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DLN: 93493130022393

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)

OMB No 1545-0047

Open to Public

Department of the Treasury

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

Internal Revenue Service Inspec<u>tio</u>n A For the 2012 calendar year, or tax year beginning 01-01-2012 2012, and ending 12-31-2012 D Employer identification number **B** Check if applicable JOHN E ALEXANDER YMCA COMMUNITY CENTER INC Address change 39-0929462 Doing Business As Name change Initial return umber and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number 211 WISCONSIN RIVER DRIVE Terminated (715)887-3240 Amended return City or town, state or country, and ZIP + 4 PORT EDWARDS, WI 54469 Application pending **G** Gross receipts \$ 2,116,136 Name and address of principal officer **H(a)** Is this a group return for BRET SALSCHEIDER ┌ Yes 🗸 No affiliates? 211 WISCONSIN RIVER DRIVE PORT EDWARDS, WI 54469 **H(b)** Are all affiliates included? ☐ Yes ☐ No If "No," attach a list (see instructions) **▽** 501(c)(3) **□** 501(c) () **◄** (insert no) Tax-exempt status ☐ 4947(a)(1) or ☐ 527 H(c) Group exemption number ► Website: ► WWW SWCYMCA ORG L Year of formation 1958 **M** State of legal domicile WI Summary Part I Briefly describe the organization's mission or most significant activities
OUR MISSION IS TO PUT CHRISTIAN PRINCIPLES INTO PRACTICE THROUGH YOUTH DEVELOPMENT, HEALTHY LIVING, AND SOCIAL RESPONSIBILITY Activities & Governance 2 Check this box 📂 if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . . . 21 4 21 4 Number of independent voting members of the governing body (Part VI, line 1b) . 5 225 Total number of individuals employed in calendar year 2012 (Part V, line 2a) . Total number of volunteers (estimate if necessary) 6 370 **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 0 **Prior Year Current Year** 369.734 Contributions and grants (Part VIII, line 1h) . 364,411 1,750,141 1,698,478 Program service revenue (Part VIII, line 2g) . 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) -15,928 2,492 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 4,353 3,778 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 2,102,977 2,074,482 O 13 0 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . 0 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 15 1,240,697 Expenses 1,253,931 5-10)16a Professional fundraising fees (Part IX, column (A), line 11e) . . 0 0 Total fundraising expenses (Part IX, column (D), line 25) ▶ 55,749 b 908,722 17 945.475 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 2,149,419 2,199,406 19 Revenue less expenses Subtract line 18 from line 12 -46,442 -124,924 Assets or d Balances **Beginning of Current End of Year** 20 Total assets (Part X, line 16) . 5,402,474 5,297,064 21 118,670 119,985 Total liabilities (Part X, line 26) 22 Net assets or fund balances Subtract line 21 from line 20 5,283,804 5,177,079 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 2013-05-08 Signature of officer Date Sian Here BRET SALSCHEIDER CEO/EXECUTIVE DIRECTOR Type or print name and title Preparer's signature Print/Type preparer's name Check [2013-05-08 MARY A COATES CPA P00134220 self-employed Paid Firm's name WIPFLI | I P Firm's EIN 🕨 **Preparer**

WAUSAU, WI 544028010

May the IRS discuss this return with the preparer shown above? (see instructions)

