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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

▶ Information about Form 990 and its instructions is at *www.IRS.gov/form990*

OMB No 1545-0047

2013

Open to Public Inspection

A For the 2013 calendar year, or tax year beginning 07-01-2013 , 2013, and ending 06-30-2014

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

C Name of organization
YOUNG MENS CHRISTIAN ASSOC MCGAW INC

Doing Business As

Number and street (or P O box if mail is not delivered to street address) | Room/suite
1000 Grove Street

City or town, state or province, country, and ZIP or foreign postal code
Evanston, IL 60201

D Employer identification number
36-2169194

E Telephone number
(847) 475-7400

G Gross receipts $ 20,715,853

F Name and address of principal officer
WILLIAM GEIGER
1000 Grove Street
Evanston, IL 60201

H(a) Is this a group return for subordinates? ☐ Yes ☑ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☑ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ MCGAWYMCA ORG

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

L Year of formation 1885 **M** State of legal domicile IL

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
THE MCGAWYMCA IS AN OPEN CHARITABLE, MEMBERSHIP ASSOCIATION THAT PROMOTES GROWTH IN SPIRIT, MIND, AND BODY THROUGH PROGRAMS AND SERVICES FOR ALL AS A CAUSE-DRIVEN, CHARITABLE ORGANIZATION, WE ARE COMMITTED TO BUILDING THE FOUNDATIONS OF COMMUNITY WE SEEK TO UNDERSTAND AND ADDRESS COMMUNITY NEEDS IN ORDER TO EFFECT LASTING PERSONAL AND SOCIAL CHANGE IN OUR THREE AREAS OF FOCUS YOUTH DEVELOPMENT, HEALTHY LIVING, AND SOCIAL RESPONSIBILITY

2 Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	3	28
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	28
5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5	677
6	Total number of volunteers (estimate if necessary)	6	1,200
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	1,246,652	1,260,250
	9	Program service revenue (Part VIII, line 2g)	12,193,741	12,734,571
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	173,096	617,144
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	242,078	360,956
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	13,855,567	14,972,921
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	1,473,961	1,704,023
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	8,044,508	8,278,923
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶323,494		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	4,384,171	4,748,681
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	13,902,640	14,731,627
	19	Revenue less expenses Subtract line 18 from line 12	-47,073	241,294

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	22,716,139	23,152,666
	21	Total liabilities (Part X, line 26)	8,801,344	8,719,877
	22	Net assets or fund balances Subtract line 21 from line 20	13,914,795	14,432,789

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

Signature of officer — Date 2015-02-04

NANCY J PETRILLO CHIEF FINANCIAL OFFICER
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
Marcy Steindler				P00573131

Firm's name ▶ MANN WEITZ & ASSOCIATES LLC — Firm's EIN ▶ 36-3963131

Firm's address ▶ 111 DEER LAKE RD SUITE 125
DEERFIELD, IL 600159578 — Phone no (847) 267-3400

May the IRS discuss this return with the preparer shown above? (see instructions) ☑ Yes ☐ No

Part III **Statement of Program Service Accomplishments**

Check if Schedule O contains a response or note to any line in this Part III . . . . ☑

1 Briefly describe the organization's mission

THE MCGAW YMCA IS AN OPEN CHARITABLE, MEMBERSHIP ASSOCIATION THAT PROMOTES GROWTH IN SPIRIT, MIND AND BODY THROUGH PROGRAMS AND SERVICES FOR ALL IN OUR DIVERSE COMMUNITY THE YMCA IS A CAUSE-DRIVEN, CHARITABLE ORGANIZATION COMMITTED TO BUILDING THE FOUNDATIONS OF COMMUNITY WE SEEK TO UNDERSTAND AND ADDRESS COMMUNITY NEEDS IN ORDER TO EFFECT LASTING PERSONAL AND SOCIAL CHANGE IN OUR THREE AREAS OF FOCUS YOUTH DEVELOPMENT, HEALTHY LIVING AND SOCIAL RESPONSIBILITY

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . ☐ **Yes** ☑ **No**

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . ☐ **Yes** ☑ **No**

If "Yes," describe these changes on Schedule O

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

4a (Code) (Expenses $ 4,498,934 including grants of $ 675,154) (Revenue $ 4,257,279)

CHILDREN'S CENTER THE MCGAW YMCA CHILDREN'S CENTER (A STAND-ALONE FACILITY ONE BLOCK AWAY FROM OUR MAIN BUILDING) SEEKS TO PROVIDE ACCESSIBLE, HIGH-QUALITY, COMPREHENSIVE CARE AND EDUCATION FOR A DIVERSE COMMUNITY IN A SAFE, NURTURING ENVIRONMENT TO ENSURE THE HIGHEST QUALITY, WE MAINTAIN ACCREDITATION THROUGH NAEYC, THE NATION'S LEADING ORGANIZATION OF EARLY CHILDHOOD PROFESSIONALS THROUGH THE PARTNERSHIP BETWEEN CHILD, PARENT AND DEDICATED STAFF, WE STRIVE TO NOURISH THE PHYSICAL, INTELLECTUAL, EMOTIONAL AND SOCIAL DEVELOPMENT OF EVERY CHILD WE SERVE BY PROVIDING WELL-ROUNDED, FUN, CREATIVE AND ENRICHING PROGRAMS AND EXPERIENCES IN FY2014, WE SERVED 568 CHILDREN/INFANTS THROUGH SCHOOL AGE PROGRAMS AND PROVIDED MORE THAN $675K IN SCHOLARSHIPS TO ENABLE OVER 327 CHILDREN THE NECESSARY SUBSIDIES TO PARTICIPATE IN OUR PROGRAM IN ADDITION, WE OFFER SUMMER DAY CAMP PROGRAMS THAT HELP KIDS BUILD STRONG VALUES AND CREATE SELF-CONFIDENCE AND CHARACTER DURING FISCAL YEAR 2014, WE PROVIDED SUMMER DAY CAMP PROGRAMS TO MORE THAN 652 CAMPERS, RANGING FROM AGE TWO THROUGH EIGHTH GRADE, WITH 31% RECEIVING FEE ASSISTANCE TO INCREASE LITERACY SKILLS AND REDUCE SUMMER LEARNING LOSS, WE PARTICIPATED, FOR THE THIRD YEAR, IN A NATIONAL Y-USA SUMMER LEARNING PROGRAM IN THE SUMMER OF 2014, WE INCREASED OUR PROGRAM FROM 100 TO 200 FIRST AND SECOND GRADERS AT THREE EVANSTON ELEMENTARY SCHOOLS WITH OUR DISTRICT 65 PARTNERSHIP IN ADDITION TO RECEIVING 2 5 HOURS OF DAILY INTENSIVE LITERACY INSTRUCTION FROM CERTIFIED EVANSTON/SKOKIE SCHOOL DISTRICT 65 TEACHERS, CHILDREN ENJOY ART, MUSIC, SWIM LESSONS, CHARACTER DEVELOPMENT, NUTRITION EDUCATION AND PHYSICAL FITNESS WE KEEP THEIR MINDS AND BODIES IN TIP-TOP SHAPE WHILE OFFERING A FREE 3-MONTH MCGAW YMCA FAMILY MEMBERSHIP YOUTH AND FAMILIES PARTICIPATE IN THIS PROGRAM AT NO COST TO THEM

4b (Code) (Expenses $ 3,225,685 including grants of $ 64,316) (Revenue $ 1,077,925)

