GUIDANCE UNDER THE INCOME TAXES TOPIC OF THE FASB ASC THE GUIDANCE REQUIRES THE YMCA TO EVALUATE ITS TAX POSITIONS AND RECOGNIZE THE TAX BENEFIT FROM ANY UNCERTAIN TAX POSITIONS ONLY IF IT IS MORE LIKELY THAN NOT THAT THE TAX POSITION WOULD BE SUSTAINED UPON EXAMINATION BY TAXING AUTHORITIES BASED ON THE TECHNICAL MERIT OF THE POSITION IF THE YMCA TAKES A TAX POSITION THAT DOES NOT MEET THE CRITERIA FOR RECOGNITION UNDER THIS STANDARD, THE BENEFIT OF THAT POSITION, INCLUDING POTENTIAL INTEREST AND PENALTIES THEREON, MUST BE REFLECTED AS A LIABILITY IN THE FINANCIAL STATEMENTS UNTIL SUCH TIME AS THE POSITION MEETS THE CRITERIA FOR RECOGNITION THE RECOGNITION CRITERIA MAY BE MET THROUGH SUBSEQUENT EXAMINATION AND SETTLEMENT BY THE AUTHORITIES, PUBLICATION OF CASE LAW OR REGULATIONS SUPPORTING THE POSITION, OR EXPIRATION OF THE STATUTE OF LIMITATIONS AS OF AUGUST 31, 2012 AND 2011, THE YMCA HAS NOT TAKEN ANY SIGNIFICANT MATERIAL TAX POSITIONS WHICH DO NOT MEET THE CRITERIA FOR RECOGNITION THE YMCA REPORTS INTEREST AND PENALTY EXPENSE ON UNCERTAIN TAX POSITIONS AS PART OF OPERATING EXPENSES AS OF AUGUST 31, 2012 AND 2011, THERE WERE NO EXPENSES RELATED TO INTEREST OR PENALTIES ON UNCERTAIN TAX POSITIONS THE TAX YEAR OF THE YMCA ENDS ON AUGUST 31ST THE TAX FILINGS FOR THE TAX YEARS ENDING BEFORE AUGUST 31, 2009 ARE NO LONGER SUBJECT TO EXAMINATION BY FEDERAL AND STATE TAXING AUTHORITIES
PART XI, LINE 8 - OTHER ADJUSTMENTS		CHANGE IN VALUE OF INTEREST RATE SWAP AGREEMENT -225,881
PART XII, LINE 4B - OTHER ADJUSTMENTS		DIRECT FUNDRAISING EVENT EXPENSE -53,259
PART XIII, LINE 2D - OTHER ADJUSTMENTS		DIRECT FUNDRAISING EVENT EXPENSE 53,259

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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 MENS CHRISTIAN ASSOCIATION OF GREATER NASHUA

Employer identification number
02-0222250

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 AUCTION (event type)	(b) Event #2 Y-TRI (event type)	(c) Other Events 2 (total number)	(d) Total Events (Add col (a) through col (c))
Revenue	1 Gross receipts	65,002	35,105	33,594	133,701
	2 Less Charitable contributions	4,472			4,472
	3 Gross income (line 1 minus line 2)	60,530	35,105	33,594	129,229
Direct Expenses	4 Cash prizes				
	5 Non-cash prizes	41,986			41,986
	6 Rent/facility costs			11,498	11,498
	7 Food and beverages	6,839			6,839
	8 Entertainment	400			400
	9 Other direct expenses	6,353	21,258	6,911	34,522
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				(95,245)
	11 Net income summary Combine lines 3 and 10 in column (d) ▶				33,984

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 question on Schedule G (see instructions.)

Identifier	ReturnReference	Explanation

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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 MENS CHRISTIAN ASSOCIATION OF GREATER NASHUA

Employer identification number
02-0222250

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) FINANCIAL ASSISTANCE TO PARTICPATE IN THE YMCA PROGRAMS AT REDUCED COSTS	2200		453,199	BOOK VALUE OF PROGRAM DISCOUNTS,THOSE QUALIFYING FOR FINANCIAL ASSISTANCE	REDUCTION IN SERVICE PRICES

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 YMCA HAS A FORMAL PROCESS FOR FINANCIAL ASSISTANCE THE INDIVIDUAL WILL COMPLETE AN APPLICATION FOR FINANCIAL ASSISTANCE THE APPLICATION HAS THE YMCA CRITERIA FOR ELIGIBILITY TO RECEIVE FINANCIAL ASSISTANCE THE YMCA DIRECTORS WILL REVIEW THE APPLICATION FOR FINANCIAL ASSISTANCE IF APPROVED, FINANCIAL ASSISTANCE WILL BE GIVEN REPORTS CAN BE PRODUCED AT ANY TIME WHICH WILL SHOW THE AMOUNT OF FINANCIAL ASSISTANCE GIVEN AND TO WHOM IT WAS GIVEN

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Schedule K (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax Exempt Bonds