Firm's address ► PO BOX 8010

Use Only

Phone no (715) 845-3111

✓ Yes ☐ No

4d

4e

(Expenses \$

Other program services (Describe in Schedule O) $\,$

Total program service expenses ▶

including grants of \$

1,799,010

	990 (2012)	Page 2
Par	t III Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III	F
1	Briefly describe the organization's mission	
SOC: ORG. ARE PRIN DEVI	MISSION IS TO PUT CHRISTIAN PRINCIPLES INTO PRACTICE THROUGH YOUTH DEVELOPMENT, HEALTHY LIVING, AN IAL RESPONSIBILITY THE JOHN E ALEXANDER YMCA COMMUNITY CENTER IS A CHARITABLE, COMMUNITY SERVICE ANIZATION THAT INCLUDES MEN, WOMEN, AND CHILDREN OF ALL AGES, ABILITIES, INCOMES, RACES AND RELIGION DEDICATED TO BUILDING STRONG KIDS, STRONG FAMILIES, AND STRONG COMMUNITIES BY PUTTING CHRISTIAN ICIPLES INTO PRACTICE THROUGH PROGRAMS THAT PROMOTE HEALTHY LIFESTYLES, STRONG VALUES, LEADERSHIP ELOPMENT, COMMUNITY INTERACTION, AND INTERNATIONAL UNDERSTANDING ALL PERSONS ARE WELCOME AT OUA, REGARDLESS OF THEIR ABILITY TO PAY OUR YMCA IS FOUNDED AND LED BY VOLUNTEERS FROM OUR COMMUNITY UNTEERS ALSO SERVE AS MENTORS, COACHES, PROGRAM LEADERS, INSTRUCTORS AND MORE	IS WE
	Did the organization undertake any significant program services during the year which were not listed on	
2	the prior Form 990 or 990-EZ?	lo
	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?	lo
	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 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 \$ 1,281,006 including grants of \$) (Revenue \$ 1,135,663)	
	BUILDING HEALTHY SPIRITS, MINDS, AND BODIES FOR ALL THE YMCA IS PROUD TO BE A FAMILY ORGANIZATION WE GIVE FAMILIES A SAFE, RELIABLE, AN AFFORDABLE PLACE TO GO RECREATIONAL OPPORTUNITIES SUCH AS FAMILY SWIM, AND THE GYM AND FUN CENTER LET FAMILIES RELAX AND ENJOY EAC OTHER YMCA FAMILY LIFE PROGRAMS HELP PEOPILE GROW AS RESPONSIBLE MEMBERS OF FAMILIES. THEY PROVIDE CHILDREN AND THEIR PARENTS WITH ACTIVITIES THAT FOSTER UNDERSTANDING AND COMPANIONSHIP ACTIVITIES ARE PLANNED TO BRING GROUPS OF FAMILIES TOGETHER TO SUPPORT EAC OTHER PARENTS HAVE THE OPPORTUNITY TO LEARN FROM EACH OTHER AND FROM THEIR CHILDREN IN AN ENJOYABLE WAY YMCA HEALTH AND HTINESS FAMILIAR YMCA TRIANGLE EMPHASIZES THE ONENESS OF SPIRIT, MIND, AND BODY YMCA HEALTH ENHANCEMENT PROGRAMS HELP ACHIEVE THIS UNITY THROUGH MEDICALLY-BASED PROGRAMS THAT STRESS PROPER EXERCISE, NUTRITION, AND STRESS MANAGEMENT, AVOIDANCE OF DRUG AND ALCOHOL AND HEALTH EDUCATION OVER 10,000 PARTICIPANTS ATTENDED LAND AND WATER FITNESS CLASSES OUR ANNUAL TRIATHLON HAS 240 RACERS FROM A THE MID—WEST YMCA'S OFFER A LIFELONG PROGRESSION OF MEDICALLY-BASED HEALTH AND FITNESS ACTIVITIES, EXPERIENCES, AND EDUCATION, INCLL PROGRAMS FOR CHILDREN, TEENS, FAMILIES, AND SENIORS ACTIVE OLDER ADULT PROGRAMS ARE OFFERED AT MANY DIFFERENT SKILL LEVELS TO MEET CHALLENGES THAT EACH PARTICIPANT NEEDS OVER 1,100 INDIVIDUALS EACH MONTH RECEIVE SCHOLARSHIP ASSISTANCE FOR YMCA MEMBERSHIPS THI EQUATES TO OVER \$220,000 IN MEMBERSHIP SUBSIDY EACH YEAR YMCA AQUATICS PROGRAMS ARE OFFERED AT MANY DIFFERENT SKILL LEVELS TO MEET CHALLENGES THAT EACH PARTICIPANT NEEDS OVER 1,100 INDIVIDUALS EACH MONTH RECEIVE SCHOLARSHIP ASSISTANCE FOR YMCA MEMBERSHIPS THI EQUATES TO OVER \$220,000 IN MEMBERSHIP SUBSIDY EACH YMCA AQUATICS PROGRAMS ARE OFFERED AT THE Y'S GOAL OF BUILDING PROVIDING SPECIFIC SWIMMING AND WATER OAT SKILLS, THEY PROMOTE GOOD HEALTH THROUGH REGUL EXERCISE THEY ALSO PROMOTE TEAMWORK, SELF-CONFIDENCE, AND LEADERSHIP THESE PROGRAMS ARE OFFERED AT FEES AFFORDABLE TO THE COMM AT LARGE, WITH FINANCI	CH I CH S THE ABUSE, ACROSS JDING THE IS G AR MUNITY HIS GOUAL EAMS TUDES, I SPORTS H AREA NCES A G A
4b	(Code) (Expenses \$ 380,283 including grants of \$) (Revenue \$ 429,608)	
	YMCA CHILDCARE THE CENTRAL FOCUS OF ALL YMCA PRESCHOOL AND SCHOOL-AGED PROGRAMS IS TO FOSTER GROWTH AND DEVELOPMENT, NOT ONLY CHILDREN BUT ALSO IN THEIR PARENTS AND FAMILIES ACCORDINGLY, PARENTS PLAY AN IMPORTANT ROLE IN POLICY AND PROGRAM DECISIONS YMCA CHILDCARE CURRICULUM HELPS CHILDREN DEVELOP MORAL AND ETHICAL BEHAVIORS, SELF-ESTEEM AND LEADERSHIP Y CHILDCARE ALLOWS PARENTS T REMAIN GAINFULLY EMPLOYED, KNOWING THAT THEIR CHILDREN ARE THRIVING IN A SAFE, SUPPORTIVE ENVIRONMENT YMCA FINANCIAL ASSISTANCE POWER HELP ENSURE THAT THE YMCA IS A PLACE WHERE CHILDREN OF ALL ECONOMIC LEVELS, FROM THE AFFLUENT TO THE DISADVANTAGED, RECEIVE THE SAM QUALITY CARE IN THE SAME SETTING THE SOUTH WOOD COUNTY YMCA CHILDCARE DEPARTMENT CONTINUED TO MEET COMMUNITY NEEDS IN 2012 BY OFFERING CHILDCARE TO OVER 275 CHILDREN, AGES 1 TO 12	O DLICIES
4c	(Code) (Expenses \$ 137,721 including grants of \$) (Revenue \$ 127,436)	
	YMCA CAMPING YMCA RESIDENTIAL AND DAY CAMPS DEVELOP SELF-CONFIDENCE AND SELF-RESPECT WHEN CAMPERS MEET CHALLENGES AND LEARN TO COOPERATE Y CAMPING PROGRAMS ARE EDUCATIONAL, THEY PROMOTE SPIRITUAL AWARENESS, MENTAL DEVELOPMENT, PHYSICAL WELL-BEING, SOCIAL GROWTH AND A RESPECT FOR THE ENVIRONMENT THROUGH A VARIETY OF ACTIVITIES AND THE USE OF NATURAL SURROUNDINGS, YMCA CAMPING SEEH HELP PARTICIPANTS ACHIEVE THEIR FULLEST POTENTIAL IN SPIRIT, MIND AND BODY KNOWING THAT A CHILD IS BEING CARED FOR IN A Y CAMP PROGRAE ENABLES THESE PARENTS TO REMAIN GAINFULLY AND PRODUCTIVELY EMPLOYED AS IN THE CASE OF OTHER YMCA PROGRAMS, FINANCIAL ASSISTANCE IS AVAILABLE FOR THOSE WHO CANNOT AFFORD THE CUSTOMARY FEE, AND THOSE WITH SPECIAL NEEDS ARE WELCOME OUR CAMPING PROGRAMS CONTINTOUCH THE LIVES OF YOUTH AGES 5-17 WITH 460 CHILDREN ATTENDING OUR CAMPING PROGRAMS THIS LAST SUMMER OF THESE 460 CAMPERS, 15% VABLE TO ATTEND THROUGH SCHOLARSHIPS	KS TO AM S IUED TO

Form **990** (2012)

)

) (Revenue \$

Part IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🐿	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Νo
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 1	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV^{\square}	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII"	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Νo
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	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 United States? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If</i> "Yes," complete Schedule J	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			1
		28a		N o
D	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

	Statements Regarding Other IRS Fillings and Tax Compliance			_
	Check if Schedule O contains a response to any question in this Part V	•	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 4			
ь	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	1		
Ī	gaming (gambling) winnings to prize winners?	1 c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20	165	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Νo
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
Ь	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? \cdot .	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
Ī	11 Yes, to line su of sp, and the organization me form coos 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	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 as charitable contributions?	6a		Νo
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).			
а	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		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
_	file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year	_		
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		Νo
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.			
а	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			
а	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			
l1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
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			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand	1		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14a		110

Se	ection A. Governing Body and Management			•
	action 7.1 Governing Boay and Hanagement		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax 1a 21			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	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
_Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		Νo
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 this 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?			
а	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		
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website. Another's website. Upon request. Other (explain in Schedule O)			

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 during the tax year

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►TERRIE WEDIG 211 WISCONSIN RIVER DRIVE PORT EDWARDS, WI (715)887-3240

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 $\,\cdot\,\,$. $\,\cdot\,\,$.

