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DLN: 93493162004254

Department of the Treasury

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

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

Open to Public

Internal Reven	nue Service	► The organization may have	to use a copy of this return to satisfy	state repor	ting requirem	nents	Inspection
A For the	e 2012 cal		g 09-01-2012 ,2012, and ending 08	-31-2013			
	f applicable	C Name of organization Young Mens Christian Association of	the		D Emplo	yer ident	ification number
Address	_	Greater Houston Area Doing Business As			74-1	109737	
Name ch	=						
Initial re		Number and street (or P O box if m 2600 North Loop West	nail is not delivered to street address) Room/	suite	E Teleph	one numb	er
Termina		·			(713)	659-55	666
Amende		City or town, state or country, and I Houston, TX 77092	ZIP + 4				
і Арріісаті	ion pending	F. Nama and address of some		1		• • •	171,969,203
		F Name and address of prii Clark David Baker	ncipal officer	I	s this a group ffiliates?	return f	or □ Yes 🔽 No
							ed?
I Tax-ex€	empt status	▼ 501(c)(3)	ınsert no)				
J Websi	ite:► ww	w ymcahouston org		H(c) ^G	Group exempt	ion num	ber 🟲
K Form of a	organization	Corporation Trust Associatio	on Other 🌬	l Year	of formation 18	886 M S	itate of legal domicile TX
Part I	_	mary		- 1041	or formation 10	,00 11.0	nate of legal dofficie.
Activities & Governance	life throu	igh programs and services which	of the Greater Houston Area is a Chri n promote healthy living, youth develo scontinued its operations or disposed	opment and s	social respon	isibility t	hroughout the
ž		6 1 611	1 1 (5 1)(7 1 4)			1 - 1	c. a
\$ 3 € 4			ing body (Part VI, line 1a) of the governing body (Part VI, line 1			3 4	61
			calendar year 2012 (Part V, line 2a)			5	6,740
र्वे 6			necessary)			6	16,276
			art VIII, column (C), line 12			7a	C
<u>t</u>	b Net unre	lated business taxable income f	rom Form 990-T, line 34			7b	
					Prior Year		Current Year
9 9		butions and grants (Part VIII, li	ne 1h)	•	22,345,282 87,004,538		15,397,765 97,059,789
9 10 11 10 10		ment income (Part VIII, columr		21,284,407		2,058,371	
# 11		· · ·	lines 5, 6d, 8c, 9c, 10c, and 11e)		504,		627,510
12			(must equal Part VIII, column (A), l	ne	131,138,	000	115,143,435
13			IX, column (A), lines 1-3)		953,	_	2,267,790
14			X, column (A), line 4)		, , ,		0
15	Saları	es, other compensation, employe	ee benefits (Part IX, column (A), lines				
\\ \tilde{\Pi} \\ \frac{\Pi}{2} \\ \langle \(\frac{1}{2} \)	5-10				58,902,813 61,14		
(Ex) (Ex) (Ex) (Ex) (Ex) (Ex) (Ex) (Ex)			column (A), line 11e)	•			0
型 17		ndraising expenses (Part IX, column (Dexpenses (Part IX, column (Δ))	lines 11a-11d, 11f-24e)	_	47,249,	384	49,169,286
18			st equal Part IX, column (A), line 25)		107,105,	_	112,584,909
19	Reven	ue less expenses Subtract line	18 from line 12		24,033,	378	2,558,526
Not Assets or Fund Barances 20 21 22				Begin	ning of Curre Year	nt	End of Year
35 H 20		assets (Part X, line 16)			361,726,		315,513,311
구 및 21 프 등 21				•	206,872,	_	163,542,487
黑正 22 Part II		sets or fund balances Subtract ature Block	line 21 from line 20		154,853,	835	151,970,824
Under pei my knowl	nalties of ledge and has any k	perjury, I declare that I have exploited, it is true, correct, and connowledge ** ature of officer antha Buckner Sr VP CFO	amined this return, including accompany nplete Declaration of preparer (other				
	<u> </u>	or print name and title	Dranarade connatura	Date		LDTIN	
Daid		rint/Type preparer's name ody Blazek	Preparer's signature	Date	Check 🗸 ıf self-employed	PTIN P000726	74
Paid Prepar		irm's name 🕨 Blazek & Vetterling			Firm's EIN 🕨		
Use Oi		irm's address ► 2900 Weslayan Suite 2	00		Phone no (713	3) 439-573	39
JJG VI	y				•		

Houston, TX 770275132

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

✓ Yes ☐ No

Par		atement of Program S eck if Schedule O contains				
1	Briefly de	scribe the organization's mi	ssion			
		n of the YMCA of Greater Ho or all See Schedule O	uston to put Judeo-Chris	tian principles into	practice through programs t	hat build a healthy spirit,
2		ganızatıon undertake any sı Form 990 or 990-EZ?	·	s during the year v	which were not listed on	
	If "Yes," d	lescribe these new services	on Schedule O			
3		ganization cease conducting	=	nges in how it con	ducts, any program	
	If "Yes," d	lescribe these changes on S	chedule O			
4	expenses		(c)(4) organizations are	required to report	ee largest program services, the amount of grants and allo	· · · · · · · · · · · · · · · · · · ·
4a	(Code) (Expenses \$	60,968,368 ınclu	ding grants of \$) (Revenue \$	58,800,248)
		IVINGParticipants 397,673 Facility 5See Schedule O for additional info		ter Houston areaAssist	ance provided to participants in the	form of fee reductions
4b	(Code) (Expenses \$	25,583,917 ınclu	ding grants of \$) (Revenue \$	30,230,764)
	(Adventure		mily Home, and other family	events), YMCA Świm,	Childhood, Infant Care and Middle Sports & Play (Aquatics, Youth Spor dditional information	
4c	(Code) (Expenses \$	11,107,519 ınclu	ding grants of \$	2,267,790) (Revenue \$	8,028,777)
	Core progr Employme	ams, and Social service programs	, YMCA Residences, YMCA Inte	rnational Services, YM	(Afterschool program with enrichme ICA Active Older Adults, YMCA Speci irticipants in the form of fee reduction	al Populations, YMCA
4d	O ther pro	ogram services (Describe ir	Schedule O)			
	(Expense	es\$	ıncludıng grants of \$) (Revenue \$)
4e	Total pro	ogram service expenses 🕨	97,659,804			

art IV	Checklist of	Required	Schedules

2 3 4	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	
3 4	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
4		2	Yes	
	callulates for public office. If Test, complete schedule c, Fait 1	3		No
5	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</i> "Yes," complete Schedule C, Part II	4		Νo
,	Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure $98-19$? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part $I^{\textcircled{\tiny 20}}$	6		No
	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		Νo
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
LO	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	
	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
	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
С	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	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X^{\bullet}	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		No
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
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	Yes	
L3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
L4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, 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
	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
	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
L8	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	
	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	Yes	
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? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, 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	1		l
		28a		No
	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	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
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	Yes	
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?	38	Yes	

	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 68		res	INC
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered			
L	by this return	1		
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	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		N
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		N
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		N
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			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	_		
_		5c		
	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? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6a		N
_	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	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		N
a	11 res, indicate the number of Forms 6262 med during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		N
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		N
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7h		N
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		N
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		N
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		N
LO	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			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
Ь	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
.2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		N
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
.3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		N
L	Note. See the instructions for additional information the organization must report on Schedule O Enter the amount of reserves the organization is required to maintain by the states			<u> </u>
D	in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
.4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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. 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			
	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		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	Yes	
5	Did the organization become aware during the year of a significant diversion of the organization's assets? $$.	5		Νo
6	Did the organization have members or stockholders?	6		No
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		No
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		Νo
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	Yes	
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Yes	
	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	
С	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)			
	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▶
- 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
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►Samantha Buckner CPA 2600 North Loop West Suite 300 Houston, TX (713) 758-9113

Form	990	(2012
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Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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 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

	1	1								
(A) Name and Title	(B) A verage hours per week (list any hours for related	(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-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2,2000 11200,	MISC)	organization and related organizations
See Additional Data Table										
	•	•	•							Form 990 (2012)

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

	(A) Name and Title	(B) Average hours per week (list any hours	more t	tion (han d in is l	ne l both	box, an	heck unless officer stee)	S	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W	-	(F) Estima Imount of compens from t	ted fother ation he
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)		rganizati relate organiza	ed b
1b	Sub-Total			•				>					
c d	Total from continuation sheet Total (add lines 1b and 1c) .				•	•	•	•	2,297,189				360,026
2	Total number of individuals (in \$100,000 of reportable compe	cluding but not	limited	to the	se l	liste	d abov	e) w					300,020
												Yes	No
3	Did the organization list any fo on line 1a? <i>If</i> " <i>Yes,"</i> complete S					key •	emplo	yee, •	or highest compen	sated employee	3		No
4	For any individual listed on line organization and related organ individual										4	Yes	
5	Did any person listed on line 1 services rendered to the organ									or individual for	5	163	No
Se	ection B. Independent Co	ntractors											
1	Complete this table for your five compensation from the organization	ve highest comp										tay vear	
	compensation from the organiz	(A)	ompens.	u (1011	101 1	ciie (arenu	ar ye	ar enamy with or Wi	(R)	1	tax year	

