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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
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A For the 2011 calendar year, or tax year beginning 09-01-2011 and ending 08-31-2012		
B Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization YOUNG MEN'S CHRISTIAN ASSOCIATION Doing Business As Number and street (or P O box if mail is not delivered to street address) Room/suite 5 NORTH NACHES AVE City or town, state or country, and ZIP + 4 YAKIMA, WA 98901	D Employer identification number 91-0568717 E Telephone number (509) 248-1202 G Gross receipts \$ 4,607,195
	F Name and address of principal officer BOB ROMERO 5 NORTH NACHES AVE YAKIMA, WA 98901	H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) H(c) Group exemption number ▶
	I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	
	J Website: ▶ WWW.YAKIMAYMCA.ORG	
	K Form of organization <input type="checkbox"/> Corporation <input type="checkbox"/> Trust <input checked="" type="checkbox"/> Association <input type="checkbox"/> Other ▶	L Year of formation 1906

Part I		Summary	
Activities & Governance	1 Briefly describe the organization's mission or most significant activities THE YAKIMA FAMILY YMCA SEEKS TO PUT CHRISTIAN PRINCIPLES INTO PRACTICE THROUGH PROGRAMS THAT BUILD A HEALTHY SPIRIT, MIND AND BODY FOR ALL		
	2 Check this box <input checked="" type="checkbox"/> 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	25
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	25
	5 Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	223
6 Total number of volunteers (estimate if necessary)	6	567	
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	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	479,199	454,836
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	3,095,782	2,818,229
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	114,930	91,100
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	31,991	1,069,930
		3,721,902	4,434,095
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	268,658	199,655
	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)	2,187,390	2,110,673
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b Total fundraising expenses (Part IX, column (D), line 25) <input checked="" type="checkbox"/> 76,353		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	1,422,361	1,435,114
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	3,878,409	3,745,442
	19 Revenue less expenses Subtract line 18 from line 12	-156,507	688,653
Net Assets or Fund Balances		Beginning of Current Year	End of Year
	20 Total assets (Part X, line 16)	8,803,069	9,861,399
	21 Total liabilities (Part X, line 26)	220,289	454,422
	22 Net assets or fund balances Subtract line 21 from line 20	8,582,780	9,406,977

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	***** Signature of officer	2013-04-08 Date		
	BOB ROMERO EXECUTIVE DIRECTOR Type or print name and title			
Paid Preparer's Use Only	Preparer's signature ▶ PAM CLEAVER	Date	Check if self-employed ▶ <input type="checkbox"/>	Preparer's taxpayer identification number (see instructions) P00022310
	Firm's name (or yours if self-employed), address, and ZIP + 4 ▶	MOSS ADAMS LLP PO BOX 22650 YAKIMA, WA 989072650		EIN ▶ 91-0189318
				Phone no ▶ (509) 248-7750
May the IRS discuss this return with the preparer shown above? (see instructions) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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 YAKIMA FAMILY YMCA SEEKS TO PUT CHRISTIAN PRINCIPLES INTO PRACTICE THROUGH PROGRAMS THAT BUILD HEALTHY SPIRIT, MIND AND BODY FOR ALL OUR MISSION STATEMENT IS BROUGHT TO LIFE THROUGH THE EFFORTS OF OUR PROFESSIONAL STAFF AND A GROUP OF COMMITTED VOLUNTEER LEADERS WHO PROVIDE THEIR TIME, TALENT AND TREASURE TO SERVE THE COMMUNITY WE WELCOME PEOPLE OF ALL FAITHS, RACES, ABILITIES, AGES AND INCOMES NO ONE IS TURNED AWAY FOR INABILITY TO PAY WE OFFER NUMEROUS PROGRAMS TO MEET COMMUNITY NEEDS, INCLUDING CAMPING, CHILD CARE, YOUTH SPORTS, YOUTH MENTORING, YOUTH OUTREACH, ADULT HEALTH AND FITNESS AND MANY MORE MEMBERSHIP IN THE YMCA HELPS FUND THE MANY SERVICES OUR ORGANIZATION PROVIDES TO THE COMMUNITY

2

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

☐ Yes

☒ No

If "Yes," describe these new services on Schedule O

3

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

☐ Yes

☒ No

If "Yes," describe these changes on Schedule O

4

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

4a

(Code) (Expenses \$ 940,819 including grants of \$) (Revenue \$ 1,707,915)