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation 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 organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours	(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	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations
(1) JEM BROWN	1 00	х						0	0	0
BOARD MEMBER								,		
(2) JON BYOM	1 00	x						0	0	0
BOARD MEMBER (2) IASON DETT	1.00				_					
(3) JASON DEITZ TREASURER	1 00	x		х				0	0	0
(4) TODD DUELLMAN	1 00									
VICE PRESIDENT		X		Х				0	0	0
(5) ROB GOGGINS	1 00	х						0	0	0
BOARD MEMBER		^							0	0
(6) KAY GRUNDHOFFER	1 00	х						0	0	0
BOARD MEMBER (7) KURT HEIMAN	1.00				_	-				
BOARD MEMBER	1 00	x						0	0	0
(8) KURT HEUER	1 00									
BOARD MEMBER		Х						0	0	0
(9) KEN IWINSKI	1 00									
PRESIDENT		Х		Х				0	0	0
(10) JOANN LESTER	1 00									
BOARD MEMBER		х						0	0	0
(11) CHAD LEWIS	1 00	-								
BOARD MEMBER		х						0	0	0
(12) HEATHER MCKELLIPS	1 00				\vdash					
SECRETARY		Х		Х				0	0	0
(13) MIKE MEINEL	1 00									
SECRETARY		×		X				0	0	0
(14) JIM RIEBE	1 00	<u> </u>								
BOARD MEMBER		X						0	0	0
(15) CRYSTAL RIETVELD	1 00									
BOARD MEMBER		X						0	0	0
(16) BRIAN RUESCH	1 00									
BOARD MEMBER		X						0	0	0
(17) TROY TAMMEN	1 00									
BOARD MEMBER		X						0	0	0
					_			I.		Form 990 (2012)

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

	(A) Name and Title	(B) A verage hours per week (list any hours	more pers	than on is	one bot	not bo: h ar or/ti	checl c, unle n office rustee	ess er)	(D) Reportable compensation from the organization	(E) Reportable compensati from relate organizatio	on d ns	Estim amount of compen from	ated of other isation the
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099 MISC)	,-	organiz and re organiz	lated
(18) F	RICHARD WEYMOUTH	1 00	х						0		0		0
) MEMBER										-		
(19) k	KIRK WILLARD	1 00	×						0		0		0
	O MEMBER												
` '	CELSE BERARD	1 00	x						0		0		0
	O MEMBER ESLIE ARENDT	1 00	1								\dashv		
` '		1 00	x						0		0		0
	D MEMBER BRET SALSCHEIDER	40 00						Н			\dashv		
EXECL	JTIVE DIRECTOR				X				62,772		0		8,224
											_		
											_		
											_		
1b	Sub-Total						<u></u> ►				T		
c	Total from continuation sheets to Pa	rt VII, Section A					▶						
d	Total (add lines 1b and 1c)						▶□		62,772		0		8,224
2	Total number of individuals (including \$100,000 of reportable compensation				ed al	bove	e) who	rec	eived more than				
3	Did the organization list any former o					plo	yee, o	r hıg	hest compensate	d employee		Yes	No
	on line 1a? If "Yes," complete Schedule						• .	•			3		No
4	For any individual listed on line 1a, is organization and related organizations									om the			
	ındıvıdual						•				4		No
5	Did any person listed on line 1a recei services rendered to the organization								_	ndıvıdual for	5		No
										L		•	
	ction B. Independent Contrac												
1	Complete this table for your five higher compensation from the organization is											tax vear	
		(A) business address					,,,,,,,,			(B) on of services		(C Comper)
											\dashv		
											+		

Form 99								Page 9
Part \	ЛΠ		o f Revenue ule O contains a respon	ise to any question i	n this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
<u> 2</u> 2	1a	Federated cam	paigns 1a	34,296				
ant	ь	Membership du	es 1b					
يَ ق	C	Fundraising eve	ents 1c	13,420				
f, F,A	d	Related organiz	zations 1d					
:5 :≣	e	Government grant						
ns,		_						
ig e	f	similar amounts no	ons, gifts, grants, and 1f ot included above	322,018				
년 등 등 등	g	Noncash contributi	ons included in lines	j				j j
Contributions, Giffs, Grants and Other Similar Amounts	h	Total. Add lines	s 1 a - 1 f		369,734			
<u>0</u>	<u> </u>			Business Code	·			
Ele	2a	MEMBERSHIP DUE	S	Business Code 713990	900,614	900,614		
eve	Ь	CHILD CARE		624410	429,608	429,608		
o o	c	ACTIVITY FEES		713990	238,970	238,970		
7 2	d	CAMP FEES		713990	127,436	127,436		
38	e	MISCELLANEOUS II	NCOME	900099	1,850	1,850		
Ta E	f		am service revenue	900099	1,630	1,830		
Program Serwce Revenue	-							
	g 3		s 2a-2f		1,698,478			
]		ome (including dividend ar amounts)		7,210			7,210
	4	Income from inves	stment of tax-exempt bond p	proceeds 🕨				
	5	Royalties		🕨				
	_		(ı) Real	(II) Personal				
	6a b	Gross rents Less rental						
	-	expenses						
	C	Rental income or (loss)						
	d	Net rental inco	me or (loss)					
	7a	Gross amount	(ı) Securities	(II) O ther				
	'a	from sales of assets other	4,866	21,163				
		than inventory						
	Ь	Less cost or other basis and	3,813	26,934				
	_c	sales expenses Gaın or (loss)	1,053	-5,771				
	d	Net gain or (los	ss)		-4,718	-5,771		1,053
	8a	Gross income f	rom fundraising					
пе		events (not inc	luding ,420					
Other Revenue		of contributions	reported on line 1c)					
æ		See Part IV, lir	ne 18 a l					
Je.	ь	less directey	penses b	14,685 10,907				
₹	c		(loss) from fundraising (· · · · · · · · · · · · · · · · · · ·	3,778			3,778
	9a	Gross income f	rom gaming activities					
		See Part IV, lir	ne 19					
	ь	Loss direct ov	noncos h					
	C		penses b (loss) from gaming activ	/ities = -				
		Gross sales of	F					
		returns and allo	owances .					
	,		a					
			oods sold . . b	entory				
	F	Miscellaneous		Business Code				+
	11a	s s in a neo u						
	b							
	С							
	d	All other reven	ue					
	e	Total. Add lines	۱ s 11a-11d	🕨				
	12	Total revenue	See Instructions					
	1				2,074,482	1,692,707	(0 12,041