(A) Name and business address	(B)	(C)
	Description of services	Compensation
Sehgal & Sons Enterprises Inc 10501 Corporate Dr Stafford TX 77477	Janitorial	1,556,387
Primetex Corporation 6523 Craigway Spring TX 77389	Building Contractor	1,658,766
CHR Solutions 9700 Bissonnet Suite 2800 Houston TX 77036	IT Managed Services	869,795
Brookstone Corporation 3715 Dacoma Houston TX 77092	Building Contractor	6,337,976
American Janitorial 2951 Marina Bay Drive 130 League City TX 77573	Janıtonal	1,001,118
3. Total number of independent contractors (including but not limited to the	see listed above) who recoived more than	

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 ►20

		Check if Schedule 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
0	1a	Federated campaigns 1a	3,333,174				
Contributions, Giffs, Grants and Other Similar Amounts	ь	Membership dues 1b					
Gra	c	Fundraising events 1c	640,340				
∌હેં		Related organizations 1d	79,136				
<u>≣</u> . ≘	d						
ns.	e	Government grants (contributions) 1e	867,496				
iệ iệ	f	All other contributions, gifts, grants, and 1f similar amounts not included above	10,477,619				
혈통	g	Noncash contributions included in lines					i
Contr and (1a-1f \$		15,397,765			
<u>ة ت</u>	h	Total. Add lines 1a-1f	.	13,337,703			
e E			Business Code				
Program Serwce Revenue	2a .	Refugee resettlement fees	900099	5,868,170	5,868,170		
윤	b	Program fees	713940	34,709,093	34,709,093		
¥ €	^C	Membership dues/assessmts	812900	56,458,588	56,458,588		
ķ	d	Childcare	624100	23,938	23,938		
E	e						
\$	f	All other program service revenue					
<u>Ā</u>	g	Total. Add lines 2a-2f	🛌	97,059,789			
	3	Investment income (including dividend		2,408,663			2,408,663
	4	and other similar amounts) Income from investment of tax-exempt bond in		0			
	5	Royalties	· · · · · · · · · · · · · · · · · · ·	11,387			11,387
		(ı) Real	(II) Personal				
	6a	Gross rents	, ,				
	ь	Less rental expenses					
	c	Rental income					
	d	or (loss) Net rental income or (loss)		0			
	-	(i) Securities	(II) O ther				1
	7a	Gross amount from sales of 46,441,671 assets other than inventory	9,432,505				
	b	Less cost or other basis and sales expenses 45,214,657	11,009,811				
	c	Gain or (loss) 1,227,014	-1,577,306				
	d	Net gain or (loss)		-350,292			-350,292
Other Revenue	8a	Gross income from fundraising events (not including \$640,340 of contributions reported on line 1c) See Part IV, line 18					
<u>u</u>	.	a	645,939				
돌	c b	Less direct expenses b Net income or (loss) from fundraising 6	601,300 events	44,639			44,639
•	9a	Gross income from gaming activities See Part IV, line 19	events p-	11,000			11,033
	ь	Less direct expenses b					
	c	Net income or (loss) from gaming activ	/ities -	o			
	10a	Gross sales of inventory, less returns and allowances .	· ,				
	L	a l					
	b c	Less cost of goods sold b Net income or (loss) from sales of inve	entory 🛌	0			
	<u> </u>	Miscellaneous Revenue	Business Code				<u> </u>
	11a		900099	177,759			177,759
	ь	Insurance proceeds	900099	393,725			393,725
	c	Insurance proceeds		,]			,
	d	All other revenue					1
	e	Total. Add lines 11a-11d	🕨				
				571,484			1
	12	Total revenue. See Instructions	• • • •	115,143,435	97,059,789		2,685,881

	t IX Statement of Functional Expenses				Page 10
	on 501(c)(3) and 501(c)(4) organizations must complete all columns. All	l other organizati	ons must comp	lete column (A)	
	Check if Schedule O contains a response to any question in this Pa	art IX			
	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	0			
2	Grants and other assistance to individuals in the United States See Part IV, line 22	2,267,790	2,267,790		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0	_,		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	2,339,781	2,012,211	280,774	46,796
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	48,803,394	42,898,028	5,071,282	834,084
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	3,256,971	2,846,619	350,941	59,411
9	Other employee benefits	2,445,231	1,954,938	404,140	86,153
10	Payroll taxes	4,302,456	3,731,905	481,595	88,956
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	61,288		61,288	
c	Accounting	87,726		87,726	
d	Lobbying	0			
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	236,586		236,586	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on	3,849,885	2,432,928	1,349,914	67,043
12	Schedule O)	1,022,482	988,341	26,859	7,282
13	Office expenses	8,459,946	6,492,028	1,919,248	48,670
14	Information technology	1,762,422	966,382	774,344	21,696
15	Royalties	1,762,422	900,382	774,344	21,090
16	·	13,767,742	13,341,476	355,080	71 106
17	Occupancy	1,798,731	1,578,557	190,382	71,186
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	1,798,731	1,376,337	190,382	29,792
19	Conferences, conventions, and meetings	260,834	109,772	149,756	1,306
20	Interest	3,748,833	3,426,433	· -	,
21	Payments to affiliates	287,022		287,022	
22	Depreciation, depletion, and amortization	9,530,457	8,691,777	819,619	19,061
23	Insurance	0			
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	Professional development	459,429	407,703	49,935	1,791
b	Camp and other program expense	734,235	734,235		
c	Equipment rental & maintenance	1,266,168	1,196,775	69,393	
d	Refugee job placement expenses	1,464,877	1,464,877		
e	All other expenses	370,623	117,029	247,565	6,029
25	Total functional expenses. Add lines 1 through 24e	112,584,909	97,659,804	13,535,849	1,389,256
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)				

Part X Balance Sheet

Par	t X	Balance Sheet Check if Schedule O contains a response to any question in this Part X			
		, 4	(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	145,100	1	144,350
	2	Savings and temporary cash investments	18,218,442	2	2,555,077
	3	Pledges and grants receivable, net	8,625,110	3	6,658,844
	4	Accounts receivable, net	822,294	4	1,104,866
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	0
ts	6	Loans and other receivables from other disqualified persons (as defined under section $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	0
ŝ	_				0
Assets	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	205 404	8	0
	9	Prepaid expenses and deferred charges	935,194	9	883,934
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 330,351,428			
	b	Less accumulated depreciation			239,676,652
	11	Investments—publicly traded securities	71,726,371	11	48,490,457
	12	Investments—other securities See Part IV, line 11		12	0
	13	Investments—program-related See Part IV, line 11		13	0
	14	Intangible assets		14	0
	15	Other assets See Part IV, line 11	15,242,999	15	15,999,131
	16	Total assets. Add lines 1 through 15 (must equal line 34)	361,726,495	16	315,513,311
	17	Accounts payable and accrued expenses	5,840,529	17	5,003,785
	18	Grants payable		18	
	19	Deferred revenue	3,599,338	19	3,413,119
	20	Tax-exempt bond liabilities	196,365,000	20	154,568,372
9	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilitie	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
豆		persons Complete Part II of Schedule L		22	
ت	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	1,067,793	25	557,211
	26	D	206,872,660	25 26	163,542,487
	26	Total liabilities. Add lines 17 through 25	200,872,000	26	103,342,467
μÇ		lines 27 through 29, and lines 33 and 34.	444.050.000		440.700.000
<u>8</u>	27	Unrestricted net assets	144,350,392		148,796,898
<u> </u>	28	Temporarily restricted net assets	10,503,443	28	3,173,926
Ĭ	29	Permanently restricted net assets		29	
or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here ► ☐ and complete lines 30 through 34.			
ţ	30	Capital stock or trust principal, or current funds		30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
Ą	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net	33	Total net assets or fund balances	154,853,835	33	151,970,824
	34	Total liabilities and net assets/fund balances	361,726,495	34	315,513,311 Form 990 (2012)

Pai	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				৮
1	Total revenue (must equal Part VIII, column (A), line 12)			115.:	.43,435
2	Total expenses (must equal Part IX, column (A), line 25)	2			84,909
3	Revenue less expenses Subtract line 2 from line 1				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	3		2,5	558,526
		4		154,8	353,835
5	Net unrealized gains (losses) on investments	5		-4,6	516,884
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		- 8	324,653
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,	10			70,824
Par	rt XIII Financial Statements and Reporting	10		131,	770,824
	Check if Schedule O contains a response to any question in this Part XII				. ┌
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revia separate basis, consolidated basis, or both	ewed or	ו		
	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 sep basis, consolidated basis, or both	arate			
	Separate basis Consolidated basis Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversign audit, review, or compilation of its financial statements and selection of an independent accountant?	ht of th	e 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	ın			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in t Single Audit Act and OMB Circular A-133?	he	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	require		Yes	
_	audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	,			