THE YAKIMA FAMILY YMCA STRIVES TO SERVE ITS COMMUNITY AS A "FOR IMPACT" ORGANIZATION THAT OFFERS A WIDE VARIETY OF EFFECTIVE PROGRAMS - AQUATICS OUR AQUATICS PROGRAM INCLUDES A VARIETY OF ACTIVITIES, LAP SWIM, WATER WALKING, AQUA ZUMBA, FAMILY SWIM, SWIM LESSONS, SWIM TEAM, WATER AEROBICS, ARTHRITIS CLASSES, LIFE GUARD TRAINING AND COMPETITIVE STROKE CLASSES OUR LEARN TO SWIM PROGRAM IS CONDUCTED EACH YEAR DURING SPRINK BREAK FOR LOCAL SCHOOLS IN PARTNERSHIP WITH SUNRISE ROTARY, THIS PROGRAM IS PROVIDED AT NO CHARGE TO ABOUT 440 PARTICIPANTS THE PROGRAM PROVIDES FREE SWIMMING LESSONS TO LOCAL YOUTH THIS PROGRAM GIVES YOUNG PEOPLE CONFIDENCE IN THE WATER, THE ABILITY TO SWIM AND INSTRUCTION IN WATER SAFETY GIVEN THE MANY IRRIGATION CANALS, UNPREDICTABLE RIVERS AND LAKES IN OUR COMMUNITY, THIS PROGRAM MEETS A NEED FOR PUBLIC EDUCATION IN WATER SAFETY - HEALTH & WELLNESS HEALTH & WELLNESS FEATURES MANY AEROBICS CLASSES DESIGNED FOR PEOPLE FROM YOUNG ADULT THROUGH SENIOR AGE GROUPS LEAGUES FOR BASKETBALL AND RACQUETBALL PROVIDE MANY OPPORTUNITIES FOR PARTICIPATORY RECREATION GROUP EXERCISE CLASSES PROVIDE MANY HEALTH AND SOCIAL BENEFITS FOR PARTICIPANTS DANCE, YOGA AND PILATES CLASSES ARE ALSO OFFERED THROUGH HEALTH & WELLNESS - GENERAL MEMBERSHIP GENERAL MEMBERSHIP AT THE YMCA GIVES PEOPLE ACCESS TO OUR FULL RANGE OF EQUIPMENT AND PROGRAMS FINANCIAL ASSISTANCE IS AVAILABLE TO THOSE WHO CANNOT AFFORD MEMBERSHIP FEES REVENUE FROM MEMBERSHIP HELPS FUND OTHER PROGRAMS AND OPERATIONS, INCLUDING YOUTH OUTREACH ACTIVITIES IN ADDITION TO FACILITY USE, WE ENCOURAGE MEMBER INVOLVEMENT MEMBERS MAKE UP OUR BOARD OF DIRECTORS AS WELL AS THE EIGHT COMMITTEES THAT HELP SHAPE OUR POLICIES AND OPERATION VOLUNTEER MEMBERS LEAD AND INFLUENCE THE OPERATION AND COMMUNITY INVOLVEMENT OF OUR YMCA SOME MEMBERS VOLUNTEER TO HELP RAISE FUNDS FOR OUR ANNUAL PARTNER WITH YOUTH CAMPAIGN MANY MEMBERS DONATE THEIR TIME AND TALENT TO MAKE THE YMCA A POSITIVE PLACE FOR OTHER MEMBERS AND THE COMMUNITY AT-LARGE APPROXIMATELY 12,000 PEOPLE SERVED

4b

(Code) (Expenses \$ 376,466 including grants of \$) (Revenue \$ 116,543)

CAMP DUDLEY CAMP DUDLEY IS A YMCA RESIDENT CAMP LOCATED ON 13 ACRES OF FOREST LAND THAT SURROUNDS CLEAR LAKE NEAR WHITE PASS CAMP DUDLEYS SIX WEEK SUMMER RESIDENT CAMP PROVIDES RECREATIONS, ENVIRONMENTAL EDUCATION AND TRAINING IN YMCA CORE VALUES TO ABOUT 400 KIDS AGES 8-15 YOUNG ADULTS, AGE 18 AND OLDER, ENJOY EMPLOYMENT AS COUNSELORS SPRING BREAK CAMP AND LEADERSHIP CAMP ALSO PROVIDE PERSONAL GROWTH OPPORTUNITIES FOR AREA YOUNGSTERS MANY OF THE YOUNG PEOPLE WHO ATTEND CAMP DUDLEY, DO SO AS A RESULT OF DONATED FUNDS TO OUR PARTNER WITH YOUTH CAMPAIGN AND OTHER FUNDRAISING EFFORTS CAMP DUDLEY IS OPEN YEAR ROUND FOR RENTAL AS A RETREAT CENTER

4c

(Code) (Expenses \$ 986,640 including grants of \$) (Revenue \$)

CHILD CARE SAFE, HIGH QUALITY AND AFFORDABLE PROGRAMS PROVIDE SERVICES THAT ALLOW PARENTS TO ATTEND SCHOOL OR WORK TO SUPPORT THEIR FAMILIES FULLY LICENSED INFANT, TODDLER, PRE-SCHOOL AND PRE-KINDER PROGRAMS OFFER VALUES-BASED EDUCATIONAL OPPORTUNITIES FOR YOUNGSTERS FROM AGES SIX WEEKS TO FIVE YEARS WE CONDUCT BEFORE AND AFTER SCHOOL ENRICHMENT (B A S E) PROGRAMS AT SIX LOCAL SCHOOLS BETWEEN CHILD CARE AND B A S E PROGRAMS, WE SERVE UP TO 250 KIDS PER DAY OUR SUMMER DAY CAMP PROGRAM SERVED OVER 120 KIDS PER DAY FROM JUNE THROUGH AUGUST SIMILAR CHILD CARE CAMPS ARE AVAILABLE DURING EXTENDED SCHOOL HOLIDAYS, PROVIDING A SAFE LEARNING AND RECREATIONAL ENVIRONMENT FOR CHILDREN WITH WORKING PARENTS PARTNER WITH YOUTH CAMPAIGN FUNDS DO HELP SUPPORT OUR CHILD CARE PROGRAMS