HEALTHY LIVING (HEALTH & WELLNESS) THE YMCA'S APPROACH TO HEALTHY LIVING FOCUSES ON CARING FOR ONESELF FROM THE INSIDE OUT, INCLUDING THE SPIRIT, MIND AND BODY AT THE MCGAW YMCA, WE AIM TO IMPROVE THE HEALTH OUTCOMES AND LIFESTYLES OF YOUTH, ADULTS, AND FAMILIES OF THE EVANSTON COMMUNITY WE PROVIDE OUR MEMBERS WITH THE SUPPORTIVE RELATIONSHIPS AND "COMMUNITY" THEY NEED TO CREATE A HEALTHY LIFE STYLE THIS IS PARTICULARLY IMPORTANT AS OUR NATION AND OUR COMMUNITY STRUGGLE WITH AN OBESITY EPIDEMIC AND WITH WORK/LIFE BALANCE AS INDIVIDUALS SEARCH FOR PERSONAL FULFILLMENT WE BRING FAMILIES TOGETHER AND OFFER SPORT, RECREATIONAL AND SOCIAL NETWORKS THAT BUILD RELATIONSHIPS AND STRENGTHEN BONDS THIS AREA OF FOCUS CONTAINS GENERAL AND TARGETED HEALTH AND WELLNESS PROGRAMING WITH A TOTAL COST OF $3 1 MILLION $1 6 MILLION IS SPENT ON SWIM, SPORTS AND PLAY FOR YOUTH AND FAMILIES, INCLUDING COMPETITIVE SWIM TEAMS, SWIM LESSONS, MARTIAL ARTS AND VARIOUS SPORTS TEAMS AND LEAGUES WE ALSO HAVE AN ANNUAL YOUTH TRIATHLON WITH OVER 200 YOUNG ATHELETES COMPETING AND EVANSTON SWIMS, A PARTNERSHIP WITH DISTRICT 65 AND EVANSTON NORTH SHORE YWCA SERVING YOUTH FROM 3 TITLE ONE PILOT SCHOOLS DURING THE YEAR, WE HAVE GIVEN OVER $64K IN INCOME BASED FEE ASSISTANCE TO PARTICIPANTS IN ADDITION, WE SPENT $1 7 MILLION FOR HEALTH AND WELLNESS PROGRAMING FOR ADULTS OUR HEALTH AND WELLNESS TEAM PROVIDES PERSONAL TRAINING, INCLUDING SPECIALTY PILATES TRAINING, AS WELL AS GROUP EXERCISE, WEIGHT MANAGEMENT AND NUTRITION EDUCATION CLASSES, MASSAGE THERAPY AND CHRONIC DISEASE MANAGEMENT THROUGH A RESEARCH PROJECT LED BY NORTHWESTERN UNIVERSITY

4c (Code) (Expenses $ 1,952,750 including grants of $ 703,415) (Revenue $ 4,174,897)

MEMBERSHIP WITH 12,000 MEMBERS FROM INFANTS TO 90+-YEAR-OLDS, OUR MEMBERSHIP CONTINUES TO GROW EACH YEAR WE STRIVE TO FULFILL OUR MISSION OF SERVICE THROUGH OUR INCOME-BASED "MEMBERSHIP FOR ALL" PRICING THAT SETS MEMBERSHIP FEES BASED ON HOUSEHOLD INCOME AND THE NUMBER OF INDIVIDUALS IN THE HOUSEHOLD OUR GOAL IS TO OPEN THE DOORS OF THE MCGAW Y TO EVERYONE USING AN AFFORDABLE PRICING STRUCTURE THROUGH OUR COMMITMENT TO "MEMBERSHIP FOR ALL", WE HAVE PROVIDED OVER $700K IN NEED-BASED MEMBERSHIP FEE SUPPORT, WHICH HAS ALLOWED 34% OF OUR MEMBERS TO HAVE THE CHANCE TO ENGAGE IN ACTIVITIES, SERVICES, AND DEVELOP THE FEELING OF BELONGING TO OUR YMCA COMMUNITY IN ADDITION, WE DONATED 97 MEMBERSHIPS DURING THE 2013 FISCAL YEAR TO LOCAL BUSINESSES AND CHARITIES TO USE IN SILENT AUCTIONS OR EVENTS IN ORDER TO INCREASE ACCESSIBILITY, WE SUPPLY A FREE CHILD CARE DROP IN CENTER FOR MEMBERS USING THE FACILITY FINALLY, WE HAVE CONTINUED CORPORATE WELLNESS PARTNERSHIPS IN THE COMMUNITY TO GUIDE PARTICIPANTS TOWARD THEIR HEALTH AND WELLNESS GOALS AND CONNECT THEM TO A COMMUNITY THAT IS WORKING TOWARDS THE SAME GOALS

(Code) (Expenses $ 1,779,660 including grants of $ 159,094) (Revenue $ 2,075,191)

CAMP ECHO THE MCGAW YMCA IS A RECOGNIZED LEADER IN NURTURING THE POTENTIAL OF EVERY CHILD AND TEEN EVERY DAY THROUGH PROGRAMS THAT HELP YOUNG PEOPLE DEEPEN POSITIVE VALUES, THEIR COMMITMENT TO SERVICE AND MOTIVATION TO LEARN AT CAMP ECHO, LOCATED IN FREMONT MICHIGAN, EVERY MOMENT HAS THE POTENTIAL TO BE A LIFE-CHANGING EVENT CAMP ECHO'S GOAL IS TO OPERATE A FUN, ENGAGING PROGRAM WHILE FOSTERING THE PHYSICAL, EMOTIONAL AND SPIRITUAL WELL-BEING OF ITS PARTICIPANTS WE PROMOTE CHARACTER DEVELOPMENT, CELEBRATE DIVERSITY, ENCOURAGE SERVICE LEARNING AND TEACH OUR TEEN PARTICIPANTS LEADERSHIP SKILLS DURING THE 2014 SUMMER SEASON, WE HAD OVER 1,500 CAMPERS EXPERIENCE CAMP, THE LARGEST ATTENDENCE THUS FAR WE SERVED 544 FAMILY CAMPERS IN OUR FOUR FAMILY CAMP PROGRAMS, UP FROM 466 IN 2013 AS OF JUNE 30TH, NEARLY $160K IN FEE ASSISTANCE WAS PROVIDED TO 213 CAMPERS, A 38% INCREASE OVER 2013, ALLOWING MORE CHILDREN, YOUTH AND FAMILIES THE OPPORTUNITY TO PARTICIPATE IN CAMP PROGRAMMING

(Code) (Expenses $ 1,138,752 including grants of $ 101,726) (Revenue $ 1,109,838)

RESIDENT PROGRAM FOR MANY, THE Y TRULY IS "HOME" THE MCGAW YMCA MEN'S RESIDENCE, LOCATED IN THE MAIN MCGAW Y BUILDING, OFFERS CONVENIENCE, SECURITY, COMMUNITY AND SO MUCH MORE SOME OF OUR RESIDENT MEMBERS STAY FOR A WEEK WHILE OTHERS CALL THE MCGAW YMCA THEIR LONG-TERM HOME DURING FISCAL YEAR 2014, WE SERVED OVER 250 RESIDENT MEMBERS AND AWARDED MORE THAN $100K IN FEE ASSISTANCE AND SUBSIDIES TO 62 OF THESE LOW- AND VERY LOW-INCOME RESIDENT MEMBER ON AVERAGE 95% OF OUR 172 SINGLE ROOMS FOR MEN REMAINED OCCUPIED IN FISCAL YEAR 2014 THE PROGRAM HAS APPROXIMATELY 90 ROOMS THAT QUALIFY UNDER HUD IN PROVIDING LOW-INCOME MEN AFFORDABLE ROOMS BASED UPON THEIR INCOME WE CONTINUE TO CREATE OPPORTUNITIES TO EXPAND THE SUPPORTIVE SERVICES WITHIN OUR COMMUNITY THROUGH MEANINGFUL AND IMPACTFUL COLLABORATIONS WE COLLABORATED WITH THE CITY OF EVANSTON AND THE YOUTH JOB CENTER TO HOUSE TWO HOMELESS YOUTHS AND WITH CONNECTIONS FOR THE HOMELESS, WE PARTICIPATED IN A PROGRAM TO GIVE SUPPORT TO INDIVIDUALS WANTING TO TAKE ADVANTAGE OF THE AFFORDABLE CARE ACT, AND SIGNED UP 209 INDIVIDUALS IN OUR COMMUNITY