Software ID: 12000229 **Software Version:** 2012v2.0

EIN: 74-1109737

Name: Young Mens Christian Association of the

Greater Houston Area

Form 990, Part VII - Compensation of Compensated Employees, and Indepe	Officers, Di	ectors	s,Tru	uste	ees	, Key	, En	nployees, Highe	st	
(A) Name and Title	(B) Average hours per week (list	Positio more unless an o	than	not one on i r an trus	box s bo d a tee)	, th		(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
	any hours for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			related organizations
George C Yang PhD Director	1 00 0 00	x						0	0	0
James D Woods Director	1 00 0 00	x						0	0	0
Willoughby C Williams Jr Director	1 00 0 00	х						0	0	0
Richard W Weekley Director	1 00 0 00	х						0	0	0
Marc Watts Director	1 00 0 00	х						0	0	0
Joseph T Walsh Director	1 00 0 00	x						0	0	0
Barron F Wallace Director	1 00 0 00	х						0	0	0
Gray Wakefield Director	1 00 0 00	х						0	0	0
Paul G Van Wagenen Director	1 00 0 00	х						0	0	0
Carlos J Valdez Director	1 00 0 00	х						0	0	0
Robert C Thomas Director	1 00 0 00	x						0	0	0
Thomas M Simmons Director	1 00 0 00	x						0	0	0
F Max Schuette Director	1 00 0 00	x						0	0	0
Richard Schissler III Director	1 00 0 00	х						0	0	0
Jim Schier Director	1 00 0 00	Х						0	0	0
Joe Rothbauer Director	1 00 0 00	х						0	0	0
Edward Randall IV Director	1 00 0 00	х						0	0	0
Michael J Plank Director	1 00 0 00	Х						0	0	0
Harry J Phillips Jr Director	1 00 0 00	Х						0	0	0
Tommy M Parker Director	1 00 0 00	Х						0	0	0
Louis B Paine Director	1 00 0 00	х						0	0	0
Albert Myres Director	1 00 0 00	Х						0	0	0
Peggy C Montana Director	1 00 0 00	х						0	0	0
Dr Leonard Merrell Director	1 00 0 00	х						0	0	0
D Bradley McWilliams Director	1 00 0 00	х						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest **Compensated Employees, and Independent Contractors** (A) (B) (C) (D) (E) (F) Name and Title Position (do not check Reportable Reportable Estimated amount Average hours more than one box, compensation compensation of other unless person is both per from the from related compensation organization (Worganizations (Wweek an officer and a from the (lıst director/trustee) 2/1099-MISC) 2/1099-MISC) organization and related any Former Highest compensated employee Individual 1 or director hours organizations stitutional for employee related organizations trustaa below Trustee dotted line) 1 00 Robert E McFadden Х 0 0 0 Director 0 00 1 00 Ayse McCracken 0 0 0 Director 0 00 1 00 Byrd Larberg 0 0 0 Х Director 0 00 1 00 Rick Kehr Х 0 0 0 Director 0 00 1 00 Karen Huff 0 0 0 Director 0 00 1 00 Mike Holland 0 0 0 Х Director 0 00 1 00 Judge Richard Hill 0 0 0 Х Director 0 00 1 00 Joel Harmon Х 0 0 0 Director 0 00 1 00 Rey Gonzales Χ 0 0 0 Director 0 00 1 00 Barnett L Gershen 0 0 Х 0 Director 0 00 1 00 Robert R Fretz Х 0 0 0 Director 0 00 1 00 Elvın Franklın 0 0 Director 0 00 1 00 Joe B Foster 0 0 0 Х Director 0 00 1 00 Curtis V Flowers Jr 0 0 Х 0 Director 0 00 1 00 Thomas H Estus 0 0 0 Director 0 00 1 00 Larry Ellis 0 0 0 Х Director 0 00 1 00 John H Duncan 0 0 0 Х Director 0 00 1 00 Robert J Doyle Χ 0 0 0 Director 0 00 1 00 Joel Deretchin 0 0 0 Director 0 00 1 00 Matthew Deal 0 0 0 Х Director 0 00 1 00 Jennifer Davenport Х 0 0 0 Director 0 00 1 00 Greg Curren 0 0 0 Director 0 00 1 00 Judy D Cox 0 0 0 Х Director 0 00 1 00 Charles E Comisky 0 0 Х 0 Director 0 00 1 00 Glenn H Clements 0 0 Director 0 00

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Indeper		actors						I	I	
(A) Name and Title	(B) Average hours per week (list any	dired	than	o not n one son is er and trust	box, s bot d a tee)	th		(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
	hours for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			organizations
Theresa Chang Director	1 00 0 00	х						0	0	0
Rev Kırbyjon Caldwell Dırector	1 00 0 00	х						0	0	0
Dan Bellow Director	1 00 0 00	х						0	0	0
John C Bass Director	1 00 0 00	х						0	0	0
Harry S Badger Director	1 00 0 00	х						0	0	0
Gerri D Ayers Director	1 00 0 00	х						0	0	0
Karl Amelang Director	1 00 0 00	х						0	0	0
Michael R Logan Vice Chairman	1 00 0 00	х		х				0	0	0
David Ley Vice Chairman	1 00 0 00	х		х				0	0	0
John Arnoldy Vice Chairman	1 00 0 00	х		х				0	0	0
Howard Tellepsen Chairman	1 00 0 00	х		х				0	0	0
Paul McEntire Sr VP/COO	40 00 0 00			х				276,128	0	53,676
Michael Emmons Sr VP/CFO	40 00			х			'	283,522	0	38,284
Clark David Baker President/CEO	40 00 0 00			х				601,753	0	56,515
Kenneth G Harris VP Corp Svcs	40 00 0 00				х		<u> </u>	178,251	0	38,435
David L Snow Sr VP/Assn Adv	40 00 0 00				х			221,003	0	46,703
Steve Peterson Grp Exec Director	40 00 0 00					х	<u> </u>	149,309	0	43,925
Trazanna L Moreno SVP Marketing	40 00 0 00					х	<u> </u>	154,804	0	19,145
Linda Falsone-Lykos VP Fin Development	40 00 0 00					х	<u> </u>	161,191	0	19,889
Mary M Mossing VP Operations	40 00 0 00					х	<u> </u>	140,394	0	20,724
Nancı H Rutledge VP Fın Development	40 00					x		130,834	0	22,730

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DLN: 93493162004254

OMB No 1545-0047

Employer identification number

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.

Inspection

		Christian A ton Area	ssociation of tl	he					74-11097	737	
Pa	rt I	Reas	on for Pu	blic Charity Sta	tus (All ord	anızatıons	must comi	olete this			 i.
				te foundation becaus							
1	Г			on of churches, or a							
2	Г		•	in section 170(b)(1				•			
3				perative hospital se			•	n 170(b)(1)(A)(iii).		
4	Ė			h organızatıon operat						1)(A)(iii).	Enter the
	•			ty, and state						-/(/	
5	Γ	Anorg	anızatıon op	erated for the benefi	t of a college	or universi	ty owned or o	perated by	a government	tal unit des	cribed in
		sect ior	170(b)(1)((A)(iv). (Complete P	art II)						
6	\sqcap	A feder	al, state, or	local government or	government	al unit desc	rıbed ın secti	on 170(b)(1)(A)(v).		
7	\vdash			at normally receives			support from	a governm	ental unıt or fı	rom the gen	eral public
_	_			on 170(b)(1)(A)(vi).							
8	 		-	described in section			•	-			
9	~			at normally receives							
				ities related to its ex							
		-	_	oss investment inco				-		tax) from bi	ısınesses
	_			ganızatıon after June							
10	<u> </u>	_		ganized and operated							
11	ı			ganized and operated							
				ly supported organız bes the type of supp						ee section :	509(a)(3). Check
				b Type II c						on-function	ally integrated
e	Γ	By che	cking this b	ox, I certify that the	organization	ıs not contr	olled directly	or indirect	ly by one or n	nore disqua	lified persons
				on managers and ot	her than one	or more pub	licly support	ed organıza	tions describ	ed in sectio	n 509(a)(1) or
_			1509(a)(2)				.				
f			rganization this box	received a written de	etermination	from the IR	S that it is a	iype i, iyp	e II, or I ype	III support	ing organization,
g				2006, has the organi	ızatıon accer	oted any gift	or contributi	on from anv	of the		•
•			ng persons?	, .		, 5		- · · · · · · · · · · · · · · · · · · ·			
		(i) A p	erson who d	irectly or indirectly o	ontrols, eith	er alone or t	ogether with	persons de	scribed in (ii)		Yes No
		and (111) below, the	governing body of th	ie supported	organization	۱۶			119	y(i)
		(ii) A f	amıly memb	er of a person descr	ıbed ın (ı) abı	ove?				11 g	(ii)
		(iii) A	35% contro	lled entity of a perso	n described	ın (ı) or (ıı) a	above?			11g	(iii)
h		Provide	e the follown	ng information about	the supporte	ed organızat	ıon(s)				
									_		
•	i) Nam		(ii) EIN	(iii) Type of	(iv) Is t		(v) Did you		(vi) Is		(vii) A mount of
	suppoi			organization	organizati	_	the organiz		organizati		monetary
OI	ganiz	ation		(described on lines 1- 9 above	col (i) list your gove		ın col (i) o suppor		col (i) org		support
				or IRC section	docume		Заррог	•	"" נווכ ט	J	
				(see							
				instructions))	Yes	No	Yes	No	Yes	No	1
							 		1		1
			-			 		-	+		

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	,rF3	▶ □
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.)