Part IX Statement of Functional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must complete all columns All				
	Check if Schedule O contains a response to any question in this Pa	ort IX			<u> </u>
	ot include amounts reported on lines 6b, o, 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				
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	70,996	54,286	13,952	2,758
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	1,001,544	765,634	200,775	35,135
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	181,391	144,434	31,413	5,544
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
Ь	Legal				
с	Accounting	8,166		8,166	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17	2.724		2 724	
f	Investment management fees	2,724		2,724	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion	13,564	13,564		
13	Office expenses	132,675	99,749	27,987	4,939
14	Information technology				
15	Royalties				
16	Occupancy	330,990	326,003	4,239	748
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	14,650	9,941	4,709	
20	Interest	335		335	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	308,204	301,100	7,104	
23 24	Insurance	58,823	36,699	18,805	3,319
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	DUES	42,750	18,312	24,438	
b	MERCHANDISE SALES AND F	32,594	29,288		3,306
C					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	2,199,406	1,799,010	344,647	55,749
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

with Balance Snee	Part X	Balance	Sheet
-------------------	--------	---------	-------

		Check if Schedule O contains a response to any question in this	Part X		(A)		(B)
					Beginning of year		End of year
	1	Cash—non-interest-bearing		•	6,696		8,572
	2	Savings and temporary cash investments		•	377,458		348,156
	3	Pledges and grants receivable, net		•		3	
	4	Accounts receivable, net			47,232	4	32,900
Assets	5	Loans and other receivables from current and former officers, demployees, and highest compensated employees. Complete Paschedule L		, trustees, key		5	
	6	Loans and other receivables from other disqualified persons (at $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and and sponsoring organizations of section $501(c)(9)$ voluntary errorganizations (see instructions) Complete Part II of Schedule	contribut mployee:	ing employers		6	
Š	7	Notes and loans receivable, net				7	
⋖	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges				9	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D		7,482,644		_	
	Ь	Less accumulated depreciation	10b	2,867,943	4,697,742	10c	4,614,701
	11	Investments—publicly traded securities			243,399		259,788
	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		•	29,947	15	32,947
	16	Total assets. Add lines 1 through 15 (must equal line 34).			5,402,474		5,297,064
	17	Accounts payable and accrued expenses		• •	50,259		52,922
	18			•	30,233	18	32,322
		Grants payable		• •	62,650		63,959
	19	Deferred revenue		•	62,630		
	20	Tax-exempt bond liabilities		•		20	
ities	21	Escrow or custodial account liability Complete Part IV of Sche				21	
	22	Loans and other payables to current and former officers, direct key employees, highest compensated employees, and disquali	•	tees,			
Liabili		persons Complete Part II of Schedule L				22	
-	23	Secured mortgages and notes payable to unrelated third partie	s			23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to related other liabilities not included on lines 17-24) Complete Pa	E 704		2.404		
]	D			5,761 118,670	25	3,104 119,985
	26	Total liabilities. Add lines 17 through 25			110,070	26	119,965
φ S		Organizations that follow SFAS 117 (ASC 958), check here ► lines 27 through 29, and lines 33 and 34.	✓ and co	omplete			
ĕ	27	Unrestricted net assets			5,241,804	27	5,144,179
<u>ಣ</u>	28	Temporarily restricted net assets		•	42,000		32,900
<u>~</u>	29	Permanently restricted net assets	• •	•	12,000	29	
Assets or Fund Balance	29	Organizations that do not follow SFAS 117 (ASC 958), check h		· and		29	
<u>-</u>		complete lines 30 through 34.	,				
o Si	30	Capital stock or trust principal, or current funds				30	
Ř	31	Paid-in or capital surplus, or land, building or equipment fund				31	
Ą	32	Retained earnings, endowment, accumulated income, or other f	unds			32	
ž	33	Total net assets or fund balances			5,283,804	33	5,177,079
2	34	Total liabilities and net assets/fund balances			5,402,474	34	5,297,064

Par	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				୮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		2,0	74,482
2	Total expenses (must equal Part IX, column (A), line 25)	2		2,1	199,406
3	Revenue less expenses Subtract line 2 from line 1	3			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			283,804
5	Net unrealized gains (losses) on investments	5		5,2	18,199
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		5,1	177,079
Par	t XII Financial Statements and Reporting	•			
	Check if Schedule O contains a response to any question in this Part XII				. 区
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed or	1		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both	arate			
	▼ Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	n			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	require	3b		

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JOHN E ALEXANDER YMCA COMMUNITY CENTER INC

As Filed Data -

DLN: 93493130022393

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

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.

2012

Open to Public Inspection

									39-0929			
Pai				blic Charity Sta						ınstructior	ns.	
The o	rganı:			te foundation becaus			= -					
1		A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).										
2	<u> </u>			in section 170(b)(1								
3				perative hospital se								
4				h organization operat ity, and state	ted in conjun	ction with a	a hospital de	scribed in s	ection 170(b)(1)(A)(iii)	. Enter the	
5	Г			erated for the benefi	t of a college	or univers	ıtv owned or	operated by	/ a governme	ntal unit de:	scribed in	
		_	•	A)(iv). (Complete P	_		,	' <i>'</i>	J			
6	Г		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										
8	Γ			on 170(b)(1)(A)(vi). : described in sectior			mplete Part	II)				
9	굣	An org	anızatıon th	at normally receives	(1) more th	an 331/3%	of its suppor	t from contr	ibutions, me	mbership fe	es, and gross	
		receipt	s from activ	ities related to its ex	xempt functi	ons—subje	ct to certain	exceptions,	, and (2) no n	nore than 33	31/3% of	
		ıts sup	port from gr	oss investment inco	me and unre	lated busin	ess taxable i	ncome (les	s section 51	1 tax) from	businesses	
		acquire	ed by the org	ganızatıon after June	30,1975 S	ee section	509(a)(2). (Complete P	art III)			
10	Γ	An organization organized and operated exclusively to test for public safety See section 509(a)(4).										
11	Γ	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes										
		one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). the box that describes the type of supporting organization and complete lines 11e through 11h										
				b Type II c						Non-functio	nally integrated	
e	\sqcap											
		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										
e		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				2006, has the organi	ızatıon accep	oted any gif	t or contribu	tion from an	y of the		,	
			ng persons?									
				rectly or indirectly o	•		_	n persons a	escribed in (_	Yes No	
		•		governing body of th		-	on /				Lg(i)	
		• •	•	er of a person descri			- 5			—	lg(ii)	
h				lled entity of a perso						11	g(iii)	
"		FIOVICE	e the followi	ng information about	the supporte	eu organiza	tion(s)					
(i) Nam	ne of	(ii) EIN	(iii) Type of	(iv) Is	the	(v) Did yo	u notify	(vi) I	s the	(vii) A mount of	
-	, uppor		` ´	organization	organizati		the organ	•	organiza	ation in	monetary	
or	ganiza	ation		(described on	col (i) lis		ın col (i)		col (i) or		support	
				lines 1-9 above or IRC section	your gove docume		suppo	ort?	ın the	0.5 7		
				(see	docume	ווני						
				instructions))	Yes	Ne	Yes	N-	Yes	B.L.	\dashv	
					res	No	res	No	res	No		
							+	+				
Total								+				

