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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)

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Information about Form 990 and its instructions is at www.irs.gov/form990

OMB No 1545-0047

2014

Open to Public Inspection

A For the 2014 calendar year, or tax year beginning 01-01-2014 , and ending 12-31-2014

B Check if applicable ☐ Address change ☐ Name change ☐ Initial return ☐ Final return/terminated ☐ Amended return ☐ Application pending	C Name of organization VALLEY YOUTH HOUSE COMMITTEE INC		D Employer identification number 23-7178820
	Doing business as		
	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telephone number (610) 820-0166
	827-829 LINDEN STREET		
	City or town, state or province, country, and ZIP or foreign postal code ALLENTOWN, PA 18101		G Gross receipts \$ 22,334,268
F Name and address of principal officer PAUL ZIEGENFUS 827-829 LINDEN STREET ALLENTOWN, PA 18101			
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)			
I Tax-exempt status ☒ 501(c)(3) ☐ 501(c) ()  (insert no) ☐ 4947(a)(1) or ☐ 527		H(c) Group exemption number 	
J Website:  WWW.VALLEYYOUTHHOUSE.ORG			

K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other 	L Year of formation 1971	M State of legal domicile PA
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Part I

Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities PREVENTION AND INTERVENTION SERVICES, COUNSELING, HOUSING, LIFE SKILLS, AND BEHAVIORAL HEALTH SERVICES FOR ABUSED, NEGLECTED, AND HOMELESS YOUTH AND THEIR FAMILIES		
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	32	
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	31	
5 Total number of individuals employed in calendar year 2014 (Part V, line 2a)	5	538	
6 Total number of volunteers (estimate if necessary)	6	180	
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0	
b Net unrelated business taxable income from Form 990-T, line 34	7b	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	4,781,166	4,274,862
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	15,165,397	15,897,341
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	288,044	307,045
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-170,401	-251,449
	20,064,206	20,227,799	
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	2,700,512	3,167,806
	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)	10,739,405	11,641,364
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b Total fundraising expenses (Part IX, column (D), line 25)  286,075		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	5,479,941	5,080,505
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	18,919,858	19,889,675
	19 Revenue less expenses Subtract line 18 from line 12	1,144,348	338,124
Net Assets or Fund Balances		Beginning of Current Year	End of Year
	20 Total assets (Part X, line 16)	16,743,137	17,217,478
	21 Total liabilities (Part X, line 26)	2,028,221	2,030,012
	22 Net assets or fund balances Subtract line 21 from line 20	14,714,916	15,187,466

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	 *****	2015-07-14
	Signature of officer	Date
	 PAUL ZIEGENFUS FINANCE DIRECTOR	
	Type or print name and title	

Paid Preparer Use Only	Print/Type preparer's name ALAN B CARMAN	Preparer's signature ALAN B CARMAN	Date 2015-07-14	Check ☐ if self-employed	PTIN P01266253
	Firm's name  REINSEL KUNTZ LESHER LLP			Firm's EIN  23-2108173	
	Firm's address  1330 BROADCASTING ROAD PO BOX 7008 WYOMISSING, PA 196106008			Phone no (610) 376-1595	

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

Part IIIStatement 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 MISSION OF VALLEY YOUTH HOUSE IS TO PROVIDE PREVENTION AND INTERVENTION SERVICES, COUNSELING, LIFE SKILLS, AND BEHAVIORAL HEALTH SERVICES TO ABUSED, NEGLECTED, AND HOMELESS YOUTH AND THEIR FAMILIES OUR PROGRAMS FOSTER POSITIVE GROWTH ENABLING AT RISK YOUTH AND THEIR FAMILIES TO BECOME HEALTHY, PRODUCTIVE, RESPONSIBLE MEMBERS OF THE COMMUNITY

2

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

Yes

No

If “Yes,” describe these new services on Schedule O

3

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

Yes

No

If “Yes,” describe these changes on Schedule O

4

Describe the organization’s program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations 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 \$ 10,821,450 including grants of \$ 3,042,064) (Revenue \$ 9,899,914)