Se	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	20,545,52	2 18,827,750	23,064,934	22,345,282	15,397,765	100,181,253
	grants ")						
2	Gross receipts from admissions, merchandise sold or services						
	performed, or facilities furnished	00 747 15	00 004 055	02.145.640	07.004.530	07.050.700	427.042.001
	in any activity that is related to	80,747,15	80,984,955	82,145,649	87,004,538	97,059,789	427,942,081
	the organization's tax-exempt purpose						
3	Gross receipts from activities						
	that are not an unrelated trade or business under section 513						U
4	Tax revenues levied for the						
•	organization's benefit and either						C
	paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without						C
6	charge Total. Add lines 1 through 5	101,292,67	2 99,812,705	105,210,583	109,349,820	112,457,554	528,123,334
	Amounts included on lines 1, 2,	101,252,07	33,012,703	103,210,303	105/3/15/020	112,137,331	320,123,33
,	and 3 received from disqualified persons	147,53	6 261,950	1,596,429	222,200	991,201	3,219,316
b	Amounts included on lines 2 and						
	3 received from other than						
	disqualified persons that exceed the greater of \$5,000 or 1% of						C
	the amount on line 13 for the						
	year						
C	Add lines 7a and 7b	147,53	6 261,950	1,596,429	222,200	991,201	3,219,316
8	Public support (Subtract line 7c						524,904,018
Se	from line 6) ction B. Total Support						
	ndar year (or fiscal year	(=) 2008	(b) 2000	(-) 2010	(4) 2011	(5) 2012	(6) Total
	beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	A mounts from line 6	101,292,672	99,812,705	105,210,583	109,349,820	112,457,554	528,123,334
L0a	Gross income from interest,						
	dividends, payments received on securities loans, rents,	5,450,964	4,844,656	3,649,744	2,929,425	2,420,050	19,294,839
	royalties and income from	3,130,301	1,011,030	3,013,711	2,323,123	2, 120,030	13,231,033
	sımılar sources						
b	Unrelated business taxable						
	income (less section 511						0
	taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b	5,450,964	4,844,656	3,649,744	2,929,425	2,420,050	19,294,839
11	Net income from unrelated				·		
	business activities not						
	included in line 10b, whether or						0
	not the business is regularly carried on						
12	Other income Do not include						
	gain or loss from the sale of						0
	capital assets (Explain in Part IV)						v
13	Total support. (Add lines 9,	106,743,636	104,657,361	108,860,327	112,279,245	114,877,604	547,418,173
14	10c, 11, and 12) First five years. If the Form 990 is	I s for the organiza	ltion's first, second	d, third, fourth, or	fifth tax year as a	<u> </u> a 501(c)(3) organ	ızatıon,
	check this box and stop here	hlia Comercia i i)				<u>►</u>
	ction C. Computation of Pu Public support percentage for 201			12		T T	
15	• • • •		• •	13, column (T))		15	95 890 %
16	Public support percentage from 20					16	95 810 %
	ction D. Computation of In						
17	Investment income percentage fo				nn (f))	17	3 520 %
18	Investment income percentage fro					18	3 760 %
19a	33 1/3% support tests—2012. If the						line 17 is not

^{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

DLN: 93493162004254

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

Open to Public

ema	Revenue Service	m 990. ► See separate instructions.		Inspection
You	me of the organization ng Mens Christian Association of the		Emp	loyer identification number
	ater Houston Area	stand Francis - Other City -		1109737
26	rt I Organizations Maintaining Donor Advorganization answered "Yes" to Form 990		unds	or Accounts. Complete if the
	organization unovered Tes to Fermi 330	(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 advı	sed Yes No
	Did the organization inform all grantees, donors, and dused only for charitable purposes and not for the bene- conferring impermissible private benefit?			
a Pa	rt II Conservation Easements. Complete if	the organization answered "Yes" t	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 Complete lines 2a through 2d if the organization held a	or education) Preservation of ar Preservation of a	certified	d historic structure
	easement on the last day of the tax year			11-11-11-5-1-6-1-W
_	Total number of conservation easements			Held at the End of the Year
a L	Total acreage restricted by conservation easements		2a	
b	Number of conservation easements on a certified histo	oric structure included in (a)	2b	_
C	Number of conservation easements included in (c) acc	, ,	2c	
d	historic structure listed in the National Register	quired after 0/17/00, and not on a	2d	
	Number of conservation easements modified, transfer	red, released, extinguished, or terminate	ed by th	e organization during
	the tax year 🛌			
	Number of states where property subject to conservat	ion easement is located ▶		
	Does the organization have a written policy regarding enforcement of the conservation easements it holds?	the periodic monitoring, inspection, han	dling 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	and enforcing conservation easement	s durina	the year
	►\$	g, and emoreting conservation casement	o daring	g the year
	Does each conservation easement reported on line 2(and section 170(h)(4)(B)(ii)?	d) above satisfy the requirements of sec	ction 17	7 0 (h)(4)(B)(ı)
	In Part XIII, describe how the organization reports co balance sheet, and include, if applicable, the text of th	e footnote to the organization's financia		
ar	the organization's accounting for conservation easement IIII Organizations Maintaining Collection		or Otl	ner Similar Assets
_	Complete if the organization answered "Y			J
a	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar assesservice, provide, in Part XIII, the text of the footnote to	ts held for public exhibition, education,	or rese	arch in furtherance of public
b	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar assesservice, provide the following amounts relating to thes	ts held for public exhibition, education,		
	(i) Revenues included in Form 990, Part VIII, line 1			► \$
	(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			
a	Revenues included in Form 990, Part VIII, line 1			► \$
				· +

b Assets included in Form 990, Part X

Part	Organizations Maintaining Co	illections of Ar	t, His	toricai i	<u>reasu</u>	res, or O	<u>tne</u>	<u>r Similar <i>i</i></u>	Asset	S (co.	<u>ntınued)</u>
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other reco	rds, ch	neck any of	the foll	owing that a	re a	sıgnıfıcant u	se of it	S	
а	Public exhibition		d	┌ Loan	or excl	hange progra	ams				
b	Scholarly research		e	┌ Othe	r						
c	Preservation for future generations										
4	Provide a description of the organization's c Part XIII	ollections and expla	aın hov	w they furth	er the c	organization	's ex	cempt purpos	e ın		
5	During the year, did the organization solicit							nılar	_		_
	assets to be sold to raise funds rather than		-						<u> </u>	es	☐ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an ar					n answered	1 "Y	es" to Forn	1 990, 		
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?				utions (or other ass	ets ı	not	┌ Y	es	┌ No
b	If "Yes," explain the arrangement in Part XI	II and complete the	e follov	ving table		_					
							_		Amoun	<u>t </u>	
с	Beginning balance					-	1c				
d	Additions during the year					<u> </u>	1d				
е	Distributions during the year					L	1e				
f	Ending balance						1f				
2a	Did the organization include an amount on F	orm 990, Part X, lın	ne 21?						ΓY	es	┌ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	e expla	nation has	been p	rovided in P	art >	XIII			Γ
Pai	rt V Endowment Funds. Complete										
		(a)Current year	(b)	Prior year				Three years bac			ars back
1a	Beginning of year balance	6,563,205		6,326,285	-	5,172,490		4,939,62	_		5,778,395
b	Contributions	131,748		28,030	'	679,715		63,8	53		43,049
C	Net investment earnings, gains, and losses	775,044		265,161		531,859		205,39	97		-866,428
d	Grants or scholarships										
e	Other expenditures for facilities	79,136		56,271		46,856		36,39	92		12,074
£	and programs	3,068		·		10,923					3,320
g	End of year balance	7,387,793		6,563,205	:	6,326,285		5,172,49	90		4,939,622
	·		//					-,,			.,,
2	Provide the estimated percentage of the cur	rent year end balan 70 470 %	ice (iin	ie 1g, colun	nn (a)) i	neid as					
а	Board designated or quasi-endowment	70 470 70									
b	Permanent endowment ► 18 930 %										
C	Temporarily restricted endowment ► 10 The percentages in lines 2a, 2b, and 2c sho	600 % uld equal 100%									
3a	Are there endowment funds not in the posse organization by	ssion of the organiz	zation	that are hel	d and a	dministered	l for	the	г	Vac	N-
	(i) unrelated organizations							Г	Ba(i)	Yes	No No
	(ii) related organizations							<u> </u>		Yes	
b	If "Yes" to 3a(II), are the related organization						٠.	`. `. <u>`</u>		Yes	
4	Describe in Part XIII the intended uses of t	he organızatıon's er	ndowm	ent funds				_			
Par	t VI Land, Buildings, and Equipme	ent. See Form 99	90, Pa								
	Description of property			(a) Cost or basis (invest		(b)Cost or other		(c) Accumulation		d) Boo	ok value
				l .							
1a	_and					26,353,	125			26	5,353,125
	and					26,353, 193,146,		37,216,	133		5,353,125 5,930,744
b I			· ·				,877	37,216, 26,769,	_	15!	
b	Buildings		· · ·			193,146,	,877 ,915		499	15! 40	5,930,744
b c d	Buildings		· · ·			193,146, 67,395,	,877 ,915 ,752	26,769,	499	155 40 13	5,930,744