(Code) (Expenses \$ 694,016 including grants of \$) (Revenue \$ 121,172)

YOUTH SPORTS AND OUTREACH THIS CATEGORY ENCOMPASSES SEVERAL PROGRAMS THAT PROVIDE IMPORTANT YOUTH SERVICES TO OUR COMMUNITY THE EASTSIDE SPORTS PROGRAM SERVES APPROXIMATELY 700 KIDS EACH YEAR THESE ARE YOUNG PEOPLE WHO HAVE TRANSPORTATION, FAMILY AND FINANCIAL BARRIERS THAT KEEP THEM OUT OF TRADITIONAL LITTLE LEAGUE, YOUTH SOCCER AND AAU BASKETBALL PROGRAMS EASTSIDE SPORTS CREATES NEIGHBORHOOD SPORTS LEAGUES THAT REMOVE THOSE BARRIERS THERE IS NO COST TO PARTICIPATE THE PROGRAM IS OPERATED ENTIRELY WITH VOLUNTEER COACHES AND OFFICIALS OUR ASPIRE MENTORING PROGRAM GREW FROM UNDER TWENTY PAIRS OF MENTORS AND STUDENTS TO ABOUT 135 ADULTS SERVING AS ROLE MODELS FOR HIGH-RISK KIDS THIS PROGRAM PROVIDES HOPE AND DIRECTION TO KIDS WHO LACK POSITIVE ADULT INFLUENCE IN THEIR LIVES OUR DROP-IN YOUTH ROOM GIVES KIDS A SAFE PLACE TO MEET AND ENJOY FELLOWSHIP AND RECREATION IN COLLABORATION WITH YOUNG LIFE, OUR SATURDAY NIGHT LIVE PROGRAM HAS GROWN TO THE POINT THAT WE FREQUENTLY SURPASS 200 ATTENDEES EACH WEEK ITS A FREE SATURDAY EVENING PROGRAM FOR KIDS AGES 7-15 OUR FRIDAY MIDNIGHT MADNESS PROGRAM FOR HIGH SCHOOL STUDENTS SERVES ABOUT 65-70 HIGH SCHOOL YOUTH EACH WEEK C O R E IS A OUTDOOR RECREATION PROGRAM FOR MIDDLE SCHOOL STUDENTS THAT FEATURES A VALUES BASED CURRICULUM WITH THE ADDED ADVENTURE OF SNOWBOARDING, ROCK CLIMBING AND HIKING OUR YOUTH SPORTS PROGRAMS PROVIDE A FUN ENVIRONMENT WHERE HUNDREDS OF PARTICIPANTS DEVELOP FUNDAMENTAL SKILLS, EMBRACE SPORTSMANSHIP AND LEARN TO COMPETE IN BASKETBALL, SOCCER, WRESTLING, BASEBALL AND SOFTBALL COMBINED, THESE PROGRAMS SERVE APPROXIMATELY 3600 YOUNG PEOPLE MOST OF THESE PROGRAMS ARE SUPPORTED WITH FUNDS GENERATED THROUGH OUR ANNUAL PARTNER WITH YOUTH CAMPAIGN WITH SUPPORT FROM UNITED WAY FUNDS

4d

Other program services (Describe in Schedule O)

(Expenses \$ 694,016 including grants of \$) (Revenue \$ 121,172)

4e



















Total program service expenses

\$ 2,997,941

Form 990 (2011)

Part IV

Checklist of Required Schedules

		Yes	No	
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A.</i> 	1	Yes	
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (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? <i>If "Yes," complete Schedule C, Part I.</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? <i>If "Yes," complete Schedule C, Part II.</i> 	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III.</i> 	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? <i>If "Yes," complete Schedule D, Part I.</i> 	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II.</i> 	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III.</i> 	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV.</i> 	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V.</i> 	10	Yes	
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i> 	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII.</i> 	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII.</i> 	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX.</i> 	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i> 	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X.</i> 	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII.</i> 	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional.</i> 	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E.</i>	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Part I.</i>	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? <i>If "Yes," complete Schedule F, Part II and IV.</i>	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? <i>If "Yes," complete Schedule F, Part III and IV.</i>	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i>	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II.</i>	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III.</i>	19		No
20a	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H.</i>	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? 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? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		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? <i>If "Yes," answer questions 24b–24d and complete Schedule K. If "No," go to line 25</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	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? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34		No
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? 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 <input type="checkbox"/>			
		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. .	1a	14
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, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return.	2a	223
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	2b	Yes
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	25		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	25
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	No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes
13	Did the organization have a written whistleblower policy?	13	Yes
14	Did the organization have a written document retention and destruction policy?	14	Yes
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	15a	Yes
b	Other officers or key employees of the organization	15b	Yes
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	WA
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> 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.	BOB ROMERO YMCA 5 NORTH NACHES AVE YAKIMA, WA 98901 (509) 248-1202