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

OMB No 1545-0047

2011

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Name of the organization
YOUNG MENS CHRISTIAN ASSOCIATION OF GREATER NASHUA

Employer identification number
02-0222250

Part I Bond Issues

	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Price	(f) Description of Purpose	(g) Defeased		(h) On Behalf of Issuer		(i) Pool financing	
							Yes	No	Yes	No	Yes	No
A	NEW HAMPSHIRE HEALTH AND EDUCATION FACILITIES AUTHORITY	02-0279866		05-19-2010	5,000,000	TO FUND NEW BUILDING		X		X		X
B	NEW HAMPSHIRE HEALTH AND EDUCATION FACILITIES AUTHORITY	02-0279866		05-19-2010	3,000,000	TO FUND NEW BUILDING		X		X		X

Part II Proceeds

		A	B	C	D
1	Amount of bonds retired	236,661	1,500,000		
2	Amount of bonds defeased				
3	Total proceeds of issue	5,016,595	3,009,957		
4	Gross proceeds in reserve funds				
5	Capitalized interest from proceeds				
6	Proceeds in refunding escrow				
7	Issuance costs from proceeds	57,997	34,798		
8	Credit enhancement from proceeds				
9	Working capital expenditures from proceeds				
10	Capital expenditures from proceeds	4,958,598	2,975,159		
11	Other spent proceeds				
12	Other unspent proceeds				
13	Year of substantial completion				

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

Part III Private Business Use

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

Part III Private Business Use *(Continued)*

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

Part IV Arbitrage

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		X		X				
2	Is the bond issue a variable rate issue?	X		X					
3a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?	X			X				
b	Name of provider	TD BANK							
c	Term of hedge	15 000000000000							
d	Was the hedge superintegrated?		X						
e	Was a hedge terminated?		X						
4a	Were gross proceeds invested in a GIC?		X		X				
b	Name of provider								
c	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
5	Were any gross proceeds invested beyond an available temporary period?		X		X				
6	Did the bond issue qualify for an exception to rebate?		X		X				

Part V Procedures To Undertake Corrective Action

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

Part VI Supplemental Information

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

Identifier	Return Reference	Explanation
SCHEDULE K PART II LINE 3	PROCEEDS OF BONDS	BOND A INCLUDES $16,959 OF EARNINGS ON ESCROW FUNDS DURING THE CONSTRUCTION PERIOD BOND B INCLUDES $9,957 OF EARNINGS ON ESCROW FUNDS DURING THE CONSTRUCTION PERIOD

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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

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Name of the organization
YOUNG MENS CHRISTIAN ASSOCIATION OF GREATER NASHUA

Employer identification number
02-0222250

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	X	1	150	NUMBER OF CONTRIBUTIONS
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				
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	X	5	715	NUMBER OF CONTRIBUTIONS
19	Food inventory	X	11	880	NUMBER OF CONTRIBUTIONS
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ► (RESTAURANT GIFT CERTIFICATES)	X	36	1,479	NUMBER OF CONTRIBUTIONS
26	Other ► (TRIP EXCURSIONS)	X	63	16,816	NUMBER OF CONTRIBUTIONS
27	Other ► (SPORTING EVENTS)	X	11	2,338	NUMBER OF CONTRIBUTIONS
28	Other ► (OTHER ITEMS)	X	99	19,608	NUMBER OF CONTRIBUTIONS

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

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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

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Name of the organization
YOUNG MENS CHRISTIAN ASSOCIATION OF GREATER NASHUA

Employer identification number
02-0222250

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 6	THE YMCA HAS MEMBERS WHO PAY DUES
	FORM 990, PART VI, SECTION A, LINE 7A	THERE IS AN ANNUAL MEETING HELD WHERE MEMBERS CAN VOICE OPINIONS
	FORM 990, PART VI, SECTION A, LINE 7B	MEMBERS VOTE AT THE ANNUAL MEETING
	FORM 990, PART VI, SECTION B, LINE 11	THE AUDIT COMMITTEE REVIEWS THE 990 AND IT IS APPROVED BY THE BOARD
	FORM 990, PART VI, SECTION B, LINE 12C	THE YMCA REGULARLY AND CONSISTENTLY MONITORS AND ENFORCES COMPLIANCE WITH THE CONFLICTS OF INTEREST POLICY WITH THE USE OF THE AUDITORS ANNUAL CIRCULATION OF A QUESTIONNAIRE TO THE BOARD MEMBERS AND SENIOR STAFF WHICH INCLUDES QUESTIONS REGARDING ANY CONFLICTS OF INTEREST IN ADDITION, THE MARKETING DIRECTOR/CEO REVIEWS ALL CONTRACTS WITH BOARD MEMBERS AND SENIOR STAFF TO SEE IF ANY TRANSACTIONS FALL UNDER THE CONFLICT OF INTEREST POLICY THIS PROCEDURE IS COMPLETED ONCE A YEAR
	FORM 990, PART VI, SECTION B, LINE 15	THE BOARD MUST APPROVE THE BUDGET WHICH INCLUDES COMPENSATION FOR ALL LEVELS OF EMPLOYEES
	FORM 990, PART VI, SECTION C, LINE 19	THE YMCA MAKES AVAILABLE TO THE PUBLIC ALL DOCUMENTS, POLICIES, AND FINANCIAL STATEMENTS TO THOSE REQUESTING THEM IN ADDITION, THE YMCA PROVIDES FINANCIAL INFORMATION, DONOR INFORMATION AND COMMUNITY BENEFIT INFORMATION TO ALL ATTENDING THE ANNUAL MEETING THE YMCA ALSO PUBLISHES THE FORM 990 ON ITS WEBSITE THE MEMBERS' HANDBOOK OF RULES AND REGULATIONS ARE ALSO DISCLOSED ON THE WEBSITE
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED GAINS ON INVESTMENTS 135,169 PRIOR PERIOD ADJUSTMENTS -543,406 CHANGE IN VALUE OF INTEREST RATE SWAP AGREEMENT -225,881 TOTAL TO FORM 990, PART XI, LINE 5 -634,118
		THE YMCA HAS NOT CHANGED ITS OVERSIGHT PROCESS DURING THE YEAR