Investments—Other Securities. See			
(a) Description of security or category (including name of security)	(b)Book value		of valuation year market value
		Cost of elia-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)			
Part VIII Investments—Program Related. Se			
(a) Description of investment type	(b) Book value		of valuation
		Cost or end-of-	year market value
	-		
	+		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, III	ne 15		
(a) Descri			(b) Book value
(1) Property held for resale			6,881,518
(2) Derivative agreements			175,347
(3) Bond proceeds held in trust			5,670,222
(4) Bond Issuance costs			3,272,044
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15	:)	<u>.</u>	15,999,131
			13,777,131
Part X Other Liabilities. See Form 990, Part > 1 (a) Description of liability	(b) Book value		
1 (a) Description of liability	(b) Book value		
Federal income taxes			
Funds held in trust	36,280		
Due to Endowment Foundation	25,000		
Construction Payable			
Construction (ayabic	495,931		
	1		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶	557,211		

XI Reconciliation of Revenue per Audited Financial Statements With Revenue	per Re	eturn
Total revenue, gains, and other support per audited financial statements	1	111,117,62
Amounts included on line 1 but not on Form 990, Part VIII, line 12		
Net unrealized gains on investments	<u>+</u>	
Donated services and use of facilities		
Recoveries of prior year grants		
Other (Describe in Part XIII)	2	
Add lines 2a through 2d	2e	-3,710,09
Subtract line 2e from line 1	3	114,827,71
Amounts included on Form 990, Part VIII, line 12, but not on line 1		
Investment expenses not included on Form 990, Part VIII, line 7b . 4a 236,580	5	
Other (Describe in Part XIII) 4b 79,130	;	
Add lines 4a and 4b	4c	315,72
Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	115,143,43
XII Reconciliation of Expenses per Audited Financial Statements With Expense	sper	Return
Total expenses and losses per audited financial statements	1	112,351,39
A mounts included on line 1 but not on Form 990, Part IX, line 25		
Donated services and use of facilities	_	
Prior year adjustments	_	
Other losses		
Other (Describe in Part XIII)	4	
Add lines 2a through 2d	2e	82,20
Subtract line 2e from line 1	3	112,269,18
Amounts included on Form 990, Part IX, line 25, but not on line 1:		
Investment expenses not included on Form 990, Part VIII, line 7b 4a 236,58	5	
Other (Describe in Part XIII)	5	
Add lines 4a and 4b	4c	315,72
Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	112,584,90
	Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12 Net unrealized gains on investments	Total revenue, gains, and other support per audited financial statements

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
Part XII, Line 4b	Part XII, Line 4b Other revenue amounts included on 990 but not included in F/S	Grant from Endowment \$79136
Part XII, Line 2d	Part XII, Line 2d Other expenses and losses per audited F/S	Expenses - YMCA Endowment \$82204
Part XI, Line 4b	Part XI, Line 4b Other revenue amounts included on 990 but not included in F/S	Grant from Endowment \$79136
Part XI, Line 2d	Part XI, Line 2d Other revenue amounts included in F/S but not included on form 990	Revenue - YMCA Endowment \$906792
Part V, Line 4	Part V, Line 4 Intended uses of the endowment fund	The YMCA Endowment Foundation exists for the purpose of furnishing assistance and support to the charitable and educational programs of the YMCA of the Greater Houston Area

DLN: 93493162004254

OMB No 1545-0047

(Form 990 or 990-EZ) Department of the Treasury

Name of the organization

Internal Revenue Service

SCHEDULE G

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.

Supplemental Information Regarding

Open to Public Inspection

Employer identification number

	ı Mens Christian Associatio er Houston Area	on of the					74-1109737	
Par	Fundraising Act	ivities. Complete	e if the o	rganızat	on answered "Yes" t	to Form	990, Part IV	, line 17.
a b c d 2a	Indicate whether the organ Mail solicitations Internet and email solic Phone solicitations In-person solicitations Did the organization have a or key employees listed in life as to be compensated at least	citations written or oral agre Form 990, Part VII t paid individuals or	ement wit) or entity entities (f	e f g h any Indi in connec	Solicitation of non Solicitation of gov Special fundraisin vidual (including officeration with professional f	n-governn vernment og events rs, directo fundraisin	nent grants grants ors, trustees g services?	└ Yes └ N andraiser is
) Name and address of individual or entity (fundraiser)	(ii) Activity	fundrai cust cont	Did ser have ody or crol of outions?	(iv) Gross receipts from activity	(or re fundrai	ount paid to tained by) serlisted in ol (i)	(vi) A mount paid to (or retained by) organization
			Yes	No				
•								
•								
•								
Total				-				
3	List all states in which the o	organization is regis	stered or li	censed to	 	 een notifie	d it is exempt	from registration or

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 1 more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 2 events with gross receipts greater than \$5,000.							
			(a) Event #1 Run Thru Woods (event type)	(b) Event #2 Turkey Dash (event type)	(c) O ther events 11 (total number)	(d) Total events (add col (a) through col (c))	
E E	1	Gross receipts	285,037	238,512	762,730	1,286,279	
Revenue	2	Less Contributions	141,250	116,880	382,210	640,340	
<u>~</u>	3	Gross income (line 1 minus line 2)	143,787	121,632	380,520	645,939	
	4	Cash prizes	450		500	950	
မှာ	5	Noncash prizes	500		2,225	2,725	
Expenses	6	Rent/facility costs		5,100	16,245	21,345	
ă	7	Food and beverages .		345	4,390	4,735	
Direct	8	Entertainment	2,100		375	2,475	
ā	9	Other direct expenses .	97,127	49,853	422,090	569,070	
	10	Direct expense summary Add lin	es 4 through 9 ın column	(d)		(601,300)	
	11	Net income summary Combine li	ne 3, column (d), and line	10	$(x_1, x_2, x_3, x_4, x_4, \bullet) \blacktriangleright ($	44,639	
Par	t II	Gaming. Complete if the or \$15,000 on Form 990-EZ, lii		'Yes" to Form 990, Pa	rt IV, line 19, or repo	rted more than	
Revenue			(a) Bingo	(b) Pull tabs/Instant pingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))	
	1	Gross revenue					
Expenses	2	Cash prizes					
xper	3	Non-cash prizes					
	4	Rent/facility costs					
Direct	5	Other direct expenses					
	6	Volunteer labor	Г Yes Г No	Г Yes Г Nо	Г Yes Г Nо	,	
	7	Direct expense summary Add line	s 2 through 5 in column (d	1)			
	8	Net gaming income summary Com	bine lines 1 and 7 in colu	mn (d)	<u> ▶</u>		
9 a b	Ist	er the state(s) in which the organizathe organization licensed to operate	gaming activities in each	of these states?		. 「Yes 「No	
10a	 \\/e	re any of the organization's gaming					
b		Yes," explain				· · I Yes I No	

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 I

(Form 990)

Department of the Treasury

Internal Revenue Service

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

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

▶ Attach to Form 990

OMB No 1545-0047

2012

DLN: 93493162004254

Open to Public
Inspection

Name of the organization Employer identification number Young Mens Christian Association of the 74-1109737 Greater Houston Area Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and √ Yes Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States 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. Part II can be duplicated if additional space is needed. (f) Method of (a) Name and address of **(b)** EIN (d) A mount of cash (g) Description of (h) Purpose of grant (c) IRC Code (e) A mount of nonvaluation non-cash assistance or assistance organization section grant cash or government if applicable assistance (book, FMV, appraisal, other)

Enter total number of section 501(c)(3) and government 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. Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d) A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) Refugee assistance	1110	2,267,790			

Part IV Supplemental Information.