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) TOMAS HOLBROOK PRESIDENT	10 00	X		X				0	0	0
(2) ALEX HODGE BOARD MEMBER	1 00	X						0	0	0
(3) JIM DWINELL BOARD MEMBER	1 00	X						0	0	0
(4) ELIZABETH MCGREE BOARD MEMBER	1 00	X						0	0	0
(5) KERRY STOUT BOARD MEMBER	1 00	X						0	0	0
(6) CHARLEY HANSES BOARD MEMBER	1 00	X						0	0	0
(7) DUSTIN YEAGER BOARD MEMBER	1 00	X						0	0	0
(8) ADAM DOLSEN BOARD MEMBER	1 00	X						0	0	0
(9) TYLER HINCKLEY BOARD MEMBER	1 00	X						0	0	0
(10) JENNIFER KING BOARD MEMBER	1 00	X						0	0	0
(11) GREG LOUDON TREASURER	2 00	X		X				0	0	0
(12) AMANDA MCKINEY BOARD MEMBER	1 00	X						0	0	0
(13) MARY JO PINNELL BOARD MEMBER	1 00	X						0	0	0
(14) MIKE SHINN BOARD MEMBER	1 00	X						0	0	0
(15) STEVE SUNDQUIST BOARD MEMBER	1 00	X						0	0	0
(16) JOHN KUPANOFF BOARD MEMBER	1 00	X						0	0	0
(17) SONIA TRUE-RODRIQUEZ BOARD MEMBER	1 00	X						0	0	0

Part VII

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) 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) PAUL STELZER BOARD MEMBER	1 00	X						0	0	0
(19) TOM FROULA VICE PRESIDENT	2 00	X		X				0	0	0
(20) BEN ANTONIO BOARD MEMBER	1 00	X						0	0	0
(21) PATTI BORCHARDT BOARD MEMBER	1 00	X						0	0	0
(22) MEL BRINK PRESIDENT-ELECT	2 00	X		X				0	0	0
(23) ERIC FRENZEL BOARD MEMBER	1 00	X						0	0	0
(24) CARL JETT BOARD MEMBER	1 00	X						0	0	0
(25) ORLIN KNUTSON BOARD MEMBER	1 00	X						0	0	0
(26) BOB ROMERO EXEC DIRECTOR/SECRETARY	40 00			X				80,417	0	18,964
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								80,417	0	18,964

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 0

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

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

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

Part VIII

Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a	171,100			
	b	Membership dues	1b				
	c	Fundraising events	1c	25,776			
	d	Related organizations	1d				
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	257,960			
	g	Noncash contributions included in lines 1a-1f \$ _____					
	h	Total. Add lines 1a-1f		454,836			
Program Service Revenue	2a	MEMBERSHIP DUES	Business Code 713940	1,390,187	1,390,187		
	b	CHILD CARE	624410	872,599			872,599
	c	PHYSICAL	713940	128,604	128,604		
	d	RESIDENT CAMP	713940	116,543	116,543		
	e	AQUATICS	713940	108,886	108,886		
	f	All other program service revenue		201,410	201,410		
	g	Total. Add lines 2a-2f		2,818,229			
	Other Revenue	3	Investment income (including dividends, interest and other similar amounts)		106,852		
4		Income from investment of tax-exempt bond proceeds . .					
5		Royalties					
6a		Gross rents	(i) Real (ii) Personal				
b		Less rental expenses					
c		Rental income or (loss)					
d		Net rental income or (loss)					
7a		Gross amount from sales of assets other than inventory	(i) Securities (ii) Other				
b		Less cost or other basis and sales expenses					
c		Gain or (loss)					
d		Net gain or (loss)		-15,752			-15,752
8a		Gross income from fundraising events (not including \$ 25,776 of contributions reported on line 1c) See Part IV, line 18	a	18,037			
b		Less direct expenses	b	9,259			
c		Net income or (loss) from fundraising events . .		8,778			8,778
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	27,831			
b		Less cost of goods sold	b	20,944			
c		Net income or (loss) from sales of inventory . .		6,887			6,887
Miscellaneous Revenue		Business Code					
11a	INSURANCE PROCEEDS	524126	1,044,352			1,044,352	
b	MISCELLANEOUS	713490	9,913			9,913	
c							
d	All other revenue						
e	Total. Add lines 11a-11d		1,054,265				
12	Total revenue. See Instructions		4,434,095	1,945,630	0	2,033,629	