INDEPENDENT LIVING PROGRAM - PROVIDES ASSISTANCE WITH EDUCATION, EMPLOYMENT, RESIDENTIAL PLANNING AND ATTAINMENT OF LIFE AND INTERPERSONAL SKILLS FOR YOUTH BETWEEN THE AGES OF 16 AND 24 THE PROGRAM PROVIDES OUT-CLIENT SERVICES AS WELL AS RESIDENTIAL PROGRAMS TO ASSIST IN-CARE YOUTH AND THOSE WHO ARE HOMELESS OR OTHERWISE SEPARATED FROM FAMILY SUPPORT IN DEVELOPING THE SKILLS AND RESOURCES TO TRANSITION TO INDEPENDENCE PROGRAMS ARE PROVIDED IN 10 EASTERN PENNSYLVANIA COUNTIES (BUCKS, CARBON, CHESTER, DELAWARE, LANCASTER, LEHIGH, LUZERNE, MONTGOMERY, NORTHAMPTON, AND PHILADELPHIA), AND SERVED A TOTAL OF 2,192 YOUTH AND 90 BABIES IN 2014 OUTCOMES EXCEED NATIONAL BENCHMARKS FOR SIMILAR POPULATIONS AND INCLUDED TRANSITIONING TO STABLE HOUSING (85 0% VS 59% NATIONALLY), HIGH SCHOOL COMPLETION OR RE-ENROLLMENT AND PROGRESS TOWARD GRADUATION (93 3% VS 54% NATIONALLY), AND EMPLOYMENT (68 8% VS 45% NATIONALLY)

4b

(Code) (Expenses \$ 1,272,864 including grants of \$ 174) (Revenue \$ 1,162,570)

FAMILY PRESERVATION PROGRAM - THE FAMILY PRESERVATION PROGRAM PROVIDES INTENSIVE HOME-BASED SERVICES TO FAMILIES WHO HAVE A CHILD AT IMMINENT RISK OF FOSTER CARE PLACEMENT DUE TO THE PRESENCE OF PHYSICAL ABUSE, DRUG AND ALCOHOL ABUSE, NEGLECT, SERIOUS EMOTIONAL ILLNESS OR PARENT/CHILD CONFLICT THE PROGRAM BUILDS THE FAMILY’S ABILITY TO MANAGE THE BEHAVIORAL NEEDS OF THEIR CHILDREN AND PREVENT THE NEED FOR PLACING THE CHILD IN A MORE RESTRICTIVE ENVIRONMENT A TOTAL OF 243 CHILDREN AND THEIR FAMILIES WERE SERVED IN 2014, WITH A SUCCESS RATE OF 82% IN PREVENTING PLACEMENT

4c

(Code) (Expenses \$ 1,689,388 including grants of \$ 110,307) (Revenue \$ 1,512,341)

SHELTER OPERATIONS - TWO SHELTER PROGRAMS, LOCATED IN LEHIGH AND BUCKS COUNTIES, PROVIDE 24 HOUR A DAY, 365 DAYS A YEAR, WALK-IN CRISIS INTERVENTION, SHORT-TERM RESIDENCY, COUNSELING AND LIFE SKILLS EDUCATION TO YOUTH BETWEEN THE AGES OF 12 AND 17 IN 2014, A TOTAL OF 221 YOUTH WERE SERVED, WITH 94% DISCHARGED BACK TO THEIR FAMILIES OR TRANSITIONED SUCCESSFULLY TO OTHER SAFE PLACEMENT TWO FEDERALLY-FUNDED STREET OUTREACH PROGRAMS SERVE THE CITY OF ALLENTOWN AND BUCKS COUNTY PROVIDING EMERGENCY SUPPLIES (FOOD, HYGIENE PRODUCTS, CAMPING GEAR, ETC), COUNSELING AND LINKAGES TO COMMUNITY RESOURCES TO ENSURE YOUTH SAFETY A TEAM OF OUTREACH WORKERS OPERATE FROM JEEPS (CARRYING A BICYCLE AND A CANOE TO REACH REMOTE AREAS) THAT ARE STOCKED WITH EMERGENCY SUPPLIES SUCH AS FOOD, CLOTHING, CAMPING GEAR AND HYGIENE PRODUCTS A TOTAL OF 363 YOUTH WERE SERVED IN 2014 ATLOCATIONS IN THE COMMUNITY WHERE STREET YOUTH ARE KNOWN TO CONGREGATE, INCLUDING MALLS, PARKS, ALONG RIVERS AND RAILROAD TRACKS, AND IN ADULT HOMELESS ENCAMPMENTS

See Additional Data

4d

Other program services (Describe in Schedule O)