(Code) (Expenses $ 469,188 including grants of $ 318) (Revenue $ 39,441)

YOUTH SERVICES AND EXPANSION OF TEEN PROGRAMS THE REMAINING $470K OF PROGRAM EXPENSE RELATES TO YOUTH DEVELOPMENT PROGRAMS IN OUR YOUTH SERVICES AREA WHICH INCLUDES THE LONG TIME KEY MISSION DRIVEN PROJECT SOAR MENTORING PROGRAM WITH OVER 90 ADULT VOLUNTEERS PAIRED WITH EVANSTON AREA YOUTH AGES 9-14, AS WELL AS TUTORING WITH LOCAL CHILDREN RECEIVING FREE OR LOW-COST SUPPLEMENTAL LITERACY AND TUTORING SERVICES DURING FY2013 AND 2014 THE YOUTH SERVICES TEAM WAS DEDICATED TO RESEARCHING AND ASSESSING COMMUNITY NEEDS, COLLABORATING WITH COMMUNITY PARTNERS AND YOUTH IN ORDER TO DESIGN NEW PROGRAMS AND STRUCTURES THAT WILL HELP US FOCUS ON MEETING THE NEEDS OF THE YOUTH IN OUR COMMUNITY AS WELL AS BETTER SERVE UNDERSERVED YOUTH AS A RESULT OF THIS WORK, WE DECIDED TO DISCONTINUE SOME ACTIVITIES THAT DID NOT HAVE SIGNIFICANT IMPACT AND REVAMP AND RESTART OTHERS THAT NEEDED AN OVERHAUL IN ADDITION, THREE NEW INITIATIVES BEGAN IN FY2013 AND 2014 1) ACHIEVERS - A SUCCESSFUL Y OF USA PROGRAM THAT IS A TARGETED INTERVENTION FOR HIGH SCHOOL STUDENTS WITH HIGH RISK OF FAILURE IN PARTNERSHIP WITH EVANSTON HIGH SCHOOL (ETHS) WE HAVE IDENTIFIED AND TARGETED STUDENTS ENTERING ETHS, WHO ARE TESTING AT THE LOWEST QUARTILE AND HAVE POOR GRADES WE WELCOMED THIS FIRST CLASS OF ACHIEVERS IN 2013 AND SUPPORTED WITH SATURDAY ENRICHMENT, PARENT SUPPORT, COMMUNITY MENTORS, COLLEGE PREP, TUTORING AND SUPPORTIVE SERVICES AS NEEDED 2) THE EMERSON PROJECT- IS A MIDDLE SCHOOL PROGRAM DESIGNED TO HELP KIDS FIND THEIR "SPARK" BY TRYING OUT AND TINKERING WITH VARIOUS SUBJECT AREAS SUCCESSFULLY PILOTED BY THE Y AND Y O U IN THE SUMMER OF 2012, WE EXPANDED THE PROGRAM TO REACH YOUTH AT FAMILY FOCUS, Y O U , AND THE YMCA 3) METAMEDIA -MIDDLE SCHOOL PROJECT- A PARTNERSHIP AMONG THE MCGAW YMCA, YOUTH ORGANIZATIONS UMBRELLA (Y O U), AND NORTHWESTERN UNIVERSITY, WILL BE LOCATED WITHIN OUR RE-IMAGINED YOUTH LOBBY SPACE THIS STATE-OF-THE-ART, YOUTH-CENTRIC SPACE IS DESIGNED TO BE A TRANSFORMATIVE AND INVITING SPACE COMPLEMENTED BY A RICH DIGITAL PRESENCE WHERE YOUTH WILL GATHER TO NETWORK, SHARE, AND LEARN METAMEDIA WILL PROVIDE OUT-OF-SCHOOL PROGRAMMING AND ACCESS TO ADVANCED TECHNOLOGY, MUSIC AND VIDEO PRODUCTION, FUSE CHALLENGES AND CURRICULUM, CREATIVE DESIGN, ENGINEERING, ARTS AND ADDITIONAL TOOLS AND NETWORKS THE PROJECT AND SPACE DESIGN TOOK EIGHT MONTHS, WORKING WITH COMMUNITY YOUTH, SPECIALISTS IN THE FIELD AND OUR COLLABORATIVE PARTNERS WE SECURED A $1 MILLION GIFT TO HELP FUND THE DESIGN WORK, CONSTRUCTION AND PILOT PERIOD TO BEGIN IN JANUARY 2015

4d Other program services (Describe in Schedule O)

(Expenses $ 3,387,600 including grants of $ 261,138) (Revenue $ 3,224,470)

4e **Total program service expenses** ▶ 13,064,969

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	Yes	
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		No
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		No
9	Did the organization report an amount in Part X, line 21 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*	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI.*	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		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 other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV*	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV*	16		No
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I (see instructions)*	17		No
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18	Yes	
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or government 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 or 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 25a*	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? *If so, 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)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or 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	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	33		No
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b		No
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V . . . . ☐

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	24			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	677			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			2b	Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			3a		No
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O*			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a		No
b	If "Yes," enter the name of the foreign country ▶ See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7h		
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			8		
9	**Sponsoring organizations maintaining donor advised funds.**					
a	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	**Section 501(c)(7) organizations.** Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	**Section 501(c)(12) organizations.** Enter					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O			13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*			14b		

Part VI **Governance, Management, and Disclosure** *For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.*

Check if Schedule O contains a response or note to any line in this Part VI . . . ☑

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year . . . 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	**1a** 28			
b	Enter the number of voting members included in line 1a, above, who are independent . . .	**1b** 28			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? . . .		**2**		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .		**3**		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . .		**4**		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .		**5**		No
6	Did the organization have members or stockholders? . . .		**6**	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? . . .		**7a**	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? . . .		**7b**		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body? . . .		**8a**	Yes	
b	Each committee with authority to act on behalf of the governing body? . . .		**8b**	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O* . . .		**9**		No

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

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

Section C. Disclosure

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

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)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

▶Nancy Petrillo 1000 Grove Street
Evanston, IL 60201 (847) 475-7400

Part VII **Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

Check if Schedule O contains a response or note to any line in this Part VII . . . . ☐

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** key employees, if any See instructions for definition of "key employee "
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee) Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations

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 for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations

		(D)	(E)	(F)
1b	Sub-Total . . . . ▶			
c	Total from continuation sheets to Part VII, Section A . . . . ▶			
d	Total (add lines 1b and 1c) . . . . ▶	633,686	0	144,496

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶3

			Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*	5		No

Section B. Independent Contractors

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

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

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

Part VIII **Statement of Revenue**

Check if Schedule O contains a response or note to any line in this Part VIII . . . . ☐

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts						
1a	Federated campaigns . . . 1a					
b	Membership dues 1b					
c	Fundraising events 1c	48,551				
d	Related organizations . . . 1d					
e	Government grants (contributions) 1e					
f	All other contributions, gifts, grants, and similar amounts not included above 1f	1,211,699				
g	Noncash contributions included in lines 1a-1f $	34,182				
h	**Total.** Add lines 1a-1f . . . . ▶		1,260,250			
Program Service Revenue		Business Code				
2a	MEMBERSHIP	713940	4,174,897	4,174,897		
b	CHILDREN CENTER FEES	624410	4,257,279	4,257,279		
c	CAMP ECHO FEES	624100	2,075,191	2,075,191		
d	HEALTHY LIVING/YOUTH DEVELOPMENT	624100	1,117,366	1,117,366		
e	RESIDENCE FEES	531110	1,109,838	1,109,838		
f	All other program service revenue		0	0	0	0
g	**Total.** Add lines 2a–2f . . . . ▶		12,734,571			
Other Revenue						
3	Investment income (including dividends, interest, and other similar amounts) . . . . ▶		190,428			190,428
4	Income from investment of tax-exempt bond proceeds . . ▶		0			
5	Royalties . . . . ▶		0			