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	199,655	199,655		
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	101,538		101,538	
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	1,577,371	1,181,384	378,529	17,458
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	77,621	49,391	26,967	1,263
9	Other employee benefits	161,001	89,582	68,200	3,219
10	Payroll taxes	193,142	86,452	104,951	1,739
11	Fees for services (non-employees)				
a	Management				
b	Legal				
c	Accounting	15,000		15,000	
d	Lobbying	1,668		1,668	
e	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses	374,742	222,576	141,299	10,867
14	Information technology				
15	Royalties				
16	Occupancy	565,953	108,360	457,593	
17	Travel	19,644	18,003	1,641	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	13,874	2,091	10,979	804
20	Interest				
21	Payments to affiliates	57,300	25,661	31,639	
22	Depreciation, depletion, and amortization	320,374	260,535	58,379	1,460
23	Insurance				
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	MISCELLANEOUS	50,058	37,904	3,553	8,601
b	BAD DEBT	11,286		10,384	902
c	BUILDING OVERHEAD ALLOC	0	465,533	-465,533	
d	MANAGEMENT EXP'S ALLOC	0	247,957	-277,997	30,040
e					
f	All other expenses	5,215	2,857	2,358	
25	Total functional expenses. Add lines 1 through 24f	3,745,442	2,997,941	671,148	76,353
26	Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X

Balance Sheet

						(A)		(B)
						Beginning of year		End of year
Assets	1	Cash—non-interest-bearing				4,854	1	3,986
	2	Savings and temporary cash investments				353,794	2	146,229
	3	Pledges and grants receivable, net				188,730	3	170,226
	4	Accounts receivable, net				32,049	4	360,451
	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				20,462	8	19,244
	9	Prepaid expenses and deferred charges				38,114	9	42,054
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	11,060,941				
	b	Less: accumulated depreciation	10b	6,177,402	4,072,440	10c	4,883,539	
	11	Investments—publicly traded securities				3,671,177	11	3,801,698
	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				421,449	15	433,972
	16	Total assets. Add lines 1 through 15 (must equal line 34)				8,803,069	16	9,861,399
Liabilities	17	Accounts payable and accrued expenses				205,710	17	442,933
	18	Grants payable					18	
	19	Deferred revenue				14,579	19	11,489
	20	Tax-exempt bond liabilities					20	
	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					25	
	26	Total liabilities. Add lines 17 through 25				220,289	26	454,422
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.							
	27	Unrestricted net assets				5,940,739	27	6,709,643
	28	Temporarily restricted net assets				760,914	28	803,871
	29	Permanently restricted net assets				1,881,127	29	1,893,463
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.							
	30	Capital stock or trust principal, or current funds					30	
	31	Paid-in or capital surplus, or land, building or equipment fund					31	
	32	Retained earnings, endowment, accumulated income, or other funds					32	
	33	Total net assets or fund balances				8,582,780	33	9,406,977
	34	Total liabilities and net assets/fund balances				8,803,069	34	9,861,399

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	4,434,095
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,745,442
3	Revenue less expenses Subtract line 2 from line 1	3	688,653
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	8,582,780
5	Other changes in net assets or fund balances (explain in Schedule O)	5	135,544
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	9,406,977

Part XII Financial Statements and Reporting

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

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

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization YOUNG MEN'S CHRISTIAN ASSOCIATION	Employer identification number 91-0568717
---	--

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?

(i)

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

(ii)

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

(iii)

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

h

☐

Provide the following information about the supported organization(s)

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

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

Part II

Support Schedule for Organizations Described in 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	(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	(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.")	660,760	1,458,800	860,600	479,199	454,836	3,914,195
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	1,732,472	1,795,121	1,949,799	2,082,365	1,945,630	9,505,387
3 Gross receipts from activities that are not an unrelated trade or business under section 513	814,867	853,216	948,832	1,013,417	872,599	4,502,931
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	3,208,099	4,107,137	3,759,231	3,574,981	3,273,065	17,922,513
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	23,497	22,362	23,030	15,506	13,387	97,782
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		965,609	261,602			1,227,211
c Add lines 7a and 7b	23,497	987,971	284,632	15,506	13,387	1,324,993
8 Public Support (Subtract line 7c from line 6)						16,597,520

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	3,208,099	4,107,137	3,759,231	3,574,981	3,273,065	17,922,513
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	195,257	150,362	72,419	109,007	106,852	633,897
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	195,257	150,362	72,419	109,007	106,852	633,897
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.)	35,699	60,630	51,399	60,014	275,936	483,678
13 Total support (Add lines 9, 10c, 11 and 12.)	3,439,055	4,318,129	3,883,049	3,744,002	3,655,853	19,040,088
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	<input type="checkbox"/>					

Section C. Computation of Public Support Percentage

15 Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f))	15	87.170 %
16 Public support percentage from 2010 Schedule A, Part III, line 15	16	94.380 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))	17	3.330 %
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18	3.850 %
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	<input checked="" type="checkbox"/>	
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	<input type="checkbox"/>	
20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions	<input type="checkbox"/>	

Part IV

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

Facts And Circumstances Test

Explanation
SCHEDULE A, PART II, LINE 12, EXPLANATION OF OTHER INCOME SALE OF INVENTORY MISCELLANEOUS REVENUE INSURANCE PROCEEDS GROSS FUNDRAISING INCOME

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ Complete if the organization is described below.