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier	Return Reference	Explanation
Grantmaker's Description of How Grants are Used		Monitoring of Refugee Assistance Direct assistance to International Refugees takes two forms, direct payments to vendors, primarily expenses related to housing, and cash assistance which is meant for all other living expenses. Clients are counseled on the use of these funds and agree not to access public cash assistance during the program period. Governmental agencies awarding these grants conduct periodic program and financial audits of the YMCA to ensure funds are being used according to the terms of the grant Monitoring of Fee Reductions. Because the demand for financial assistance is great, the YMCA must follow eligibility guidelines. Scholarships are awarded on a first come, first served basis, subject to available resources. Applicants are asked to pay some portion of the fees. If acceptable, a volunteer work program will be arranged. Applicants must complete a Financial Assistance Information form and are required to provide proof of income. Subsidies will be granted to the extent that funds are available. Financial assistance is reviewed for eligibility annually for YMCA programs. The YMCA monitors the use of subsidies by tracking the applicant's attendance in the program and their participation in bearing a portion of the cost. Additionally, the Senior Compliance Auditor conducts periodic audits to ensure compliance with YMCA policy in the distribution and monitoring of scholarships.
Additional Supplemental Information		Part III, Line 1 - Additional Grants and Other Assistance to Individuals The YMCA also provides assistance to individuals in the form of reductions in the amount of fees charged to participate in programs. Please see below for information regarding such assistance grouped by program Healthy Living 128,738 recipients, \$4,505,845 in assistance Youth Development.

86,230 recipients, \$3,880,341 in assistanceSocial Responsibility 114,651 recipients, \$2,345,238 in assistance

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DLN: 93493162004254

OMB No 1545-0047

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Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

Compensation Information

► Attach to Form 990. ► See separate instructions.

Name of the organization Young Mens Christian Association of the Greater Houston Area

Employer identification number

74-1109737

Pa	Questions Regarding Compensation					
					Yes	No
1a	Check the appropriate box(es) if the organization provide 990, Part VII, Section A, line 1a Complete Part III to p					
	First-class or charter travel	,	Housing allowance or residence for personal use			
	✓ Travel for companions	<u>'</u>	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	<u></u>	Health or social club dues or initiation fees			
	Discretionary spending account	_	Personal services (e g , maid, chauffeur, chef)			
	, , , , ,		, , , , , ,			
ь	If any of the boxes in line 1a are checked, did the organi	ızatı	on follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses descri			1b	Yes	
2	Did the organization require substantiation prior to reimb	burs	ing or allowing expenses incurred by all officers,			
	directors, trustees, and the CEO/Executive Director, reg	gard	ling the items checked in line 1a?	2	Yes	
3	Indicate which, if any, of the following the filing organizat	tıon	used to establish the compensation of the			
_	organization's CEO/Executive Director Check all that a	pply	y Do not check any boxes for methods			
	used by a related organization to establish compensatio	n of	the CEO/Executive Director, but explain in Part III			
	Compensation committee	Γ	Written employment contract			
	•	굣	Compensation survey or study			
	Form 990 of other organizations	굣	Approval by the board or compensation committee			
4		VII	, Section A, line 1a with respect to the filing organization			
	or a related organization					
а	Receive a severance payment or change-of-control payr	men	t?	4a	Yes	
b	Participate in, or receive payment from, a supplemental	non	qualified retirement plan?	4b		Νo
C	Participate in, or receive payment from, an equity-based	d co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide	le th	e applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must ∞	omp	olete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line compensation contingent on the revenues of	e 1 a	, did the organization pay or accrue any			
а	The organization?			5a		No
ь	•			5b		No
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in Form 990, Part VII, Section A, line compensation contingent on the net earnings of	e 1 a	, did the organization pay or accrue any			
а	The organization?			6a		No
ь	Any related organization?			6b		No
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, line	ב 1 ב	did the organization provide any non-fixed			
•	payments not described in lines 5 and 6? If "Yes," desc			7		Νo
8	Were any amounts reported in Form 990, Part VII, paid					
	subject to the initial contract exception described in Reg in Part III	gula	tions section 53 4958-4(a)(3)? If "Yes," describe	_		l
				8		No
9	If "Yes" to line 8, did the organization also follow the reb	outta	able presumption procedure described in Regulations			N.o.

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

Note. The sum of columns (B)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title	(B) Breakdown of	f W-2 and/or 1099-MI:	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of	(F) Compensation	
	(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation	benefits	columns (B)(ı)-(D)	reported as deferred in prior Form 990	
See Additional Data Table								

Schedule J (Form 990) 2012

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

Identifier	Return Reference	Explanation
Sch J, Part I, Line 1a	Part I, Line 1a Relevant information	The value of spouse travel provided to persons listed in Part VII is as follows Clark David Baker \$500Paul
	ın regards to selections on 1a	McEntire \$538These amounts were not treated as taxable compensation to the above individuals

Schedule J (Form 990) 2012

Software ID: 12000229

Software Version: 2012v2.0

EIN: 74-1109737

Name: Young Mens Christian Association of the

Greater Houston Area

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

			0, 2p.0,000, a		Sutou Employees		
(A) Name	(B) Breakdown o	of W-2 and/or 1099-MIS	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation reported in prior Form
	(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) O ther compensation	compensation	benefits	(B)(ı)-(D)	990 or Form 990-EZ
Trazanna L Moreno (1)	154,804			18,557	588	173,949	
Steve Peterson (I	135,725	13,584		19,336	24,589	193,234	
Paul McEntire (1	- 1		4,127	30,000	23,676	329,804	
Nancı H Rutledge (ı	. 1	10,167		15,685	7,045	153,564	
Michael Emmons (i	241,425	29,295	12,802	30,000	8,284	321,806	
Mary M Mossing (I	140,394			14,529	6,195	161,118	
Lında Falsone-Lykos (ı	148,528	12,663		19,325	564	181,080	
Kenneth G Harris (i)	167,038	11,213		22,155	16,280	216,686	
David L Snow (I	198,834	22,169		27,688	19,015	267,706	
Clark David Baker (i		55,890	40,194	30,000	26,515	658,268	

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DLN: 93493162004254 OMB No 1545-0047

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Employer identification number

Supplemental Information on Tax Exempt Bonds ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions,

explanations, and any additional information in Part VI.

Department of the Treasury Internal Revenue Service

(Form 990)

Name of the organization

Young Mens Christian Association of the Greater Houston Area

► Attach to Form 990. ► See separate instructions.

74-1109737

Pa	rt I Bond Issues												
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(1	(f) Description of purpose	(g) De	(g) Defeased		(h) On behalf of issuer		Pool ncing
								Yes	No	Yes	No	Yes	No
A	Harrıs Cty Cultural Edu F	52-1284201		02-28-2013	21,695,000	Refu	und bonds issued 6/25/08		×		Х		X
В	Harrıs Cty Cultural Edu F	52-1284201		02-28-2013	21,695,000	Refu	und bonds issued 6/25/08		Х		Х		Х
c _	Harrıs Cty Cultural Edu F	52-1284201	414009FD7	02-28-2013	42,600,000	Refu	und bonds issued 6/25/08		Х		Х		Х
D_	Harrıs Cty Cultural Edu F	52-1284201	414009ES5	02-28-2013	70,893,372	Refu	und bonds issued 6/25/08		Х		Х		Х
Pa	rt III Proceeds							•	•	•			
					Α		В		С			D	
1	A mount of bonds retired				810,	,000	810,000		69	5,000			
2	Amount of bonds legally defe	ased											
3	Total proceeds of issue				21,695,	,000	21,695,000		42,60	0,000		70,	893,372
4	Gross proceeds in reserve fu	nds			5,670,	,000						5,	670,000
5	Capitalized interest from proc	ceeds											
6	Proceeds in refunding escrow	/s											

Issuance costs from proceeds 7 173,089 173,089 339,875 573,474 Credit enhancement from proceeds 8

Working capital expenditures from proceeds 9 Capital expenditures from proceeds 10

Other spent proceeds

Were the bonds issued as part of a current refunding issue?

Has the final allocation of proceeds been made?

Were the bonds issued as part of an advance refunding issue?

Other unspent proceeds Year of substantial completion

2010 Yes Χ

Χ

Χ

Yes

21,521,911

No

Χ

2010

Yes

Х

Χ

Χ

Yes

21,521,911

Χ

No Yes

Χ

Χ

Χ

2010 No

Χ

42,260,125

2010 Yes No Χ

Χ

Χ

D

Schedule K (Form 990) 2012

64,649,898

Χ

Χ

allocation of proceeds? Part | III Private Business Use

11

12

13

14

15

16

17

1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?
2	Are there any lease arrangements that may result in private business use of bond-financed property?