		(i) Real	(ii) Personal	(A)	(B)	(C)	(D)
6a	Gross rents						
b	Less rental expenses						
c	Rental income or (loss)	0	0				
d	Net rental income or (loss) . . . . ▶			0			
		(i) Securities	(ii) Other				
7a	Gross amount from sales of assets other than inventory	5,394,690	678,980				
b	Less cost or other basis and sales expenses	4,968,090	678,864				
c	Gain or (loss)	426,600	116				
d	Net gain or (loss) . . . . ▶			426,716			426,716
8a	Gross income from fundraising events (not including $ 48,551 of contributions reported on line 1c) See Part IV, line 18 . . a		169,101				
b	Less direct expenses . . . b		95,978				
c	Net income or (loss) from fundraising events . . ▶			73,123			73,123
9a	Gross income from gaming activities See Part IV, line 19 . . . a						
b	Less direct expenses . . . b						
c	Net income or (loss) from gaming activities . . ▶			0			
10a	Gross sales of inventory, less returns and allowances . a						
b	Less cost of goods sold . . b						
c	Net income or (loss) from sales of inventory . . ▶			0			
	Miscellaneous Revenue		Business Code				
11a	USE OF SPACE		532000	76,422			76,422
b	LOCKER RENTAL		532000	42,720			42,720
c	FORGIVENESS OF NOTES PAYABLE		900099	121,124	121,124		
d	All other revenue			47,567	0	0	47,567
e	**Total.** Add lines 11a–11d . . . . . . ▶			287,833			
12	**Total revenue.** See Instructions . . . . . ▶			14,972,921	12,855,695	0	856,976

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)

Check if Schedule O contains a response or note to any line in this Part IX . . . . ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States See Part IV, line 21	0			
2 Grants and other assistance to individuals in the United States See Part IV, line 22	1,704,023	1,704,023		
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	838,218	259,657	428,247	150,314
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	5,797,450	5,641,589	73,348	82,513
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	379,219	358,609	19,520	1,090
9 Other employee benefits	787,585	707,788	64,003	15,794
10 Payroll taxes	476,451	413,627	47,947	14,877
11 Fees for services (non-employees)				
a Management	0			
b Legal	25,231	20,000	5,231	
c Accounting	22,662		22,662	
d Lobbying	0			
e Professional fundraising services See Part IV, line 17	0			
f Investment management fees	21,949		21,949	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	194,111	141,275	44,831	8,005
12 Advertising and promotion	118,422	67,013	36,113	15,296
13 Office expenses	318,837	280,966	33,922	3,949
14 Information technology	110,789	48,321	56,258	6,210
15 Royalties . .	0			
16 Occupancy	774,271	750,331	23,940	
17 Travel	31,182	16,895	14,001	286
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19 Conferences, conventions, and meetings	95,327	41,086	51,136	3,105
20 Interest	55,943	22,043	33,900	
21 Payments to affiliates	112,550		112,550	
22 Depreciation, depletion, and amortization	807,000	766,358	40,642	
23 Insurance	79,426	70,913	8,513	
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)				
a PROGRAM SUPPLIES	808,515	808,515		
b REPAIRS AND MAINTENANCE	628,540	601,403	27,137	
c VEHICLE RENTAL AND EXPENSE	184,786	184,786		
d DUES AND SUBSCRIPTIONS	27,776	21,770	6,006	
e All other expenses	331,364	138,001	171,308	22,055
25 **Total functional expenses.** Add lines 1 through 24e	14,731,627	13,064,969	1,343,164	323,494
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)	0			

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X . . . . ☐

				(A) Beginning of year		(B) End of year
Assets	1	Cash–non-interest-bearing		238,982	1	154,357
	2	Savings and temporary cash investments		1,524,635	2	695,069
	3	Pledges and grants receivable, net		97,109	3	59,153
	4	Accounts receivable, net		146,599	4	313,632
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		0	5	0
	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		0	6	0
	7	Notes and loans receivable, net		0	7	0
	8	Inventories for sale or use		0	8	0
	9	Prepaid expenses and deferred charges		163,232	9	155,807
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 27,507,599			
	b	Less accumulated depreciation	10b 12,608,553	14,606,935	10c	14,899,046
	11	Investments—publicly traded securities		4,888,337	11	6,592,083
	12	Investments—other securities See Part IV, line 11		552,881	12	50,206
	13	Investments—program-related See Part IV, line 11		0	13	0
	14	Intangible assets			14	0
	15	Other assets See Part IV, line 11		497,429	15	233,313
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		22,716,139	16	23,152,666
Liabilities	17	Accounts payable and accrued expenses		881,239	17	1,102,189
	18	Grants payable			18	
	19	Deferred revenue		1,556,754	19	1,517,291
	20	Tax-exempt bond liabilities		5,600,000	20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D			21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		0	22	0
	23	Secured mortgages and notes payable to unrelated third parties		537,015	23	5,915,891
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		226,336	25	184,506
	26	**Total liabilities.** Add lines 17 through 25		8,801,344	26	8,719,877
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		12,705,849	27	13,139,027
	28	Temporarily restricted net assets		388,972	28	466,804
	29	Permanently restricted net assets		819,974	29	826,958
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		13,914,795	33	14,432,789
	34	Total liabilities and net assets/fund balances		22,716,139	34	23,152,666

Part XI **Reconcilliation of Net Assets**

Check if Schedule O contains a response or note to any line in this Part XI . . . . ☑

1	Total revenue (must equal Part VIII, column (A), line 12)	1	14,972,921
2	Total expenses (must equal Part IX, column (A), line 25)	2	14,731,627
3	Revenue less expenses Subtract line 2 from line 1	3	241,294
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	13,914,795
5	Net unrealized gains (losses) on investments	5	253,737
6	Donated services and use of facilities	6	0
7	Investment expenses	7	0
8	Prior period adjustments	8	0
9	Other changes in net assets or fund balances (explain in Schedule O)	9	22,963
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	14,432,789

Part XII **Financial Statements and Reporting**

Check if Schedule O contains a response or note to any line 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 reviewed on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☑ 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 oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

Additional Data

Software ID: 13000248
Software Version: 2013v3.1
EIN: 36-2169194
Name: YOUNG MENS CHRISTIAN ASSOC MCGAW INC