(Expenses \$ 4,136,174 including grants of \$ 15,261) (Revenue \$ 3,322,516)

4e

Total program service expenses

17,919,876

Part IV

Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 	1 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 	2 Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	No
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 	6	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8	No
9 Did the organization report an amount in Part X, line 21 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	No
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? 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)

21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	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? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 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.		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	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.		
2b	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).	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		No
3b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.		
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)?		No
b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		No
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
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?		No
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	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?	Yes	
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	Yes	
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		No
7d	If "Yes," indicate the number of Forms 8282 filed during the year.		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		No
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		No
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9a	Did the sponsoring organization make any taxable distributions under section 4966?		
9b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter		
10a	Initiation fees and capital contributions included on Part VIII, line 12.		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		
11	Section 501(c)(12) organizations. Enter		
11a	Gross income from members or shareholders.		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13a	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.		
13b	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.		
13c	Enter the amount of reserves on hand.		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		No
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.		

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		
b	Enter the number of voting members included in line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	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	No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
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▶PA
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, address, and telephone number of the person who possesses the organization's books and records ▶ORGANIZATION

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

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 (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			

1b	Sub-Total	▶			
c	Total from continuation sheets to Part VII, Section A	▶			
d	Total (add lines 1b and 1c)	▶	1,095,116	0	87,746

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▶5

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	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? <i>If "Yes," complete Schedule J for such individual</i>	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? <i>If "Yes," complete Schedule J for such person</i>	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	1a228,646			
	b	Membership dues	1b			
	c	Fundraising events	1c234,113			
	d	Related organizations	1d			
	e	Government grants (contributions)	1e2,639,561			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f1,172,542			
	g	Noncash contributions included in lines 1a-1f \$	439,582			
	h	Total. Add lines 1a-1f	4,274,862			
Program Service Revenue	2a	SERVICE FEES	Business Code 624100	15,829,010	15,829,010	
	b	CAMP FOWLER RENTAL	624100	68,331	68,331	
	c					
	d					
	e					
	f	All other program service revenue				
	g	Total. Add lines 2a-2f	15,897,341			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)	170,367			170,367
	4	Income from investment of tax-exempt bond proceeds				
	5	Royalties				
	6a	Gross rents	(i) Real (ii) Personal			
	b	Less rental expenses				
	c	Rental income or (loss)				
	d	Net rental income or (loss)				
	7a	Gross amount from sales of assets other than inventory	(i) Securities (ii) Other 1,886,803 10,500			
	b	Less cost or other basis and sales expenses	1,760,625 0			
	c	Gain or (loss)	126,178 10,500			
	d	Net gain or (loss)	136,678			136,678
	8a	Gross income from fundraising events (not including \$ 234,113 of contributions reported on line 1c) See Part IV, line 18	a91,035			
	b	Less direct expenses	b344,544			
	c	Net income or (loss) from fundraising events	-253,509			-253,509
	9a	Gross income from gaming activities See Part IV, line 19	a3,360			
	b	Less direct expenses	b1,300			
	c	Net income or (loss) from gaming activities	2,060			2,060
	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				
		Miscellaneous Revenue	Business Code			
	11a					
	b					
	c					
	d	All other revenue				
	e	Total. Add lines 11a-11d				
	12	Total revenue. See Instructions	20,227,799	15,897,341	0	55,596

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 domestic organizations and domestic governments. See Part IV, line 21.				
2	Grants and other assistance to domestic individuals. See Part IV, line 22.	3,167,806	3,167,806		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4	Benefits paid to or for members.				
5	Compensation of current officers, directors, trustees, and key employees.	1,196,936	1,058,666	120,950	17,320
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).				
7	Other salaries and wages.	8,383,209	7,386,948	872,336	123,925
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	194,928	171,231	19,704	3,993
9	Other employee benefits.	1,042,120	915,766	106,420	19,934
10	Payroll taxes.	824,171	725,208	87,332	11,631
11	Fees for services (non-employees):				
a	Management.	1,282,445	1,064,490	175,888	42,067
b	Legal.	3,140	2,606	431	103
c	Accounting.	77,840	64,611	10,676	2,553
d	Lobbying.				
e	Professional fundraising services. See Part IV, line 17.				
f	Investment management fees.	41,953	28,519	7,817	5,617
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	171,713	142,531	23,549	5,633
12	Advertising and promotion.				
13	Office expenses.	251,308	191,383	45,169	14,756
14	Information technology.				
15	Royalties.				
16	Occupancy.	857,033	827,719	29,314	
17	Travel.	729,742	716,112	11,319	2,311
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19	Conferences, conventions, and meetings.	258,493	167,516	74,654	16,323
20	Interest.				
21	Payments to affiliates.				
22	Depreciation, depletion, and amortization.	310,167	295,935	10,377	3,855
23	Insurance.	96,553	48,453	47,960	140
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	SUPPLIES	761,926	746,083	15,230	613
b	EQUIPMENT REPAIRS & MAINTENANCE	205,024	187,860	14,458	2,706
c	MISCELLANEOUS	27,256	7,791	8,594	10,871
d	DUES & SUBSCRIPTIONS	5,912	2,642	1,546	1,724
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e.	19,889,675	17,919,876	1,683,724	286,075
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720).				