Sch	edule A (Form 990 or 990-EZ) 2012							Page 2
Pa	(Complete only if you o	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation faile	ed to q	
	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	ow, please com	iplete Pa	rt III.)	
	ection A. Public Support endar year (or fiscal year beginning					1		
	in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2	312	(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							
6	(f) Public support. Subtract line 5 from							
	line 4							
S	ection B. Total Support							
Cal	endar year (or fiscal year beginning	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 20)12	(f) Total
_	in) ► A mounts from line 4		. ,		. ,	, ,		. ,
7 8	Gross income from interest,							
0	dividends, payments received on							
	securities loans, rents, royalties							
	and income from similar							
9	sources Net income from unrelated							
9	business activities, whether or not							
	the business is regularly carried							
	on							
10	Other income Do not include gain or loss from the sale of capital							
	assets (Explain in Part IV)							
11	Total support (Add lines 7 through							
4.0	10)		<u> </u>					
12	Gross receipts from related activitie					12		
13	First five years. If the Form 990 is this box and stop here							ization, check
	ection C. Computation of Pub				<u> </u>	<u> </u>		
14	Public support percentage for 2012			11, column (f))		14		
15	Public support percentage for 2011			, , , , , , ,		15		
	33 1/3% support test—2012. If the o	· ·	•	on line 13 and l	ine 14 is 33 1/20%		chack ti	nie hov
104	and stop here. The organization qua				me 1 1 13 33 1/3/0	or more,	JIICCK CI	► □
b	33 1/3% support test—2011. If the				and line 15 is 33	3 1/3% or n	nore, ch	eck this
	box and stop here. The organization						. 4 4	▶□
1/a	10%-facts-and-circumstances test- is 10% or more, and if the organizat							•
	in Part IV how the organization mee							
	organization				4	r	,	▶ □
b	10%-facts-and-circumstances test-							
	15 is 10% or more, and if the organ Explain in Part IV how the organizat							lv
	supported organization	ion meets the T	acts-ana-cncum:	stances test III	ic organization qu	uiiiiE5 45 i	a public	·y ▶□
18	Private foundation. If the organizat	on did not check	c a box on line 13	, 16a, 16b, 17a,	or 17b, check thi	s box and	see	·
	instructions							▶ ┌

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	452,659	285,393	366,245	364,411	369,734	1,838,442
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	1,584,267	1,718,812	1,672,634	1,750,141	1,698,478	8,424,332
3	Gross receipts from activities that are not an unrelated trade or business under section 513			3,427	4,353	3,778	11,558
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	2,036,926	2,004,205	2,042,306	2,118,905	2,071,990	10,274,332
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons	293,278	138,000	177,000	152,000	177,000	937,278
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	38,842	28,742	27,274	36,438	14,165	145,461
c	Add lines 7a and 7b	332,120	166,742	204,274	188,438	191,165	1,082,739
8	Public support (Subtract line 7c from line 6)			·		·	9,191,593
Se	ction B. Total Support	•		<u> </u>	•		
	ndar year (or fiscal year beginning	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	in) ▶						
9	A mounts from line 6	2,036,926	2,004,205	2,042,306	2,118,905	2,071,990	10,274,332
9 10a	A mounts from line 6 Gross income from interest,						
	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after	2,036,926	2,004,205	2,042,306	2,118,905	2,071,990	10,274,332
10a	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes)	2,036,926	2,004,205	2,042,306	2,118,905	2,071,990	10,274,332
10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	2,036,926	9,581	2,042,306 9,650	2,118,905 8,342	2,071,990 8,263	10,274,332 60,880
10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the	2,036,926	9,581	2,042,306 9,650	2,118,905 8,342	2,071,990 8,263	10,274,332 60,880
t b c 11	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c,	2,036,926	9,581	2,042,306 9,650	2,118,905 8,342 8,342	2,071,990 8,263 8,263	60,880
b c 111	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for	2,036,926 25,044 25,044 2,061,970	2,004,205 9,581 9,581 2,013,786	2,042,306 9,650 9,650 2,051,956	2,118,905 8,342 8,342 2,127,247	2,071,990 8,263 8,263 2,080,253	10,274,332 60,880 60,880 10,335,212
to a b c c 111 12 13 14	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is to check this box and stop here	2,036,926 25,044 25,044 2,061,970 For the organization	2,004,205 9,581 9,581 2,013,786 on's first, second,	2,042,306 9,650 9,650 2,051,956	2,118,905 8,342 8,342 2,127,247	2,071,990 8,263 8,263 2,080,253	10,274,332 60,880 60,880 10,335,212
b c 11 12 13 14 Se	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is a check this box and stop here ction C. Computation of Pub	2,036,926 25,044 25,044 2,061,970 For the organization	2,004,205 9,581 9,581 2,013,786 on's first, second,	2,042,306 9,650 9,650 2,051,956 third, fourth, or fi	2,118,905 8,342 8,342 2,127,247	2,071,990 8,263 8,263 2,080,253 501(c)(3) organ	10,274,332 60,880 60,880 10,335,212
toa b c c 111 12 13 14 See 15	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is to check this box and stop here ction C. Computation of Pub	2,036,926 25,044 25,044 2,061,970 For the organization (lic Support Performance)	2,004,205 9,581 9,581 2,013,786 on's first, second, ercentage f) divided by line:	2,042,306 9,650 9,650 2,051,956 third, fourth, or fi	2,118,905 8,342 8,342 2,127,247	2,071,990 8,263 8,263 2,080,253 501(c)(3) organ	10,274,332 60,880 60,880 10,335,212 Ization, 88 930 %
t0a b c 111 12 13 14 See 15 16	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is to check this box and stop here ction C. Computation of Pub Public support percentage from 201	2,036,926 25,044 2,061,970 For the organization (lic Support Performance of the Support Performanc	2,004,205 9,581 9,581 2,013,786 on's first, second, ercentage f) divided by line : art III, line 15	2,042,306 9,650 9,650 2,051,956 third, fourth, or file of the content of the	2,118,905 8,342 8,342 2,127,247	2,071,990 8,263 8,263 2,080,253 501(c)(3) organ	10,274,332 60,880 60,880 10,335,212
toa b c c 111 12 13 14 See 15 16 See See	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is to check this box and stop here ction C. Computation of Pub Public support percentage from 201 ction D. Computation of Inve	2,036,926 25,044 25,044 25,044 2,061,970 For the organization (line 8, column (1 Schedule A, Pa	2,004,205 9,581 2,013,786 on's first, second, ercentage f) divided by line : art III, line 15 me Percentage	2,042,306 9,650 9,650 2,051,956 third, fourth, or fill 13, column (f))	2,118,905 8,342 8,342 2,127,247 Ifth tax year as a	2,071,990 8,263 8,263 2,080,253 501(c)(3) organ	10,274,332 60,880 60,880 10,335,212 dization, 88 930 % 82 730 %
10a b c 111 12 13 14 See 15 16 See 17	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the check this box and stop here ction C. Computation of Pub Public support percentage for 2012 Public support percentage from 201 ction D. Computation of Inve	2,036,926 25,044 25,044 25,044 25,044 Cor the organization C	2,004,205 9,581 2,013,786 on's first, second, ercentage f) divided by line: art III, line 15 me Percentage foliumn (f) divided by	2,042,306 9,650 9,650 2,051,956 third, fourth, or fill 13, column (f)) Je by line 13, column	2,118,905 8,342 8,342 2,127,247 Ifth tax year as a	2,071,990 8,263 8,263 2,080,253 501(c)(3) organ	10,274,332 60,880 60,880 10,335,212 IIzation, 88 930 % 82 730 % 0 590 %
10a b c 111 12 13 14 See 15 16 See 17 18	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is to check this box and stop here ction C. Computation of Pub Public support percentage from 201 ction D. Computation of Inve	2,036,926 25,044 25,044 25,044 25,044 Cor the organization (incompanion of the column (incompanion of the column (incompanion of the column of the colu	2,004,205 9,581 9,581 2,013,786 on's first, second, ercentage f) divided by line : art III, line 15 me Percentag olumn (f) divided by A, Part III, line 1	2,042,306 9,650 9,650 2,051,956 third, fourth, or fill 13, column (f)) 1e by line 13, column	2,118,905 8,342 8,342 2,127,247 Ifth tax year as a	2,071,990 8,263 8,263 2,080,253 501(c)(3) organ 15 16	10,274,332 60,880 60,880 10,335,212 11zation, 88 930 % 82 730 % 82 730 % 0 590 % 0 790 %