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee) Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
DAN ISRAELITE CHAIR OF THE BOARD	3 00	X		X				0	0	0
MICHAEL WALKER TREASURER OF THE BOARD	2 50	X		X				0	0	0
PAMELA JAMES SECRETARY OF THE BOARD	2 50	X		X				0	0	0
PAT MAUNSELL VICE CHAIR	2 50	X		X				0	0	0
BART ROCCA DIRECTOR OF THE BOARD	2 50	X						0	0	0
BILL GIFFORD DIRECTOR OF THE BOARD	2 00	X						0	0	0
CASEY LEWIS VARELA DIRECTOR OF THE BOARD	2 50	X						0	0	0
CHAD LUNING DIRECTOR OF THE BOARD	2 50	X						0	0	0
CHALA HOLLAND DIRECTOR OF THE BOARD	2 00	X						0	0	0
CHURCHILL DANIELS DIRECTOR OF THE BOARD	2 00	X						0	0	0
DOUG HONNOLD DIRECTOR OF THE BOARD	2 50	X						0	0	0
ELIDA GRAVES DIRECTOR OF THE BOARD	2 00	X						0	0	0
EVONDA THOMAS-SMITH DIRECTOR OF THE BOARD	2 00	X						0	0	0
FREDDI L GREENBERG DIRECTOR OF THE BOARD	2 00	X						0	0	0
GILO KEWSI LOGAN DIRECTOR OF THE BOARD	2 00	X						0	0	0
JANET CRAWFORD DIRECTOR OF THE BOARD	2 00	X						0	0	0
KRISTIN BROWN DIRECTOR OF THE BOARD	2 00	X						0	0	0
LOUIS HARTMAN ANDERSON DIRECTOR OF THE BOARD	2 00	X						0	0	0
MANUEL ALEMAN DIRECTOR OF THE BOARD	2 00	X						0	0	0
MARY DOLAN DIRECTOR OF THE BOARD	2 50	X						0	0	0
MATT WALSH DIRECTOR OF THE BOARD	2 50	X						0	0	0
PATRICIA VANCE DIRECTOR OF THE BOARD	2 00	X						0	0	0
PETER FRANKEL DIRECTOR OF THE BOARD	2 00	X						0	0	0
SANDRA HILL DIRECTOR OF THE BOARD	2 00	X						0	0	0
SHARON ROBINSON DIRECTOR OF THE BOARD	2 00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
SIDNEY CASELBERRY DIRECTOR OF THE BOARD	2 50	X						0	0	0
SUSAN PATEL DIRECTOR OF THE BOARD	2 00	X						0	0	0
VILMA BELL DIRECTOR OF THE BOARD	2 00	X						0	0	0
BRUCE CARMICHAEL CHIEF HUMAN RESOURCES OFFICER	50 00			X				89,921	0	11,752
JONATHAN WEBB CHIEF DEVELOPMENT OFFICER	50 00			X				88,913	0	20,778
MONIQUE PARSONS CHIEF OPERATING OFFICER	50 00			X				100,896	0	24,733
NANCY PETRILLO CHIEF FINANCIAL OFFICER	50 00			X				100,997	0	18,972
TANILLE SMITH CHIEF SHARED SERVICES OFFICER	50 00			X				81,529	0	29,531
WILLIAM F GEIGER PRESIDENT/CEO	50 00			X				171,430	0	38,730

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.
▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
YOUNG MENS CHRISTIAN ASSOC MCGAW INC

Employer identification number
36-2169194

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public support.** Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 **Total support** (Add lines 7 through 10)						

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

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) | **14** |

15 Public support percentage for 2012 Schedule A, Part II, line 14 | **15** |

16a **33 1/3% support test—2013.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

b **33 1/3% support test—2012.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

17a **10%-facts-and-circumstances test—2013.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶☐

b **10%-facts-and-circumstances test—2012.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶☐

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

Part III **Support Schedule for Organizations Described in 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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	5,800,329	5,326,005	5,637,954	5,424,010	5,435,147	27,623,445
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	7,389,992	7,678,646	8,246,853	8,097,070	8,728,775	40,141,336
3 Gross receipts from activities that are not an unrelated trade or business under section 513						0
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
5 The value of services or facilities furnished by a governmental unit to the organization without charge						0
6 **Total.** Add lines 1 through 5	13,190,321	13,004,651	13,884,807	13,521,080	14,163,922	67,764,781
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	324,308	516,054	251,354	141,881	136,798	1,370,395
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year	0	0	0	0	0	0
c Add lines 7a and 7b	324,308	516,054	251,354	141,881	136,798	1,370,395
8 **Public support** (Subtract line 7c from line 6)						66,394,386

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6	13,190,321	13,004,651	13,884,807	13,521,080	14,163,922	67,764,781
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	131,336	142,691	136,995	161,206	190,428	762,656
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0
c Add lines 10a and 10b	131,336	142,691	136,995	161,206	190,428	762,656
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	322,724	308,837	267,553	244,751	287,833	1,431,698
13 **Total support.** (Add lines 9, 10c, 11, and 12)	13,644,381	13,456,179	14,289,355	13,927,037	14,642,183	69,959,135

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

15	Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	94 900 %
16	Public support percentage from 2012 Schedule A, Part III, line 15	16	92 240 %

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2013** (line 10c, column (f) divided by line 13, column (f))	17	1 090 %
18	Investment income percentage from **2012** Schedule A, Part III, line 17	18	1 030 %

19a **33 1/3% support tests—2013.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☑

b **33 1/3% support tests—2012.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶☐

Part IV **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference	Explanation
, OTHER INCOME	USE OF SPACE $76,422 LOCKER RENTAL $42,720 FORGIVENESS OF NOTES PAYABLE $121,124 OTHER MISCELLANEOUS REVENUE $47,567
Schedule A, Part III, Line 12, Other Income	DESCRIPTION - MISCELLANEOUS INCOME, COLUMN A - 322724, COLUMN B - 308837, COLUMN C - 267553, COLUMN D - 244751, COLUMN E - 287833, COLUMN F - 1431698,

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b
▶ Attach to Form 990. ▶ See separate instructions. ▶ Information about Schedule D (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
YOUNG MENS CHRISTIAN ASSOC MCGAW INC

Employer identification number
36-2169194

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

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

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

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

☐ Preservation of land for public use (e g , recreation or education)
☐ Preservation of an historically important land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ Preservation of open space

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

			Held at the End of the Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶__________

4 Number of states where property subject to conservation easement is located ▶__________

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶__________

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $ __________

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ▶ $ __________

(ii) Assets included in Form 990, Part X ▶ $ __________

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenues included in Form 990, Part VIII, line 1 ▶ $ __________

b Assets included in Form 990, Part X ▶ $ __________

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a ☐ Public exhibition

b ☐ Scholarly research

c ☐ Preservation for future generations

d ☐ Loan or exchange programs

e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table

			Amount
c	Beginning balance	1c	
d	Additions during the year	1d	
e	Distributions during the year	1e	
f	Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII . . . . ☐

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

		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance	819,974	786,163	770,820	673,139	293,241
b	Contributions	6,984	33,811	15,343	97,681	379,898
c	Net investment earnings, gains, and losses					
d	Grants or scholarships					
e	Other expenditures for facilities and programs					
f	Administrative expenses					
g	End of year balance	826,958	819,974	786,163	770,820	673,139

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a Board designated or quasi-endowment ▶ 0 %

b Permanent endowment ▶ 100 000 %

c Temporarily restricted endowment ▶ 0 %

The percentages in lines 2a, 2b, and 2c should equal 100%

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

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

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

Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		1,142,512		1,142,512
b Buildings		22,216,258	9,479,930	12,736,328
c Leasehold improvements				0
d Equipment		710,960	580,629	130,331
e Other		3,437,869	2,547,994	889,875
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				14,899,046

Part VII Investments—Other Securities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
Other		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 12)* ▶		

Part VIII Investments—Program Related. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method 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. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 15.)* . . . . ▶	

Part X Other Liabilities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1 (a) Description of liability	(b) Book value
Federal income taxes	0
FUNDS HELD - YMCA SPONSORED GROUPS	48,850
CAPITAL LEASE OBLIGATIONS	135,656
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	184,506

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII ☑

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	13,619,627
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	276,700		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d	0		
e	Add lines **2a** through **2d**			2e	276,700
3	Subtract line **2e** from line **1**			3	13,342,927
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	21,949		
b	Other (Describe in Part XIII)	4b	1,608,045		
c	Add lines **4a** and **4b**			4c	1,629,994
5	Total revenue Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12)			5	14,972,921

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	13,101,633
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII)	2d	95,978		
e	Add lines **2a** through **2d**			2e	95,978
3	Subtract line **2e** from line **1**			3	13,005,655
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	21,949		
b	Other (Describe in Part XIII)	4b	1,704,023		
c	Add lines **4a** and **4b**			4c	1,725,972
5	Total expenses Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18)			5	14,731,627