Part X

Balance Sheet

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

				(A)		(B)
				Beginning of year		End of year
Assets	1	Cash—non-interest-bearing		16,653	1	17,213
	2	Savings and temporary cash investments		2,059,831	2	1,365,647
	3	Pledges and grants receivable, net		303,189	3	337,741
	4	Accounts receivable, net		3,818,664	4	4,555,880
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		476,019	9	480,132
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a7,065,914			
	b	Less accumulated depreciation	10b3,242,039	3,777,626	10c	3,823,875
	11	Investments—publicly traded securities		6,235,532	11	6,582,881
	12	Investments—other securities See Part IV, line 11			12	
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		55,623	15	54,109
	16	Total assets. Add lines 1 through 15 (must equal line 34)		16,743,137	16	17,217,478
Liabilities	17	Accounts payable and accrued expenses		1,914,803	17	2,008,881
	18	Grants payable			18	
	19	Deferred revenue		36,475	19	21,131
	20	Tax-exempt bond liabilities			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			22	
	23	Secured mortgages and notes payable to unrelated third parties		76,943	23	0
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		2,028,221	26	2,030,012
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		10,657,665	27	10,764,531
	28	Temporarily restricted net assets		1,462,338	28	1,821,820
	29	Permanently restricted net assets		2,594,913	29	2,601,115
	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		14,714,916	33	15,187,466
	34	Total liabilities and net assets/fund balances		16,743,137	34	17,217,478

Part XI Reconciliation 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	20,227,799
2	Total expenses (must equal Part IX, column (A), line 25)	2	19,889,675
3	Revenue less expenses Subtract line 2 from line 1	3	338,124
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	14,714,916
5	Net unrealized gains (losses) on investments	5	134,426
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	15,187,466

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? 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		No
2b	Were the organization's financial statements audited by an independent accountant? 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	Yes	
2c	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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
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?	Yes	
3b	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	Yes	

Additional Data

Software ID:

Software Version:

EIN: 23-7178820

Name: VALLEY YOUTH HOUSE COMMITTEE INC

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

(Code	) (Expenses \$	991,280	including grants of \$	4,026) (Revenue \$	854,057)
CHILDREN'S BEHAVIORAL HEALTH SERVICES - THIS PROGRAM HAS TWO COMPONENTS FAMILY BASED MENTAL HEALTH PROGRAM PROVIDES IN-HOME COUNSELING AND EDUCATION SERVICES TO THOSE FAMILIES THAT HAVE AN EMOTIONALLY TROUBLED CHILD BEHAVIORAL HEALTH REHABILITATIVE SERVICES PROVIDES BEHAVIOR SPECIALISTS, MOBILE THERAPISTS AND/OR THERAPEUTIC STAFF TO WORK WITH CHILDREN AND FAMILIES IN THE HOME, SCHOOL OR COMMUNITY TO IMPROVE AN EMOTIONALLY TROUBLED CHILD'S BEHAVIOR THE GOAL FOR BOTH PROGRAMS IS TO BUILD THE FAMILY'S ABILITY TO MANAGE THE BEHAVIORAL AND MENTAL HEALTH CARE NEEDS OF THE CHILDREN AND PREVENT THE NEED FOR PLACING THE CHILD IN A MORE RESTRICTIVE ENVIRONMENT A TOTAL OF 184 CHILDREN AND THEIR FAMILIES WERE SERVED IN 2014, WITH A 90% SUCCESS RATE IN MAINTAINING THE CHILD IN LEAST RESTRICTIVE ENVIRONMENT THE SUPPORTIVE HOUSING FOR FAMILIES PROGRAM OPERATES WITHIN THE CHILD WELFARE AND BEHAVIORAL HEALTH PROGRAM DIVISION AND SERVES HOMELESS FAMILIES WHOSE CHILDREN ARE AT RISK OF PLACEMENT DUE TO THE FAMILY'S HOMELESSNESS SERVICES INCLUDE SUBSIDIZED HOUSING AND INTENSIVE CASE MANAGEMENT ACCORDING TO AN INDIVIDUALIZED PLAN ENSURING THAT ADULT FAMILY MEMBERS FIND AND RETAIN LIVING WAGE EMPLOYMENT, DEVELOP LIFE AND PARENTING SKILLS AND BUILD RELATIONSHIPS WITHIN THE COMMUNITY TO SUSTAIN STABILITY AND WELL-BEING FOLLOWING FORMAL SERVICES A TOTAL OF 21 FAMILIES WERE SERVED IN 2014 WITH A 75% SUCCESS RATE					
(Code	) (Expenses \$	509,652	including grants of \$	6,488) (Revenue \$	369,797)
GROUP HOME - A PRE-ADOLESCENT TREATMENT HOME SERVICE (PATHS) IS A COMMUNITY-BASED RESIDENTIAL PROGRAM FOR BOYS 7-12 YEARS OLD WHO HAVE BEEN TAKEN OUT OF THE HOME FOR SEXUALLY REACTIVE BEHAVIOR THE PROGRAM PROVIDES TREATMENT THAT FOCUSES ON CHANGING BEHAVIORS AND DEVELOPING HEALTHIER COPING MECHANISMS TO ENSURE A SAFE RETURN TO THE FAMILY SETTING A TOTAL OF 10 BOYS WERE SERVED IN 2014 THERE WERE 6 DISCHARGES DURING THE YEAR TWO RETURNED HOME, 1 WENT INTO FOSTER CARE, AND 3 REQUIRED A HIGHER LEVEL OF CARE FOUR OF THOSE 10 YOUTH REMAIN IN THE PROGRAM PENDING DISCHARGES TO FOSTER CARE					

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

(Code)	(Expenses \$ 856,937	including grants of \$ 4,428)	(Revenue \$ 730,079)
YOUTH EDUCATION & PREVENTION - SCHOOL AND COMMUNITY-BASED GROUP OR CLASSROOM PREVENTION AND EDUCATION SERVICES THAT BUILD DECISION MAKING AND REFUSAL SKILLS AMONG YOUTH LEADING TO THE ABILITY TO MAKE HEALTHY LIFE CHOICES 8,466 (K-12TH GRADE) STUDENTS IN 33 LEHIGH AND NORTHAMPTON COUNTY SCHOOLS WERE SERVED IN 2014 THE SCHOOL-BASED STUDENT ASSISTANCE PROGRAM PROVIDES PREVENTIVE MENTAL HEALTH COUNSELING AND INTERVENTION TO PUBLIC SCHOOL STUDENTS IN 55 NORTHAMPTON COUNTY SCHOOLS AND TWO SCHOOLS IN THE ALLENTOWN SCHOOL DISTRICT A TOTAL OF 1,085 STUDENTS WERE SERVED IN THE 2013-2014 SCHOOL YEAR, WITH AN 88% SUCCESS RATE OF IMPROVING MENTAL AND EMOTIONAL WELL-BEING			
(Code)	(Expenses \$ 632,317	including grants of \$ -62)	(Revenue \$ 511,401)
FAMILY INTERVENTION PROGRAM - TWO PROGRAMS FALL WITHIN THIS SERVICE DIVISION FUNCTIONAL FAMILY THERAPY (FFT) IS A SHORT-TERM, EVIDENCE-BASED FAMILY THERAPY MODEL THAT ADDRESSES PROBLEMATIC ADOLESCENT BEHAVIOR THAT HAS OR MAY LEAD TO CRIMINAL BEHAVIOR, DRUG/ALCOHOL USE AND, AS RESULT, POOR ACADEMIC PERFORMANCE THE PROGRAM USES A VARIETY OF TECHNIQUES TO CHANGE YOUTH AND FAMILY COMMUNICATION, INTERACTION, AND PROBLEM SOLVING LEADING TO REDUCTIONS IN HIGH-RISK BEHAVIORS THAT IMPACT EDUCATIONAL ACHIEVEMENT AND OTHER INDICATORS OF POSITIVE FUNCTION THE FAMILY INTERVENTION PROGRAM PRESERVES FAMILY LIFE THROUGH THE ELIMINATION OF THE DESTRUCTIVE IMPACT OF SUBSTANCE ABUSE PROBLEMS WITHIN FAMILIES A TOTAL OF 401 FAMILIES WERE SERVED BY THE TWO PROGRAMS IN 2014 OUTCOMES INCLUDED 83% IMPROVED FAMILY FUNCTION, 100% REDUCED OR ELIMINATED SUBSTANCE USE, AND 96% OF TARGETED YOUTH DID NOT RE-OFFEND			