33 1/3% support tests—2011. 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 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2012

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DLN: 93493130022393

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b

► Attach to Form 990. ► See separate instructions.

Open to Public

	me of the organization	in 330. F See separate instructions.	Fmp	loyer identification number
	N E ALEXANDER YMCA COMMUNITY CENTER INC			9929462
Pa	organizations Maintaining Donor Advorganization answered "Yes" to Form 990	, Part IV, line 6.	_	·
		(a) Donor advised funds	((b) Funds and other accounts
	Total number at end of year			
	Aggregate contributions to (during year)			
	Aggregate grants from (during year)			
	Aggregate value at end of year			
	Did the organization inform all donors and donor advisor funds are the organization's property, subject to the or		nor advi	sed Yes No
	Did the organization inform all grantees, donors, and doused only for charitable purposes and not for the beneficonferring impermissible private benefit?			
aı	rt III Conservation Easements. Complete if	the organization answered "Yes"	to Form	n 990, Part IV, line 7.
	Purpose(s) of conservation easements held by the org Preservation of land for public use (e.g., recreation Protection of natural habitat Preservation of open space	or education) Preservation of a	certified	cally important land area
	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	a qualified conservation contribution in	tne form	or a conservation
				Held at the End of the Year
a	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements		2b	
0	Number of conservation easements on a certified histo	oric structure included in (a)	2c	
d	Number of conservation easements included in (c) acq historic structure listed in the National Register	quired after 8/17/06, and not on a	2d	
	Number of conservation easements modified, transferrenthe tax year -	red, released, extinguished, or terminat	ed by th	e organization during
	Number of states where property subject to conservat	ion easement is located ▶		
	Does the organization have a written policy regarding tenforcement of the conservation easements it holds?	the periodic monitoring, inspection, han	ıdlıng of	violations, and Yes No
	Staff and volunteer hours devoted to monitoring, inspe	cting, and enforcing conservation ease	ments d	uring the year
	A mount of expenses incurred in monitoring, inspecting	g, and enforcing conservation easement	s durıng	the year
	Does each conservation easement reported on line 2(d and section 170(h)(4)(B)(II)?	d) above satisfy the requirements of se	ction 17	(¹0(h)(4)(B)(ı)
	In Part XIII, describe how the organization reports corbalance sheet, and include, if applicable, the text of the the organization's accounting for conservation easeme	e footnote to the organization's financia		
ar	Organizations Maintaining Collection Complete if the organization answered "Y	s of Art, Historical Treasures,	or Oth	ner Similar Assets.
а	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide, in Part XIII, the text of the footnote t	.16 (ASC 958), not to report in its reve	orrese	arch ın furtherance of publıc
b	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asseservice, provide the following amounts relating to thes	ets held for public exhibition, education,		
	(i) Revenues included in Form 990, Part VIII, line 1			F \$
	(ii) Assets included in Form 990, Part X			▶ \$
	If the organization received or held works of art, histor following amounts required to be reported under SFAS			
ı	Revenues included in Form 990, Part VIII, line 1			▶ \$
ь	Accets included in Form 990 Part V			b - ¢