Additional Data

Software ID:

Software Version:

EIN: 02-0222250

Name: YOUNG MENS CHRISTIAN ASSOCIATION OF GREATER NASHUA

Form 990, Special Condition Description:

Special Condition Description

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

4d. Other program services

(Code) (Expenses $ 1,329,100 including grants of $ 79,987) (Revenue $ 645,883)

YOUTH, TEEN & FAMILY SERVICES YOUTH - THESE PROGRAMS PROMOTE AN APPRECIATION OF ONE'S OWN WORTH WHATEVER THE PROGRAM, THE FOCUS IS ON FULL AND EQUAL PARTICPATION OF ALL, EVERY CHILD PLAYS IN EVERY GAME LEAGUES ARE ORGANIZED ON THE BASIS OF SKILLS CLINICS WIN OR LOSE, YMCA YOUTH SPORTS PROGRAMS EMPHASIZE THE DEVELOPMENT OF SKILL, HEALTH AND FITNESS, SAFETY, COOPERATION, SELF-ESTEEM, AND RESPECT FOR OTHERS DANCE AND ARTS PROGRAMMING PLACES A STRONG IMPORTANCE ON SELF-ESTEEM TEENS - THESE PROGRAMS GIVE TEENS GOOD ROLE MODELS TO HELP THEM DEVELOP SELF ESTEEM AND GOOD VALUES, INCLUDING COOPERATION, RESPECT FOR THE BODY, GOOD CITIZENSHIP, AND A STRONG WORK ETHIC TEEN PROGRAMS INCLUDE *YMCA YOUTH AND GOVERNMENT - THE YMCA SPONSORS TEENAGERS FROM THE SURROUNDING COMMUNITIES IN THE STATE WIDE YMCA YOUTH AND GOVERNMENT MODEL LEGISLATIVE ASSEMBLY AT THE STATE HOUSE IN CONCORD THIS PROGRAM SERVES AS AN EXCELLENT TRAINING TOOL FOR FUTURE LEADERS *CHURCH BASKETBALL LEAGUE - THIS IS A TEEN BASKETBALL LEAGUE UTILIZING THE YMCA FACILITY EACH WEEK THE LEAGUE IS MADE UP OF THE CHURCHES FROM GREATER NASHUA TO PROVIDE COOPERATION AND FRIENDLY COMPETITION AMONGST THE CHURCHES *POLICE OFFICERS/TEEN LEAGUE - NASHUA POLICE OFFICERS PLAY PICK-UP BASKETBALL GAMES ON THEIR OWN TIME WITH LOCAL TEENS AT THE NASHUA YMCA ON A WEEKLY BASIS *EMPLOYMENT OPPORTUNITIES - EMPLOYMENT OPPORTUNITIES FOR HIGH SCHOOL STUDENTS ARE AVAILABLE IN AQUATICS, YOUTH SPORTS, CAMP, CUSTODIAL SERVICES, AND DESK RECEPTIONIST DUTIES FAMILY - THESE PROGRAMS HELP PEOPLE GROW AS RESPONSIBLE MEMBERS OF FAMILIES THEY PROVIDE CHILDREN AND THEIR PARENTS WITH ACTIVITIES THAT FOSTER UNDERSTANDING AND COMPANIONSHIP ACTIVITIES DURING THE YEAR SUCH AS HEALTHY KIDS DAY AND A HALLOWEEN PARTY HELP TO BRING GROUPS OF FAMILIES TOGETHER TO SUPPORT EACH OTHER PARENTS HAVE THE OPPORTUNITY TO LEARN FROM EACH OTHER AND FROM THEIR CHILDREN IN A NURTURING AND EDUCATIONAL ENVIRONMENT