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

OMB No 1545-0047

2011

Open to Public Inspection

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

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

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

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

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

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

Name of the organization YOUNG MEN'S CHRISTIAN ASSOCIATION	Employer identification number 91-0568717
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1	Provide a description of the organization's direct and indirect political campaign activities on behalf of or in opposition to candidates for public office in Part IV	
2	Political expenditures	▶ \$
3	Volunteer hours	

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

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

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

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

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

Part II-A

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

- A
- Check
- ☐
- if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B
- Check
- ☐
- if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing Organization's Totals	(b) Affiliated Group Totals												
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)														
b	Total lobbying expenditures to influence a legislative body (direct lobbying)														
c	Total lobbying expenditures (add lines 1a and 1b)														
d	Other exempt purpose expenditures														
e	Total exempt purpose expenditures (add lines 1c and 1d)														
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table><tr><td>If the amount on line 1e, column (a) or (b) is:</td><td>The lobbying nontaxable amount is:</td></tr><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
g	Grassroots nontaxable amount (enter 25% of line 1f)														
h	Subtract line 1g from line 1a. If zero or less, enter -0-														
i	Subtract line 1f from line 1c. If zero or less, enter -0-														
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots non-taxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B

Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

		(a)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
	a Volunteers?		No	
	b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		No	
	c Media advertisements?		No	
	d Mailings to members, legislators, or the public?		No	
	e Publications, or published or broadcast statements?		No	
	f Grants to other organizations for lobbying purposes?		No	
	g Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		1,668
	h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
	i Other activities? If "Yes," describe in Part IV		No	
j Total lines 1c through 1i				1,668
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A

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

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

Part III-B

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

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

Part IV

Supplemental Information

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

Identifier	Return Reference	Explanation
EXPLANATION OF LOBBYING ACTIVITIES	PART II-B, LINE 1	A PORTION OF THE DUES THAT ARE PAID TO THE STATE ALLIANCE OF YMCA'S ARE USED TO RETAIN PROFESSIONAL LOBBYISTS WHO WORK ON BEHALF OF YMCA'S IN THE STATE. WE PAY 417 QUARTERLY.

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 MEN'S CHRISTIAN ASSOCIATION

Employer identification number
91-0568717

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

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

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

1

Purpose(s) of conservation easements held by the organization (check all that apply)

☐ 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
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ► _____

4

Number of states where property subject to conservation easement is located ► _____

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ 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

► \$ _____

For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

Cat No 52283D

Schedule D (Form 990) 2011

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
1c	
1d	
1e	
1f	

2a

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

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

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

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a	Beginning of year balance	1,854,748	1,751,985	1,706,071	858,374
b	Contributions	400	250	100	1,000,100
c	Investment earnings or losses	118,316	145,968	84,372	-95,667
d	Grants or scholarships				
e	Other expenditures for facilities and programs	74,612	28,164	27,418	50,877
f	Administrative expenses	12,940	15,291	11,140	5,859
g	End of year balance	1,885,912	1,854,748	1,751,985	1,706,071

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶

b

Permanent endowment ▶ 83 160 %

c

Term endowment ▶ 16 840 %

3a

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

(i)

unrelated organizations

3a(i)

Yes

No

(ii)

related organizations

3a(ii)

No

b

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

3b

4

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

Part VI 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		481,669		481,669
b Buildings		8,968,728	5,005,612	3,963,116
c Leasehold improvements				
d Equipment		1,610,544	1,171,790	438,754
e Other				
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				4,883,539

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	4,434,095
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	3,745,442
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	688,653
4	Net unrealized gains (losses) on investments	4	135,544
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	135,544
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	824,197

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	4,398,712
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	135,544
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	28,728
e	Add lines 2a through 2d	2e	164,272
3	Subtract line 2e from line 1	3	4,234,440
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	199,655
c	Add lines 4a and 4b	4c	199,655
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	4,434,095

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return			
1	Total expenses and losses per audited financial statements	1	3,574,515
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	28,728
e	Add lines 2a through 2d	2e	28,728
3	Subtract line 2e from line 1	3	3,545,787
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	199,655
c	Add lines 4a and 4b	4c	199,655
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	3,745,442