2 3	Using the organization's acquisition, accessing									<u>continued)</u>
3	collection items (check all that apply)	on, and other record	15, CII	еска	any or the	i lollowing that	are a	Significant us	2 01 115	
а	Public exhibition		d	Γ	Loan or	exchange prog	rams			
b	Scholarly research		e	Γ	Other					
c	Preservation for future generations									
4	Provide a description of the organization's co Part XIII	llections and explai	n hov	v the	/ further t	the organization	n's ex	empt purpose	ın	
5	During the year, did the organization solicit of							nılar	_,,	–
Date	assets to be sold to raise funds rather than to the sold to raise funds rather than to the sold to the							oc" to Form	Yes	│ No
	Part IV, line 9, or reported an an						u i	es (0 1 0 i i i i		
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterme	dıary	for c	ontributio	ons or other ass	sets	not	┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	follow	ving t	able	-				
						-		A	mount	
c	Beginning balance					-	1c			
d	Additions during the year					-	1d			
e	Distributions during the year					-	1e			
f	Ending balance					L	1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?						☐ Yes	Г No
ь	If "Yes," explain the arrangement in Part XII									<u> </u>
Pa	rt V Endowment Funds. Complete									
1a	Beginning of year balance	(a)Current year 273,346	(b)	Prior y	ear b 276,045	(c)Two years back 256,81		Three years back 133,597	(e)Four	years back 151,505
b	Contributions	270,010		•	-7 0,0 10	255,61	+	98,024		13,892
c	Net investment earnings, gains, and losses						+	,		
		23,278			2,372	24,31	8	30,194		-27,053
d	Grants or scholarships						_			
е	Other expenditures for facilities and programs	1,165			2,375	2,54	o	2,748		2,582
f	Administrative expenses	2,724			2,696	2,54	4	2,256		2,165
g	End of year balance	292,735			273,346	276,04	5	256,811		133,597
2	Provide the estimated percentage of the curr	ent year end balanc	e (lın	e 1g,	column ((a)) held as	•			
а	Board designated or quasi-endowment									
ь	Permanent endowment F									
c	Temporarily restricted endowment ►									
	The percentages in lines 2a, 2b, and 2c show									
3a	Are there endowment funds not in the posses organization by	ssion of the organiza	ition t	inat a	ire neid a	na aaministere	a for	tne	Yes	No
	(i) unrelated organizations							3a	(i) Yes	_
	(ii) related organizations							3a	(ii) Yes	
b	If "Yes" to 3a(II), are the related organization						•	3	b	No
4	Describe in Part XIII the intended uses of the									
Par	t VI Land, Buildings, and Equipme Description of property	nt. See Form 990	0, Pa		Cost or otl		other	(c) Accumulate	d (d) B	ook value
	Description of property				s (investme			depreciation		ook value
	Land					44:	1,350			441,350
	Buildings						9,720	1,624,2	67	2,635,453
	Leasehold improvements					- 	0,767	430,5	_	750,202
						_,				
d	Equipment					<u> </u>	0,807	813,1	<u> </u>	787,696
	Equipment					<u> </u>	0,807	813,1	<u> </u>	

Part VII Investments—Other Securities. Se	ee Form 990, Part X, line 12.	
(a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests		
Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	F	
Part VIII Investments—Program Related.	See Form 990, Part X, line 13	•
(a) Description of investment type	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
Table (Caluma (h) assat agual Farra 000 Bart V agual (B) hag 13)	F	
Part IX Other Assets. See Form 990, Part X, col (B) line 13)		
(a) Des		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line	: 15.)	
Part X Other Liabilities. See Form 990, Par		
1 (a) Description of liability	(b) Book value	
Federal income taxes		
OBLIGATION UNDER CAPITAL LEASE	3,104	
	,	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	▶ 3,104	

Par	Reconciliation of Revenue per Audited Financial Statements With Revenue	er Re	eturn
1	Total revenue, gains, and other support per audited financial statements	1	2,100,864
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	32,884
3	Subtract line 2e from line 1	3	2,067,980
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 2,724		
b	Other (Describe in Part XIII) 4b 3,778		
c	Add lines 4a and 4b	4c	6,502
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	2,074,482
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses	per	Return
1	Total expenses and losses per audited financial statements	1	2,207,589
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIII) 2d 10,907		
e	Add lines 2a through 2d	2e	10,907
3	Subtract line 2e from line 1	3	2,196,682
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 2,724		
b	Other (Describe in Part XIII)		
c	Add lines 4a and 4b	4c	2,724
5	Total expenses Add lines 3 and 4c (This must equal Form 990, Part I, line 18.)	5	2 199 406

Part XIII 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, line 2, Part XI, lines 2d and 4b, and Part XII, 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 ORGANIZATION'S ENDOWMENT FUNDS CONSIST OF A DIFFERENT DONOR RESTRICTED ENDOWMENT FUNDS ESTABLISHED BY DONORS FOR SPECIFIED PURPOSES BENEFITING THE ORGANIZATION
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X, LINE 2	IN ORDER TO ACCOUNT FOR ANY UNCERTAIN TAX POSITIONS, THE ORGANIZATION ASSESSES WHETHER IT IS MORE LIKELY THAN NOT THAT A TAX POSITION WILL BE SUSTAINED UPON EXAMINATION OF THE TECHNICAL MERITS OF THE POSITION, ASSUMING THE TAXING AUTHORITY HAS FULL KNOWLEDGE OF ALL INFORMATION IF THE TAX POSITION DOES NOT MEET THE MORE- LIKELY-THAN-NOT RECOGNITION THRESHOLD, THE BENEFIT OF THE TAX POSITION IS NOT RECOGNIZED IN THE FINANCIAL STATEMENTS THE ORGANIZATIONS POLICY IS TO RECOGNIZE INTEREST AND ANY PENALTIES RELATED TO INCOME TAX MATTERS IN INCOME TAX EXPENSE WHEN INCURRED IN 2012 AND 2011, THERE WERE NO PAYMENTS OF INCOME TAX, TAX PENALTIES, OR INTEREST RELATED TO TAX PENALTIES RECORDED BY THE ORGANIZATION IN THE FINANCIAL STATEMENTS THE ORGANIZATION RECORDED NO ASSETS OR LIABILITIES FOR UNCERTAIN POSITIONS OR UNRECOGNIZED TAX BENEFITS IN 2012 OR 2011 FEDERAL RETURNS FOR THE YEARS ENDED DECEMBER 31, 2009 AND BEYOND REMAIN SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE
PART XI, LINE 2D - OTHER ADJUSTMENTS		GROSS FUNDRAISING INCOME EXCLUDING CONTRIBUTIONS 14,685
PART XI, LINE 4B - OTHER ADJUSTMENTS		NET FUNDRAISING INCOME 3,778
PART XII, LINE 2D - OTHER ADJUSTMENTS		DIRECT EXPENSES FOR FUNDRAISING 10,907

DLN: 93493130022393

OMB No 1545-0047

(Form 990 or 990-EZ)

Name of the organization

SCHEDULE G

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. Form 990-EZ filers are not required to complete this part.

Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

Employer identification number

Οŀ	IN E ALEXANDER YMCA CO	MMUNITY CENTER	RINC			39-092946	2
Pā	rt I Fundraising Acti	i vities. Complete	e if the oi	rganızatı	on answered "Yes" t	to Form 990, Part I	V, line 17.
1	Indicate whether the organi	zation raised funds	through a	ny of the 1	following activities Che	eck all that apply	
а	Mail solicitations		J	, e	Solicitation of non		
b	☐ Internet and email solicitations f ☐ Solicitation of government grants						
c	Phone solicitations			g	Special fundraisin	g events	
d	☐ In-person solicitations						
2a	Did the organization have a or key employees listed in F						Г _{Yes} Г м
b	If "Yes," list the ten highest to be compensated at least			undraiser	rs) pursuant to agreeme	ents under which the f	undraiser is
	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundrais custo cont	Did ser have ody or crol of outions?	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
			Yes	No			
		<u> </u>					
ot	al			•			
3	List all states in which the o	organization is regis	tered or li	censed to	solicit funds or has be	en notified it is exemp	ot from registration or

Pai	rt II	Fundraising Events. Com more than \$15,000 of fundra events with gross receipts g	aısıng event contributi	on answered "Yes" to l ons and gross income	Form 990, Part IV, lır on Form 990-EZ, lın	ne 18, or reported es 1 and 6b. List
		<u> </u>	(a) Event #1	(b) Event #2	(c) O ther events	(d) Total events
			GOLF OUTING	TRIATHLON		(add col (a) through col (c))
			(event type)	(event type)	(total number)	(3)
ELE.	1	Gross receipts	21,065	7,040		28,105
Revenue	2	Less Contributions	13,300	120		13,420
	3	Gross income (line 1 minus line 2)	7,765	6,920		14,685
	4	Cash prizes				
မွာ	5	Noncash prizes		250		250
Expenses	6	Rent/facility costs	5,460	300		5,760
	7	Food and beverages .				
Direct	8	Entertainment				
Δ	9	Other direct expenses .	2,521	. 2,376		4,897
	10	Direct expense summary Add lin	es 4 through 9 ın column	(d)	•	(10,907)
	11	Net income summary Combine li	ne 3, column (d), and line	10		3,778
Par	t III	Gaming. Complete if the oi \$15,000 on Form 990-EZ, lii	rganization answered	"Yes" to Form 990, Pai	rt IV, line 19, or repo	orted more than
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
<u> ~</u>	1	Gross revenue				
ses	2	Cash prizes				
Expenses	3	Non-cash prizes				
	4	Rent/facility costs				
Direct	5	Other direct expenses				
			┌ Yes	Yes	┌ Yes	•
	6	Volunteer labor	☐ No	□ No	□ No	
	7	Direct expense summary Add line	s 2 through 5 in column (d)		
	8	Net gaming income summary Com	bine lines 1 and 7 in colu	ımn (d)	🛌	
9	Ente	er the state(s) in which the organiza	ation operates gaming act	tivities		
а		he organization licensed to operate				. Fyes FNo
b	If"N	No," explain				
10a b		e any of the organization's gaming es," explain			the tax year?	· · 「Yes 「No
U	±1 1					

70ES	the organization operate gaming	activities with nonlinelinders		· · I Yes I No
.2		neficiary or trustee of a trust or a men		
	formed to administer charitable of	gaming?		· · · · Fyes F No
.3	Indicate the percentage of gamir	ng activity operated in		
а	The organization's facility			13a
b	An outside facility			13b
.4	Enter the name and address of th	ne person who prepares the organizati	on's gaming/special events books	and records
	Name ►			
	Address 🟲			
	revenue?	ntract with a third party from whom the		
	amount of gaming revenue retain	ed by the third party 🟲 \$		
C	If "Yes," enter name and address	s of the third party		
	Name 🟲			
	Address 🟲			
.6	Gaming manager information			
	Name 🟲			
	Gaming manager compensation I	\$ \$		
	Description of services provided	>		
	☐ Director/officer	Employee	Independent contractor	
.7	Mandatory distributions			
а	Is the organization required unde	er state law to make charitable distrib	utions from the gaming proceeds to	
	retain the state gaming license?			Г _{Yes} Г _{No}
b	Enter the amount of distributions	required under state law distributed t	to other exempt organizations or sp	ent
		activities during the tax year 🟲 💲		
Par	columns (III) and (v), a	mation. Complete this part to pr and Part III, lines 9, 9b, 10b, 15b ditional information (see instructi	, 15c, 16, and 17b, as applical	
	Identifier	Return Reference	Explana	tion

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

Name of the organization JOHN E ALEXANDER YMCA COMMUNITY CENTER INC Employer identification number

39-0929462

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 2	BOARD MEMBERS CRYSTAL RIETVELD, JOANN LESTER, AND LESLIE ARENDT HAVE FAMILY RELATIONSHIPS
	FORM 990, PART VI, SECTION A, LINE 6	THE ORGANIZATION HAS MEMBERS BUT NOT STOCKHOLDERS
	FORM 990, PART VI, SECTION A, LINE 7A	MEMBERS SHALL BE ENTITLED TO EXCERCISE ONE VOTE FOR EACH DIRECTOR UP FOR ELECTION AT THE MEMBERS' ANNUAL MEETING, AND SHALL HAVE NO OTHER VOTE IN THE GOVERNANCE OF THE ORGANIZATION
	FORM 990, PART VI, SECTION B, LINE 11	THE 990 IS PREPARED BY WIPFLI, LLP A DRAFT IS REVIEWED BY THE FINANCE COMMITTEE. AFTER FINANCE COMMITTEE APPROVES THE 990, IT IS PRESENTED TO THE BOARD OF DIRECTORS FOR APPROVAL ONCE THE BOARD APPROVES THE 990, WIPFLI FINALIZES THE 990
	FORM 990, PART VI, SECTION B, LINE 12C	ALL NEW BOARD MEMBERS FILL OUT A CONFLICT OF INTEREST WORKSHEET THE POLICY IS REVIEWED EACH YEAR BY THE PERSONNEL COMMITTEE
	FORM 990, PART VI, SECTION B, LINE 15	THE EXECUTIVE DIRECTOR'S COMPENSATION PLAN IS APPROVED BY THE PERSONNEL COMMITTEE AND THE BOARD OF DIRECTORS DURING THE PROCESS OF APPROVING THE EXECUTIVE DIRECTOR'S COMPENSATION, THE PERSONNEL COMMITTEE TAKES A STUDY ON OTHER YMCA'S EXECUTIVE DIRECTOR'S COMPENSATION IN THE MIDWEST REGION FOR COMPARISON ORGANIZATION'S OFFICERS AND KEY EMPLOYEES ARE APPROVED BY THE EXECUTIVE DIRECTOR, THE PERSONNEL COMMITTEE, AND BOARD OF DIRECTORS
	FORM 990, PART VI, SECTION C, LINE 19	THE DOCUMENTS ARE MADE AVAILABLE UPON REQUEST BUT ARE ALSO AVAILABLE THROUGH GUIDESTAR
	FORM 990 PART XII LINE 2C	THE PROCESS IS CONSISTENT WITH THE PRIOR YEAR