Does the organization maintain adequate books and records to support the final

wned	
ond-	

Χ

No

В No Χ Χ

С Yes

No No Yes Χ Χ

Α

Sche	dule K (Form 990) 2012									Page 2
Par	Private Business Use (Continued)									
				A		В		C		D
_	Are there any management or service contracts that may result in private	huginoss uso	Yes	No	Yes	No	Yes	No	Yes	No
3a	of bond-financed property?	busilless use		X		X		X		X
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or counsel to review any management or service contracts relating to the fina property?									
С	Are there any research agreements that may result in private business use financed property?		х		х		Х		×	
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or counsel to review any research agreements relating to the financed proper									
4	Enter the percentage of financed property used in a private business use b other than a section $501(c)(3)$ organization or a state or local government		%		%	%		% %		
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501 (c)(3) organization, or a state or local government			%	%		%		%	
6	Total of lines 4 and 5			%		%		Q	/o	%
7	Does the bond issue meet the private security or payment test?			Х		Х		Х		Х
8a	Has there been a sale or disposition of any of the bond financed property to nongovernmental person other than a 501(c)(3) organization since the bon issued?		х		X		X		х	
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of			%		%		0	/o	%
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations : 1 141-12 and 1 145-2?									
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1 141-12 and 1 145-2?				Х		Х		х	
Par	t IV Arbitrage							'	-	•
	-	А		В		С		D		
		Yes	No Yes		No Y		Yes No		Yes	No
1	Has the Issuer filed Form 8038-T?		Х	X		X		Х		Х
2	If "No" to line 1, did the following apply?									
а	Rebate not due yet?									
b	Exception to rebate?									
c	No rebate due?									
	If you checked "No rebate due" in line $2c$, provide in Part VI the date the rebate computation was performed									
3	Is the bond issue a variable rate issue?									
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X		Х		<u> </u>		х	
b	Name of provider									
С	Term of hedge									
d	Was the hedge superintegrated?									
e	Was a hedge terminated?									

and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?

Pa	Arbitrage (Continued)								
		A		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		х		Х		Х		×
b	Name of provider								
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?		Х		Х		Х		Х
7	Has the organization established written procedures to monitor the requirements of section 148?	Х		х		×		х	
Pa	rt V Procedures To Undertake Corrective Action								
		A B		}	С		D		
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified	×		X		×		Х	

Part VI	Supplemental Info	ormation. Complete this part to p	provide additional information for responses to questions on Schedule K (see instructions).
	Identifier	Return Reference	Explanation

Schedule K (Form 990) 2012

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DLN: 93493162004254

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.

2012
Open to Public Inspection

Name of the organization	Employer ident if i	cation number
Young Mens Christian Association of the		
Greater Houston Area	74-1109737	

Identifier	Return Reference	Explanation
	Part III, Line 4c - Social Responsibility Program	Line 4c (Expenses \$11,107,519 including grants of \$2,267,790) (Revenue \$8,028,777)The YMCA is committed to moving people and communities flow and To bring about meaningful change, individuals need orgoing encouragement and tools. For the last 125 years, the YMCA of Grea ter Houston has actively provided the resources our communities need to address the most pressing social issues child welfare, education, employment, housing and substance abuse. We work to make sure every child, family and community charters with they need to achieve their best 1) yMCA Caring Community Centers. The YMCA Caring Community Centers vision is to transform apartment complexes into "communities of caring" in which children thrive and feel a sense of belonging and where all children, in these programs, believe that they "belong" to the YMCA located within their apartment complex. This model is based upon building a YMCA program presence within an individual apartment community and providing a standardize diset of programs for the residents. The Y serves in 21 Caring Community Centers in Houston and offers programs such as Aftersohol Program with Enrichment Activities. The YMCA offers after-school "drop-in" program for children that includes homework assistance, games and activities, and snacks in addition, the YMCA provides activities that might include classes such as dance, karate, Writers in the Schools, art, etc. Summer Programs. The YMCA of fers a partial (four hour) day program for 4-6 weeks during the summer much like the after-school program in many cases, the programs. "wrapped-around" the free lunch program for residents Core Programs. The YMCA aringes for children to participate in traditional core programs of the YMCA which may include away in

Identifier	Return Reference	Explanation
	Part III, Line 4c - Social Responsibility Program	variety of programs and services to people of all abilities, including those with psychiat ric or physical disabilities. The Miracle League Sports program at the Langham Creek YMCA is designed specifically for children with disabilities. The goals of the League are to provide opportunities for children with disabilities to play Miracle League sports, to promotie community support and to begin the construction of special facilities that meet the unique needs of Miracle League players. The Miracle League removes the barriers that keep children with mental and physical disabilities off the sports field and allows them to experie note the joy of playing as part of a team. One of the main barriers for these children is the natural grass field used in conventional youth leagues. The Miracle League plays on a clustom-designed, rubberized turfifield that accommodates wheelchairs and other devices while helping to prevent injuries. But the Miracle League is about more than playing a game. It is about making new friends, building self-esteem and being treated just like other kids. To help the athletes, the Miracle League uses a buddy system pairing each player with an able-bodied peer. The result is a bond that cannot be described and an impact not only on the player, but their buddy as well. We cannot change or cure the medical issues facing these children. What we can do is provide them with an opportunity to experience the joy and benefits that come from playing as a part of the team! 6) YMCA Employment Development and Training - The YMCA offers employment training for income eligible young people and immigrants in collaboration with other agencies and the business community. YMCA Operation Backpack - YMCA Operation Backpack, Houston's largest school supply drive, collects and distributes over \$1.79 million in backpacks and school supplies for children. The YMCA partners with 60 local churches, 25 community organizations and multiple media partners providing 71,727 Houston children with needed supplies for the first d

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ldentifier	Return Reference	Explanation
	Part III, Line 4b - Youth Development Program	Line 4b (Expenses \$25,583,917) (Revenue \$30,230,764)At the YMCA, we believe the values and skills learned early on are vital building blocks for life YMCA Youth Development progra ms result in more young people taking a greater interest in learning and making smarter life choices. At the Y, children and teens learn values and positive behaviors, and can expl ore their unique talents and interests, helping them realize their potential. This makes for confident children today and contributing and engaged adults tomorrow. YMCA Youth Devel opment Programs include 1) YMCA Child Care - The central focus of all YMCA Child Care prog rams is to foster growth and development not only in children but also in their parents and families. These educational programs help kids develop moral and ethical behavior, self- esteem and leadership. Parents play an important role in policy and organizations. In the program decisions in many instances, Y Child Care allows parents of the children in our programs to remain gain fully employed, knowing that their children are thriving in a safe, supportive environment. For parents who cannot afford the full fee, waver or reduction of tuttion is available. YMCA Child Care nutrures the development of children by providing a safe place to learn foundational skills, develop healthy, trusting relationships and build self-reliance through the Y-values of caring, faith, honesty, respect and responsibility. AfterSchool Once children reach school age, multiple influences enter their lives. YMCA AfterSchool ensures that at the time after school is occupied creatively and constructively. YMCA AfterSchool programs are offered in partnership with 29 area school districts and various other organizations, offering care after school in more than 200 locations. Early Childhood The YMCA believes that a quality program should provide enriching experiences which facilitate a child's cognitive, social, physical and enrotional growth. We strive to meet the development and character development life activity and

Identifier	Return Reference	Explanation
	Part III, Line 4b - Youth Development Program	Swimming builds self-confidence and develops the whole person - spirit, mind and body. Classes are divided into ability groups and trained instructors emphasize personal safety, swimming skills, endurance and social skills while guiding students with praise and encour agement. The YMCA is committed to offering a quality, year-round swim team with emphasis on teaching the value of competition through teamwork, sportsmanship and doing one's best. The program strives to offer a well-rounded, values-centered program for every member, from the youngest and new est members to our veteran senior swimmers. YMCA Water Wise is a multi faceted aw areness program designed to educate the community about how to prevent drowning. Water Wise includes a website with water safety tips, CFR and first aid information as well as swim lesson schedules. The initiative also offers a school district lifeguard training program, a speakers bureau that provides water safety presentations to the community in English and Spanish, swimming lessons at elementary and middle schools and water safety classes taught at local apartment complexes. Youth Sports. The YMCA believes that youth sport sprograms encourage and promote healthy and strong children, families and communities by placing a priority on family involvement, healthy competition and the value of participation over winning. Team building as well as individual development, a positive self-image and a sense of fair play and mutual respect for others are hallmarks of YMCA Sports programs. Caring adult coaches and volunteers create an asset-rich environment in which children learn and practice the core values of responsibility, honesty, respect, fath and caring. Parents are encouraged to be more than mere spectators by contributing their time as volun teer coaches and team parents as well as being their kids greatest fan. YMCA Youth Sports programs are a great start to a lifetime of fitness and values. Camping Services. Overnight, day or specially camps at the Y share one thing they're ab

Identifier	Return Reference	Explanation
	Part III, Line 4a - Healthy Living Program	Line 4a (Expenses \$60,968,368) (Revenue \$58,800,248) Healthy lifestyles are achieved through nurturing mind, body and spirit. At the Y, well-being and fitness includes more than just working out. Our 37 YMCA Centers in the Greater Houston area offer workout facilities and group exercise classes for every age and fitness level. Additionally, the Y provides educational programs to promote healthier decisions, and offer a variety of programs that support physical, intellectual and spiritual strength Being healthy means more than simply being physically active. It includes balancing body, mind and spirit. The Y is a place where you can work toward that balance by challenging yourself to learn a new skill or hobby, fostering connections with friends through our lifelong learning programs, or bringing your loved ones closer together through our many family-centered activities. At the Y, it's not about the activity you choose as much as it is about the benefits of living healthier on the inside as well as the outside. The YMCA of Greater Houston reflects the rich diversity of our Greater Houston community in our membership base at our 37 facilities. Because we believe a healthier lifestyle should be available to all, the YMCA of Greater Houston offers a Membership For All plan. Under this plan, the membership rate is adjusted based on annual household income. In our quest to make YMCA membership for All program Financial assistance offered through this program totaled \$4,505,845 YMCA Membership has never been more relevant in our community. The YMCA provides healthy solutions to problems such as the rise in childhood obesity, increased stress and chronic illnesses related to unhealthy diets and lifestyles YMCA exercise programs are geared for every age group and all levels of physical fitness. Programs include strength training, aerobics, group exercise, walking clubs, yoga, martial arts, cycling and cardio strengthening. Building healthy lifestyles is also taught and encouraged through nutritional programs, stress ma