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 HELEN JEWETT ENDOWMENT FUND IS USED TO MAINTAIN THE JEWETT CHILD DEVELOPMENT CENTER THE OLLIE NELSON YOUTH OUTREACH AND SAMUEL WRIGHT HAWKES FUNDS ARE USED FOR YOUTH SERVICES
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	THE YMCA OF YAKIMA, PURSUANT TO A LETTER OF DETERMINATION FROM THE INTERNAL REVENUE SERVICE, IS A NOT-FOR-PROFIT ORGANIZATION EXEMPTED FROM FEDERAL INCOME TAX UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE OF 1986. ACCORDINGLY, NO PROVISION FOR FEDERAL INCOME TAX IS REFLECTED IN THESE FINANCIAL STATEMENTS. UNDER SECTION 170(B) (1)(A)(IV) OF THE INTERNAL REVENUE CODE, CONTRIBUTIONS TO THE YMCA OF YAKIMA QUALIFY AS CHARITABLE CONTRIBUTIONS. IN ACCORDANCE WITH REQUIREMENTS RELATED TO ACCOUNTING FOR UNCERTAINTIES IN INCOME TAXES, THE YMCA HAD NO UNCERTAIN TAX POSITIONS AT AUGUST 31, 2012 AND 2011.
PART XII, LINE 2D - OTHER ADJUSTMENTS		SPECIAL EVENTS EXPENSE REPORTED AS REVENUE 9,259 LOSS ON SALE OF ASSETS 19,469
PART XII, LINE 4B - OTHER ADJUSTMENTS		FINANCIAL AID EXPENSE NOT REPORTED AS REVENUE 199,655
PART XIII, LINE 2D - OTHER ADJUSTMENTS		SPECIAL EVENTS EXPENSE REPORTED AS REVENUE 9,259 LOSS ON SALE OF ASSETS 19,469
PART XIII, LINE 4B - OTHER ADJUSTMENTS		FINANCIAL AID EXPENSE NOT REPORTED AS REVENUE 199,655

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 MEN'S CHRISTIAN ASSOCIATION

Employer identification number
91-0568717

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?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total ▶						

3

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

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50083H Schedule G (Form 990 or 990-EZ) 2011

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	(b) Event #2	(c) Other Events	(d) Total Events
		<u>DINNER AUCTION</u> (event type)	 (event type)	 (total number)	(Add col (a) through col (c))
Revenue	1	Gross receipts	43,813		43,813
	2	Less Charitable contributions	25,776		25,776
	3	Gross income (line 1 minus line 2)	18,037		18,037
Direct Expenses	4	Cash prizes			
	5	Non-cash prizes			
	6	Rent/facility costs			
	7	Food and beverages	2,540		2,540
	8	Entertainment			
	9	Other direct expenses	6,719		6,719
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶			
	11	Net income summary Combine lines 3 and 10 in column (d). ▶			
					(9,259)
					8,778

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			
	2	Cash prizes			
Direct Expenses	3	Non-cash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> 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

Name of the organization
YOUNG MEN'S CHRISTIAN ASSOCIATION

Grants and Other Assistance to Organizations,
Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990

OMB No 1545-0047

2011

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Inspection

Employer identification number
91-0568717

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) CHILD CARE SERVICES	380		67,495	FMV	PROVIDING CHILD CARE SERVICES AT A DISCOUNT OR FREE OF CHARGE TO QUALIFYING INDIVIDUALS
(2) YOUTH PROGRAMS AND OTHER MEMBERSHIP SERVICES	1150		132,160	FMV	PROVIDING YOUTH PROGRAMS AND MEMBERSHIP SERVICES AT A DISCOUNT OR FREE OF CHARGE TO QUALIFYING INDIVIDUALS

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 AN APPLICATION DESCRIBING WHY FINANCIAL ASSISTANCE IS BEING REQUESTED AS WELL AS SUPPORTING DOCUMENTS OF HOUSEHOLD INCOME MUST BE SUBMITTED FOR APPROVAL TO THE YAKIMA YMCA THE AMOUNT REWARDED IS BASED UPON TOTAL HOUSEHOLD INCOME AND NUMBER IN FAMILY (TOTAL DEPENDENTS) THE DISCOUNT AMOUNT FOR A FAMILY COULD BE BETWEEN 10%-50% OR 10%-40% FOR AN INDIVIDUAL THIS IS BASED ON OUR BASIC MEMBERSHIP RATES THERE ARE SPECIAL CIRCUMSTANCES FOR YOUTH/TEEN MEMBERSHIPS THAT WE MIGHT APPROVE A MEMBERSHIP AT A FULL 100% DISCOUNT BUT THIS IS RARE OCCASION AND WOULD BE DECIDED BY THE MEMBERSHIP DIRECTOR