Part XIII Supplemental Information

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

Return Reference	Explanation
Schedule D, Part V, Line 4, Intended uses of endowment funds	PROVIDE SUPPORT FOR YOUTH AND FAMILY PROGRAMS AND CAMP ECHO
Schedule D, Part X, Line 2, FIN 48 (ASC 740) footnote	THE FINANCIAL STATEMENT EFFECTS OF A TAX POSITION TAKEN OR EXPECTED TO BE TAKEN ARE RECOGNIZED IN THE FINANCIAL STATEMENTS WHEN IT IS MORE LIKELY THAN NOT, BASED ON TECHNICAL MERITS, THAT THE POSITION WILL BE SUSTAINED UPON EXAMINATION AS OF JUNE 30, 2014, THE ASSOCIATION HAD NO UNCERTAIN TAX POSITIONS THAT QUALIFY FOR RECOGNITION OR DISCLOSURE IN THE CONSOLIDATED FINANCIAL STATEMENTS
Schedule D, Part XI, Line 4b, Other revenues in form 990 not in audited financial statements	SPECIAL EVENT DIRECT EXPENSES - -95978, FEE ASSISTANCE - 1704023,
Schedule D, Part XII, Line 2d, Other expenses in audited financial statements not in form 990	SPECIAL EVENT DIRECT EXPENSES - 95978,
Schedule D, Part XII, Line 4b, Other expenses in form 990 not in audited financial statements	FEE ASSISTANCE - 1704023,

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than $15,000 on Form 990-EZ, line 6a.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.
▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
YOUNG MENS CHRISTIAN ASSOC MCGAW INC

Employer identification number
36-2169194

Part I **Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities Check all that apply

- **a** ☐ Mail solicitations
- **b** ☐ Internet and email solicitations
- **c** ☐ Phone solicitations
- **d** ☐ In-person solicitations
- **e** ☐ Solicitation of non-government grants
- **f** ☐ Solicitation of government grants
- **g** ☐ Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ **Yes** ☐ **No**

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization

	(i) Name and address of individual or entity (fundraiser)	**(ii)** Activity	**(iii)** Did fundraiser have custody or control of contributions? Yes	No	**(iv)** Gross receipts from activity	**(v)** Amount paid to (or retained by) fundraiser listed in col **(i)**	**(vi)** Amount paid to (or retained by) organization
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total . . . . ▶							

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

Part II **Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than $5,000.

		(a) Event #1 YOUTH GALA (event type)	(b) Event #2 YOUTH TRIATHLONS (event type)	(c) Other events 6 (total number)	(d) Total events (add col (a) through col (c))
Revenue	1 Gross receipts	174,095	26,209	17,348	217,652
	2 Less Contributions	32,550	16,001		48,551
	3 Gross income (line 1 minus line 2)	141,545	10,208	17,348	169,101
Direct Expenses	4 Cash prizes				0
	5 Noncash prizes				0
	6 Rent/facility costs	7,569			7,569
	7 Food and beverages	35,982			35,982
	8 Entertainment	1,850			1,850
	9 Other direct expenses	26,047	17,034	7,496	50,577
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				(95,978)
	11 Net income summary Subtract line 10 from line 3, column (d) ▶				73,123

Part III **Gaming.** Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than $15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Non-cash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	
	7 Direct expense summary Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary Subtract line 7 from line 1, column (d) ▶				

9 Enter the state(s) in which the organization operates gaming activities ____________

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain ____________

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain ____________

11 Does the organization operate gaming activities with nonmembers? . . . . Yes No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? . . . . Yes No

13 Indicate the percentage of gaming activity operated in

a	The organization's facility	13a	%
b	An outside facility	13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶

Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? . . . . Yes No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ $ ____________ and the amount of gaming revenue retained by the third party ▶ $ ____________

c If "Yes," enter name and address of the third party

Name ▶

Address ▶

16 Gaming manager information

Name ▶

Gaming manager compensation ▶ $

Description of services provided ▶

Director/officer Employee Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? . . . . Yes No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $

Part IV **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Return Reference	Explanation

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990
▶ Information about Schedule I (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
YOUNG MENS CHRISTIAN ASSOC MCGAW INC

Employer identification number
36-2169194

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . ☑ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance

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

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

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(1) MEMBERSHIP FEE ASSISTANCE	4435	703,415		BOOK	
(2) CHILDREN CENTER TUITION ASSISTANCE	427	675,154		BOOK	
(3) CAMP ECHO FEE ASSISTANCE	296	159,094		BOOK	
(4) RESIDENCE FEE ASSISTANCE	45	101,726		BOOK	
(5) PROGRAM FEE ASSISTANCE	989	64,634		BOOK	

Part IV **Supplemental Information.** Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Return Reference	Explanation
Schedule I, Part I, Line 2, Procedures for monitoring use of grant funds	THE ASSOCIATION'S VISION IS TO PROVIDE AN OPPORTUNITY ACROSS OUR DIVERSE COMMUNITY FOR HEALTHY LIVING, YOUTH DEVELOPMENT AND SOCIAL RESPONSIBILITY IN LINE WITH THIS VISION, THE ASSOCIATION HAS DEVELOPED A MEMBERSHIP FEE STRUCTURE THAT PROVIDES ASSISTANCE BASED UPON THE MEMBER'S DOCUMENTED INCOME AND HOUSEHOLD SIZE APPLICANTS FOR PROGRAM SCHOLARSHIPS WILL BE EVALUATED BASED UPON THEIR CURRENT MEMBERSHIP LEVEL, DETERMINED BY THE ABOVE MENTIONED DOCUMENTED INCOME AND HOUSEHOLD SIZE NON-MEMBERS APPLYING TO PROGRAMS SUCH AS CAMP ECHO, CHILDREN'S CENTER OR RESIDENCE, ARE REQUIRED TO PROVIDE DOCUMENTATION TO VERIFY INCOME THE MCGAW YMCA CHILDREN'S CENTER PROVIDES A SCHOLARSHIP PROGRAM FOR PARENTS WHO HAVE A NEED PARENTS MAY APPLY EACH YEAR FOR FEE ASSISTANCE WHICH IS AWARDED BASED UPON THE PARENT'S DOCUMENTED INCOME AND HOUSEHOLD SIZE, USING A SLIDING SCALE AND BUDGET ALLOCATION AS AN OPEN, CHARITABLE, MEMBERSHIP ORGANIZATION, THE MCGAW YMCA PROVIDES AFFORDABLE HOUSING FOR LOW-INCOME MEN FEE ASSISTANCE IS AWARDED BASED UPON THE RESIDENT'S DOCUMENTED INCOME ON A SCALE RELATING TO THE PERCENTAGE OF PUBLISHED RENT TO INCOME RESIDENCE FEES MAY INCLUDE TEMPORARY ALLOWANCES DETERMINED BASED ON SPECIAL NEEDS THE ASSOCIATION ESTABLISHES PROCEDURES FOR PROGRAM SCHOLARSHIP AND FEE ASSISTANCE BY PROGRAM, WHICH REFLECT APPROPRIATE AUTHORIZATION AND ADMINISTRATION MECHANISMS A DOCUMENTED BASIS FOR GRANTING CONSISTENT FEE ASSISTANCE BASED ON INCOME AND FAMILY SIZE MUST BE DEVELOPED, UPDATED ANNUALLY, AND USED IN DETERMINING THE AMOUNT TO BE GRANTED TO EACH APPLICANT THE MAXIMUM ASSISTANCE AWARD AMOUNT IS 75% FOR PROGRAM FEES, 60% FOR CHILD CARE SERVICES, 98% FOR CAMP ECHO SCHOLARSHIPS AND 100% FOR RESIDENCE RENT (ONLY UP TO INITIAL FOUR WEEKS) EXCEPTIONS CAN ONLY BE MADE BY THE PRESIDENT/CEO OR COO IN WRITING ISSUANCE OF SCHOLARSHIPS FOR PROGRAMS WILL BE FOR ONE PROGRAM SESSION

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Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.
▶ Attach to Form 990. ▶ See separate instructions.
▶ Information about Schedule J (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
YOUNG MENS CHRISTIAN ASSOC MCGAW INC