Identifier	Return Reference	Explanation
	Part III, Line 1 - Continuation of Mission	The YMCA will partially implement this mission through teaching five core values in all of its programs. Respect, Responsibility, Caring, Honesty and Faith The YMCA seeks to promote our mission and core values by focusing on youth development, healthy living and social responsibility. We believe that lasting personal and social change can only come about when we all work together to invest in our children, our health and our neighbors. Our goal is to ensure everyone, regardless of age, income or background, has the opportunity to learn, grow and thrive. We are an association of men, women and children joined together by a shared commitment to nurture the potential of children, promote healthy living and foster a sense of social responsibility. Our dedication to these goals is only realized through the philanthropic giving of Houstonians, partnerships and community leaders. These gifts have enabled YMCA staff and volunteers to further the YMCA's vision of building healthy, confident, connected and secure children, adults, families and communities. Youth Development Community Impact Children empowered through youth sports 63,357 Children mentored through day camping 62,933 Members enlightened through aquatics 36,058 Children nurtured in child care programs 100,468 Family relationships enriched at Camp Cullen 2,017Healthy Living YMCA Facility Members 397,673 Percentage of Family memberships 73% Percentage of Members Benefited by Membership for All 26%Social Responsibility. Partnerships with agencies, schools, businesses and Churches 350 Investment in inner-city youth and families \$16.8 million Refugees given hope through resettlement 1,110 from 30 countries. Youth developed through Caring Community Centers 20,212 Children equipped with school supplies 71,727.

ldentifier	Return Reference	Explanation
Form 990, Part XI, Line 9	Other Changes In Net Assets Or Fund Balances - Other Decreases	Return of donor contribution = -\$1000000

ldentifier	Return Reference	Explanation
Form 990, Part XI, Line 9		Change in Fair Market Value of Derivative = \$175347

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 19	Form 990, Part VI, Line 19 Other Organization Documents Publicly Available	These documents are available to the public upon request

Identifier	Return Reference	Explanation
Form 990, Part VI, Line 15b		See above for process followed for individuals described in question 15b

ldentifier	Return Reference	Explanation
	Form 990, Part VI, Line 15a Compensation Review & Approval Process - CEO, Top Management	The compensation and performance of the President, EVP & COO, SVP & CFO, SVP Financial Development and SVP Marketing & Communication is reviewed annually by the Executive Compensation Committee of the Board of Directors. An independent nationally recognized compensation firm provides not-for-profit compensation comparability data for all senior level positions to the Executive Compensation Committee as required for compliance with the regulations of Section 4958 of the Internal Revenue Code. The Executive Compensation Committee has reviewed and deemed reasonable the compensation of all senior staff in compliance with IRS regulations.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 12c	Line 12c Explanation of Monitoring and Enforcement of Conflicts	The YMCA of Greater Houston has adopted a comprehensive Conflict of Interest policy. The Policy requires each Director, Officer, Trustee, Volunteer and Employee of the Association to make full disclosure of any interest that might result in a conflict on their part. The Policy clearly defines potential conflicts of interest and requires disclosure of potential conflicting interests in certain business transactions. The Policy further requires Directors, Officers, Trustees, selected Volunteers and selected Employees to review the policy annually and disclose any potential conflicts of which the Board should be made aware. The President annually makes a report to the Executive Committee based on the disclosure forms submitted.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 11b	Form 990, Part VI, Line 11b Form 990 Review Process	The CFO, together with Blazek & Vetterling, presents the Form 990 to the Finance Committee for their detailed review. Upon completion of the review process, the Finance Committee accepts the Form 990 as presented. The Finance Committee Chair briefs the YMCA Board of Directors of their review. Prior to filing, the Form 990 is posted on the organization's wiebsite accessible through a secure portal for board members' review.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 4	Form 990, Part VI, Line 4 Description of Significant Changes to Organizational Documents	The By-laws were revised to 1) clarify job title revisions and language, 2) include a process to address vacancies in the Senior Executive team, 3) make minor changes to Senior Executive Incentive Pay Plan eligibility and 4) update language and expectation of Center Boards in order to be consistent with their function and the way we work

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DLN: 93493162004254

2012

OMB No 1545-0047

Open to Public Inspection

Employer identification number

74-1109737

Related Organizations and Unrelated Partnerships

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

Department of the Treasury Internal Revenue Service

Greater Houston Area

Name of the organization Young Mens Christian Association of the

(Form 990)

► Attach to Form 990. ► See separate instructions.

(a)	(b)	(c)	(d)	(e)	(f)		
Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state or foreign country)	Total income Er	nd-of-year assets	Direct controlling entity		
Part II Identification of Related Tax-Exempt Orga or more related tax-exempt organizations during	nizations (Complete ing the tax year.)	f the organization a	nswered "Yes" to	o Form 990, Pa	art IV, line 34 becau	se it had o	ne
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code sectio	n Public charity s (if section 501(d	tatus (f) Direct controlli c)(3)) entity	ng Section (13) ((g) on 512(l controlle ntity?
(1) Young Mens Christian Assoc Endowment Fd	Endowment	TX	501c3	509a3 Type I	Young Mens Christi	Yes Yes	No
2600 N Loop West Ste 300					Assoc of Gr Hou Ar		
Houston, TX 77092 76-0555562							
			-				
For Paperwork Reduction Act Notice, see the Instructions for Form 9	90		357	L	Schedule R (Form 990)	2012

(a) Name, address, and EIN o related organization	f	(b) Primary activity	(c) Legal domicile (state or foreign country)	entity	(e) Predominant Income(related, unrelated, excluded from tax under sections 512-	(f) Share of total income	(g) Share of end-of-yea assets	(h Disprop r allocat	ortionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	ral or	(k) Percentae ownersh
					514)			Yes	No		Yes	No	
V Identification of Related Or line 34 because it had one or r	ganizations Taxa nore related organi	ble as a Corpo zations treated a	ration s a cor	or Trust (poration or	Complete if t	the organi the tax ye	zatıon ar ar.)	swere	ed "Ye	s" to Form	990,	Part	IV,
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domıcıle (state or foreign country)		(d) Direct controlli entity	(e) Type of entro (C corp, S corp, or trust)		otal Share e of	(g) e of end- year ssets		(h) ercentage wnership	Section (b) conti	(13)	
		,,			,						Yes		No

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

Yes

1 During the tax year, did the orgranization engage in any of the following transactions with one or more re	erated organizations is	sted in Parts 11-1V /					
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		No	
b Gift, grant, or capital contribution to related organization(s)							
c Gift, grant, or capital contribution from related organization(s)							
d Loans or loan guarantees to or for related organization(s)				1d		No	
e Loans or loan guarantees by related organization(s)				1e		No	
f Dividends from related organization(s)				1f		No	
g Sale of assets to related organization(s)				1g 1h		No	
h Purchase of assets from related organization(s)							
i Exchange of assets with related organization(s)							
j Lease of facilities, equipment, or other assets to related organization(s)							
Lease of facilities, equipment, or other assets from related organization(s)				1k		No	
, , , , , , , , , , , , , , , , , , ,							
 Performance of services or membership or fundraising solicitations for related organization(s) Performance of services or membership or fundraising solicitations by related organization(s) 							
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)							
• Sharing of paid employees with related organization(s)				10	Yes		
				Н			
P Reimbursement paid to related organization(s) for expenses				1 p		No	
q Reimbursement paid by related organization(s) for expenses				1q		No	
r Other transfer of cash or property to related organization(s)				1r		No	
s Other transfer of cash or property from related organization(s)				1s		No	
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete	this line, including co	vered relationships	and transaction thresholds				
(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amo	ount II	nvolved		
1) Young Mens Christian Assoc Endowment Fd	С	79,136	Cash paid				
	I.						

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

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

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross)

revenue) that was not a related organization See instructions re	garding exclu	sion for ce		nent	partnerships				`	,		_	
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512- 514)	org	(e) all partners section 501(c)(3) anizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
												1	

Additional Data Return to Form

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Software Version: 2012v2.0

EIN: 74-1109737

Name: Young Mens Christian Association of the

Greater Houston Area

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Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)								
Identifier	Return Reference	Explanation						
	•							