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization

YOUNG MEN'S CHRISTIAN ASSOCIATION

Employer identification number

91-0568717

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 6	THE ORGANIZATION HAS MEMBERS WHO PAY MEMBERSHIP DUES TO USE THE ORGANIZATION'S FACILITIES AND BE PROVIDED WITH SERVICES. ALL REGULAR MEMBERS ARE ELIGIBLE TO VOTE ON THE ELECTION OF DIRECTORS AND ON MODIFICATIONS OF THE BY-LAWS.
	FORM 990, PART VI, SECTION A, LINE 7A	ALL REGULAR MEMBERS ARE ELIGIBLE TO VOTE ON THE ELECTION OF DIRECTORS.
	FORM 990, PART VI, SECTION A, LINE 7B	ALL REGULAR MEMBERS ARE ELIGIBLE TO VOTE ON MODIFICATIONS OF THE BY-LAWS.
	FORM 990, PART VI, SECTION B, LINE 11	THE FORM 990 IS PROVIDED TO THE FINANCE COMMITTEE AND AUDIT COMMITTEE WHERE IT IS DISCUSSED AND THEN PRESENTED TO THE BOARD OF DIRECTORS.
	FORM 990, PART VI, SECTION B, LINE 12C	BOARD MEMBERS, INCLUDING OFFICERS, COMPLETE CONFLICT OF INTEREST STATEMENTS ANNUALLY. THE COPIES ARE MAINTAINED BY THE EXECUTIVE DIRECTOR, WHO ALSO SERVES AS SECRETARY OF THE BOARD OF DIRECTORS.
	FORM 990, PART VI, SECTION B, LINE 15	EXECUTIVE DIRECTOR COMPENSATION IS SET BY THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS. EACH YEAR, THE EXECUTIVE COMMITTEE DOES A REVIEW OF THE EXECUTIVE DIRECTOR THAT INCLUDES STAFF AND VOLUNTEER EVALUATIONS. A COMPARABLE WAGE REPORT FOR EXECUTIVE DIRECTORS OF OTHER EASTERN WASHINGTON YMCAS IS PROVIDED TO THE EXECUTIVE COMMITTEE FOR REVIEW. KEY EMPLOYEE COMPENSATION IS DETERMINED BY THE EXECUTIVE DIRECTOR USING A REVIEW PROCESS AND BUDGET PARAMETERS FROM THE FINANCE COMMITTEE.
	FORM 990, PART VI, SECTION C, LINE 19	UPON REQUEST.
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED GAINS ON INVESTMENTS 135,544
	FORM 990, PART XII, LINE 2C	TWO YEARS AGO, THE AUDIT COMMITTEE ISSUED A REQUEST FOR PROPOSAL FOR AUDIT SERVICES, SEEKING BIDS COVERING THREE YEARS.

Additional Data

Software ID:
Software Version:
EIN: 91-0568717
Name: YOUNG MEN'S CHRISTIAN ASSOCIATION

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

4d. Other program services					
(Code) (Expenses \$	694,016	including grants of \$) (Revenue \$	121,172)
YOUTH SPORTS AND OUTREACH THIS CATEGORY ENCOMPASSES SEVERAL PROGRAMS THAT PROVIDE IMPORTANT YOUTH SERVICES TO OUR COMMUNITY THE EASTSIDE SPORTS PROGRAM SERVES APPROXIMATELY 700 KIDS EACH YEAR THESE ARE YOUNG PEOPLE WHO HAVE TRANSPORTATION, FAMILY AND FINANCIAL BARRIERS THAT KEEP THEM OUT OF TRADITIONAL LITTLE LEAGUE, YOUTH SOCCER AND AAU BASKETBALL PROGRAMS EASTSIDE SPORTS CREATES NEIGHBORHOOD SPORTS LEAGUES THAT REMOVE THOSE BARRIERS THERE IS NO COST TO PARTICIPATE THE PROGRAM IS OPERATED ENTIRELY WITH VOLUNTEER COACHES AND OFFICIALS OUR ASPIRE MENTORING PROGRAM GREW FROM UNDER TWENTY PAIRS OF MENTORS AND STUDENTS TO ABOUT 135 ADULTS SERVING AS ROLE MODELS FOR HIGH-RISK KIDS THIS PROGRAM PROVIDES HOPE AND DIRECTION TO KIDS WHO LACK POSITIVE ADULT INFLUENCE IN THEIR LIVES OUR DROP-IN YOUTH ROOM GIVES KIDS A SAFE PLACE TO MEET AND ENJOY FELLOWSHIP AND RECREATION IN COLLABORATION WITH YOUNG LIFE, OUR SATURDAY NIGHT LIVE PROGRAM HAS GROWN TO THE POINT THAT WE FREQUENTLY SURPASS 200 ATTENDEES EACH WEEK ITS A FREE SATURDAY EVENING PROGRAM FOR KIDS AGES 7-15 OUR FRIDAY MIDNIGHT MADNESS PROGRAM FOR HIGH SCHOOL STUDENTS SERVES ABOUT 65-70 HIGH SCHOOL YOUTH EACH WEEK C O R E IS A OUTDOOR RECREATION PROGRAM FOR MIDDLE SCHOOL STUDENTS THAT FEATURES A VALUES BASED CURRICULUM WITH THE ADDED ADVENTURE OF SNOWBOARDING, ROCK CLIMBING AND HIKING OUR YOUTH SPORTS PROGRAMS PROVIDE A FUN ENVIRONMENT WHERE HUNDREDS OF PARTICIPANTS DEVELOP FUNDAMENTAL SKILLS, EMBRACE SPORTSMANSHIP AND LEARN TO COMPETE IN BASKETBALL, SOCCER, WRESTLING, BASEBALL AND SOFTBALL COMBINED, THESE PROGRAMS SERVE APPROXIMATELY 3600 YOUNG PEOPLE MOST OF THESE PROGRAMS ARE SUPPORTED WITH FUNDS GENERATED THROUGH OUR ANNUAL PARTNER WITH YOUTH CAMPAIGN WITH SUPPORT FROM UNITED WAY FUNDS					