Employer identification number
36-2169194

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax idemnification and gross-up payments ☐ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	**1b**		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	**2**		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III ☑ Compensation committee ☐ Written employment contract ☐ Independent compensation consultant ☑ Compensation survey or study ☐ Form 990 of other organizations ☑ Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
a	Receive a severance payment or change-of-control payment?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**		No
c	Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	**4c**		No
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	**5a**		No
b	Any related organization? If "Yes," to line 5a or 5b, describe in Part III	**5b**		No
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	**6a**		No
b	Any related organization? If "Yes," to line 6a or 6b, describe in Part III	**6b**		No
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	**8**		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	**9**		

Part II **Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use 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)(i)-(iii) 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 W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) WILLIAM F GEIGER	(i)	171,430	0	0	19,615	19,115	210,160	0
PRESIDENT/CEO	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

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

Return Reference	Explanation

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

▸Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
▸ Attach to Form 990.
▸Information about Schedule M (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
YOUNG MENS CHRISTIAN ASSOC MCGAW INC

Employer identification number
36-2169194

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	9	34,182	MARKET VALUE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▸ (____________)				
26 Other ▸ (____________)				
27 Other ▸ (____________)				
28 Other ▸ (____________)				

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

			Yes	No
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	**30a**		No
b	If "Yes," describe the arrangement in Part II			
31	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	**31**	Yes	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	**32a**	Yes	
b	If "Yes," describe in Part II			
33	If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II			

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
Schedule M, Part I, Explanations of reporting method for number of contributions	SECURITIES - PUBLICLY TRADED THE MCGAW YMCA IS REPORTING THE NUMBER OF CONTRIBUTIONS
Schedule M, Part I, Line 32b, Third parties used to solicit, process, or sell noncash contributions	SECURITIES THAT ARE TRADED ON PUBLIC EXCHANGES, OR OTHER READILY MARKETABLE SECURITIES, SHALL BE ACCEPTED BY THE YMCA IN MOST CASES SUCH SECURITIES WILL BE IMMEDIATELY SOLD BY THE YMCA IF AN INDIVIDUAL OR HIS/HER BROKER INDICATES A WILLINGNESS TO DONATE STOCK OR SECURITIES, THAT PERSON SHOULD BE INFORMED THAT SUCH TRANSFERS ARE HANDLED BY THE YMCA'S INVESTMENT ADVISOR THE BROKER OF RECORD SHALL THEN BE INSTRUCTED TO COMMUNICATE WITH THE DONOR OR DONOR'S BROKER VALUATION OF DONATED SECURITIES WILL BE DETERMINED AS THE MEAN BETWEEN THE HIGH AND THE LOW ON THE DATE OF THE GIFT
Schedule M, part I, column (b), Line 9, Number of contributions or items contributed	THE MCGAW YMCA IS REPORTING THE NUMBER OF CONTRIBUTIONS

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SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.
▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization	Employer identification number
YOUNG MENS CHRISTIAN ASSOC MCGAW INC	36-2169194

Return Reference	Explanation
FORM 990, PART III, LINE 4D, SOCIAL REPONSIBILTY AND COMMUNITY COLLABORATION	THE MCGAW YMCA HAS BEEN RESPONDING TO OUR COMMUNITY'S MOST CRITICAL SOCIAL NEEDS FOR 129 YEARS WE USE SOCIAL RESPONSIBILTY AS OUR INSTITUTIONAL COMPASS BY UNDERSTANDING AND EVALUATING OUR PROGRAMS AND ENSURING THAT THE YMCA OFFER THE RIGHT COMBINATION OF PROGRAMS AND SERVICES THAT REFLECT OUR CORE VALUES, SOCIAL JUSTICE AND SOCIAL RESPONSIBLITY BESIDES OFFERING CRITICAL AND IMPACTFUL PROGRAMS AND THE FINANCIAL ASSISTANCE AND SUBSIDIES TO ALLOW ACCESS TO CHILDREN AND FAMILIES IN THE COMMUNITY, COLLABORATION WITH OTHER AGENCIES AND COMMUNITY ORGANIZATIONS IS KEY TO ACHIEVING OUR GOALS DURING THE YEAR WE CONTINUED AS THE INITIATING COLLABORATOR FOR A TEAM OF LEADERS FROM THE EVANSTON COMMUNITY AS PART OF THE YMCA OF THE USA'S "PIONEERING HEALTHY COMMUNITIES " THAT ADDRESSES HEALTH DEPARITIES IN THE COMMUNITY BY HELPING OUR CITY MAKE POLICY AND ENVIRONMENT CHANGES TO REDUCE CHILDHOOD OBESITY, FOCUSING ON CHILDHOOD AGES 0-5 WE ALSO HAVE EXPANDED OUR PARTNERSHIP WITH NORTHWESTERN UNIVERSITY ON A NEW DIABETES CONTROL PROGRAM TO DETERMINE IF COMMUNITY-BASED WEIGHT MANAGEMENT PROGRAMS CAN HELP ADULTS LIVING WITH TYPE 2 DIABETES IMPROVE THERIR HEALTH AND PREVENT HEART DISEASE IN FY2014 OUR Y FORMALLY BEGAN ITS SUPPORT AND INVOLVEMENT IN THE NEWLY LAUNCHED EVANSTON INITIATIVE, CRADLE TO CAREER, WHICH IS AN EFFORT TO MOBILIZE COMMUNITY ASSETS TO MAKE A LASTING DIFFERENCE IN THE LIVES OF OUR CHILDREN AND YOUTH, WITH A VISION THAT BY AGE 23 ALL EVANSTON YOUNG ADULTS WILL BE LEADING PRODUCTIVES LIVES, BUILDING ON THE RESOURCES, EDUCATION, AND SUPPORT THAT THEY AND THEIR FAMILIES HAVE HAD TO HELP THEM GROW INTO RESILIENT, EDUCATED, HEALTHY, SELF-SUFFICIENT, AND SOCIALLY RESPONSIBLE ADULTS

Return Reference	Explanation
Form 990, Part VI, Sec A, Line 1a, Delegate broad authority to a committee	THE EXECUTIVE COMMITTEE, WHICH IS A STANDING COMMITTEE OF THE BOARD OF DIRECTORS, SHALL CONSIST OF THE ELECTED OFFICERS OF THE ASSOCIATION THE CHAIR MAY APPOINT ADDITIONAL DIRECTORS TO SERVE ON THE EXECUTIVE COMMITTEE, SUBJECT TO THE APPROVAL OF THE BOARD OF DIRECTORS SUBJECT TO SUCH RESTRICTIONS IMPOSED BY LAW, THE EXECUTIVE COMMITTEE HAS ALL THE POWERS OF THE BOARD OF DIRECTORS DURING INTERVALS BETWEEN MEETINGS OF THE BOARD OF DIRECTORS AND MUST REPORT ALL ACTIONS TAKEN AT THE NEXT MEETING OF THE BOARD OF DIRECTORS A MAJORITY SHALL CONSTITUTE A QUORUM FOR MEETING OF THE EXECUTIVE COMMITTEE, AND ANY ACTION TAKEN BY THE COMMITTEE SHALL BE BY VOTE OF A MAJORITY OF THE COMMITTEE MEMBERS PRESENT AND VOTING AT A MEETING AT WHICH A QUORUM IS PRESENT

Return Reference	Explanation
Form 990, Part VI, Sec A, Line 6, Classes of members or stockholders	THE ORGANIZATION IS A MEMBERSHIP ORGANIZATION FOR PURPOSES OF THE USE OF ITS FACILITIES AND PROGRAMS

Return Reference	Explanation
Form 990, Part VI, Sec A, Line 7a, Members or stockholders electing members of governing body	THE BOARD OF DIRECTORS IS ELECTED BY MEMBERS AT THE ANNUAL MEETING

Return Reference	Explanation
Form 990, Part VI, Sec B, Line 11b, Review of form 990 by governing body	THE ASSOCIATION PROVIDES AN ELECTRONIC COPY OF THE FINAL VERSION OF FORM 990 TO ALL BOARD MEMBERS FOR THEIR REVIEW BEFORE IT IS FILED

Return Reference	Explanation
Form 990, Part VI, Sec B, Line 12c, Conflict of interest policy	AN INTERESTED PERSON MUST DISCLOSE THE EXISTENCE OF THE FINANCIAL INTEREST AND BE GIVEN THE OPPORTUNITY TO DISCLOSE ALL MATERIAL FACTS TO THE DIRECTORS AND MEMBERS OF COMMITTEES WITH GOVERNING BOARD DELEGATED POWERS CONSIDERING THE PROPOSED TRANSACTION OR ARRANGEMENT ALL BOARD MEMBERS MUST SIGN AN ANNUAL STATEMENT THAT THEY HAVE READ AND THAT THEY WILL COMPLY WITH THE POLICY AN INTERESTED PERSON MAY MAKE A PRESENTATION AT THE GOVERNING BOARD OR COMMITTEE MEETING, BUT AFTER THE PRESENTATION, HE/SHE MAY BE ASKED TO LEAVE THE MEETING DURING THE DISCUSSION OF, AND THE VOTE ON, THE TRANSACTION OR ARRANGEMENT INVOLVING THE POSSIBLE CONFLICT OF INTEREST AFTER EXERCISING DUE DILIGENCE, THE GOVERNING BOARD OR COMMITTEE SHALL DETERMINE WHETHER THE ORGANIZATION CAN OBTAIN WITH REASONABLE EFFORTS A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT FROM A PERSON OR ENTITY THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST IF A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT IS NOT REASONABLY POSSIBLE UNDER CIRCUMSTANCES NOT PRODUCING A CONFLICT OF INTEREST, THE GOVERNING BOARD OR COMMITTEE SHALL DETERMINE BY A MAJORITY VOTE OF THE DISINTERESTED DIRECTORS WHETHER THE TRANSACTION OR ARRANGEMENT IS IN THE ORGANIZATION'S BEST INTEREST, FOR ITS OWN BENEFIT, AND WHETHER IT IS FAIR AND REASONABLE IN CONFORMITY WITH THE ABOVE DETERMINATION IT SHALL MAKE ITS DECISION AS TO WHETHER TO ENTER INTO THE TRANSACTION OR ARRANGEMENT

Return Reference	Explanation
Form 990, Part VI, Sec B, Line 15a, Process to establish compensation of top management official	ANNUALLY, THE HUMAN RESOURCES TASK FORCE OF THE YMCA OF THE USA SENDS TO ALL Y'S THEIR SALARY ADMINISTRATION GUIDELINE RECOMMENDATION THE GUIDELINE LISTS SALARY RANGES AND RECOMMENDED MERIT INCREASES IN ADDITION THEY POST ON THE WEBSITE THE US DEPARTMENT OF LABOR STATISTICS IN SUPPORT OF THESE GUIDELINES, SALARY RANGES ARE BASED ON SUBJECTIVE CRITERIA, THE ARTHUR ANDERSON "HAY PLAN" DEVELOPED IN 2000 THERE IS A POINT SYSTEM RATING FOR EACH JOB, WHICH INCLUDES TOTAL REVENUE RESPONSIBILITY, MANAGERIAL KNOW-HOW, AND DECISION COMPLEXITY FOR EACH SALARY JOB THE HUMAN RESOURCES COMMITTEE REVIEWS THE GUIDELINES AND RECOMMENDS TO THE BOARD CHAIR AND THE EXECUTIVE COMMITTEE AN APPROPRIATE MERIT INCREASE FOR THE CEO THE HR COMMITTEE CONSISTS OF 7 INDIVIDUALS WHO ARE YMCA MEMBERS AND/OR INDEPENDENT VOLUNTEERS THE BOARD CHAIR COMPLETES AN EMPLOYEE STATUS CHANGE FORM AUTHORIZING THE MERIT RAISE AND THIS FORM IS PERMANENTLY KEPT AS PART OF THE CEO'S PAYROLL RECORDS IN THE FINANCE DEPARTMENT OFFICERS' AND KEY EMPLOYEES' COMPENSATION AND MERIT INCREASES ARE DETERMINED IN A SIMILAR MANNER USING THE HR COMMITTEE TO GIVE GUIDANCE USING THE "HAY" POINTING SYSTEM FOR COMPENSATION LEVELS WITHIN A SPECIFIED RANGE FOR THE RELATED RESPONSIBILITIES AND EXPERIENCE, AND DEVELOPING RANGES OF INCREASES THAT ADHERE TO SPECIFIC PERFORMANCE APPRAISAL RESULTS AND OVERALL BUDGET GUIDELINES DEVELOPED TO APPLY INCREASES THE CEO REVIEWS THE PERFORMANCE OF ALL DIRECT REPORTS AS WELL AS JOB SALARY SCALES FOR ALL KEY EMPLOYEES

Return Reference	Explanation
Form 990, Part VI, Sec B, Line 15b, Process to establish compensation of other employees	ANNUALLY, THE HUMAN RESOURCES TASK FORCE OF THE YMCA OF THE USA SENDS TO ALL Y'S THEIR SALARY ADMINISTRATION GUIDELINE RECOMMENDATION THE GUIDELINE LISTS SALARY RANGES AND RECOMMENDED MERIT INCREASES IN ADDITION THEY POST ON THE WEBSITE THE US DEPARTMENT OF LABOR STATISTICS IN SUPPORT OF THESE GUIDELINES, SALARY RANGES ARE BASED ON SUBJECTIVE CRITERIA ARTHUR ANDERSON DEVELOPED THE "HAY PLAN" IN 2000 THERE IS A POINT SYSTEM RATING FOR EACH JOB, WHICH INCLUDES TOTAL REVENUE RESPONSIBILITY, MANAGERLAL KNOW-HOW, AND DECISION COMPLEXITY FOR EACH SALARY JOB THE HUMAN RESOURCES COMMITTEE REVIEWS THE GUIDELINES AND RECOMMENDS TO THE BOARD CHAIR AND THE EXECUTIVE COMMITTEE AN APPROPRIATE MERIT INCREASE FOR THE CEO THE HR COMMITTEE CONSISTS OF 7 INDIVIDUALS WHO ARE YMCA MEMBERS AND/OR INDEPENDENT VOLUNTEERS THE BOARD CHAIR COMPLETES AN EMPLOYEE STATUS CHANGE FORM AUTHORIZING THE MERIT RAISE AND THIS FORM IS PERMANENTLY KEPT AS PART OF THE CEO'S PAYROLL RECORDS IN THE FINANCE DEPARTMENT, OFFICERS' AND KEY EMPLOYEES' COMPENSATION AND MERIT INCREASES ARE DETERMINED IN A SIMILAR MANNER USING THE HR COMMITTEE TO GIVE GUIDANCE USING THE "HAY" POINTING SYSTEM FOR COMPENSATION LEVELS WITHIN A SPECIFIED RANGE FOR THE RELATED RESPONSIBILITIES AND EXPERIENCE, AND DEVELOPING RANGES OF INCREASES THAT ADHERE TO SPECIFIC PERFORMANCE APPRAISAL RESULTS AND OVERALL BUDGET GUIDELINES DEVELOPED TO APPLY INCREASES THE CEO REVIEWS THE PERFORMANCE OF ALL DIRECT REPORTS AND JOB SALARY SCALE FOR ALL KEY EMPLOYEES

Return Reference	Explanation
Form 990, Part VI, Sec C, Line 19, Required documents available to the public	THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST

Return Reference	Explanation
Form 990 , Part XI, Line 9, Other changes in net assets or fund balances	CHANGE IN FMV OF CHARITABLE REMAINDER TRUST - 22963,