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

(Code)	(Expenses \$ 474,284	including grants of \$ 233)	(Revenue \$ 457,806)
ADOLESCENTS/FAMILY TOGETHER - THREE PROGRAMS ARE OFFERED WITHIN THIS PROGRAM DIVISION CHILD MENTORING PROVIDES A POSITIVE, CARING ADULT ROLE MODEL FOR AT-RISK CHILDREN, AS WELL AS IN-HOME RESPITE CARE FOR FAMILIES WITH AUTISTIC CHILDREN THE PROGRAM ASSISTS FAMILIES IN CONNECTING TO COMMUNITY RESOURCES IN ORDER TO MAINTAIN STABILITY IN THE FAMILY THE TRUANCY INTERVENTION PROGRAM STAFF WORK WITH SCHOOL-IDENTIFIED YOUTH THAT MISSED 10 OR MORE DAYS OF SCHOOLS SERVICES ARE PROVIDED AT SCHOOL, IN THE HOME OR OTHER COMMUNITY SITES AND INCLUDE TUTORING, MENTORING AND COUNSELING FOR BOTH THE YOUTH AND THEIR FAMILIES TO ADDRESS UNDERLYING ISSUES THAT LEAD TO TRUANCY AND POOR ACADEMIC PERFORMANCE SERVICES HELP TO INCREASE SCHOOL ATTENDANCE AND PERFORMANCE THE VICTIM INTERVENTION PROGRAM MEETS THE NEEDS OF SEXUAL ABUSE VICTIMS 18 YEARS OF AGE OR YOUNGER INDIVIDUAL, FAMILY AND PARENT COUNSELING IS PROVIDED TOWARD ELIMINATE NEGATIVE BEHAVIORS RELATED TO SEXUAL ABUSE A TOTAL OF 578 WERE SERVED IN THE THREE PROGRAMS, WITH A 95% SUCCESS RATE			
(Code)	(Expenses \$ 107,648	including grants of \$ 41)	(Revenue \$ 95,304)
PROJECT CHILD - A COMMUNITY COALITION WITH THE MISSION TO ELIMINATE CHILD ABUSE AND NEGLECT IN THE LEHIGH VALLEY, PROVIDES PUBLIC EDUCATION (INVOLVING 433 INDIVIDUALS IN 2014), LEGISLATIVE ADVOCACY, AND PARENTING SKILLS EDUCATION (WITH 590 PARTICIPANTS IN 2014) PROJECT CHILD ALSO IMPLEMENTS AN INNOVATIVE PROGRAM, LEARNING TO CARE, WHICH TEACHES NURTURING AND CHILD DEVELOPMENT CONCEPTS TO KINDERGARTNERS THE PROGRAM WAS PROVIDED IN 6 KINDERGARTEN CLASSES AT PETERS ELEMENTARY SCHOOL, INVOLVING 130 CHILDREN IN 2013/2014 SCHOOL YEAR			

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

(Code	) (Expenses \$	564,056	including grants of \$	107) (Revenue \$	304,072)
CAMP FOWLER LOCATED IN OREFIELD, PA, THIS 43-ACRE THERAPEUTIC CAMP SERVES A LARGE AND DIVERSE POPULATION WHICH INCLUDES THE BROAD SPECTRUM OF SPECIAL NEEDS AND AT RISK YOUTH THIS HANDICAP ACCESSIBLE FACILITY IS EQUIPPED WITH OVERNIGHT CABINS, MULTI-PURPOSE SPACE, A COMMERCIAL KITCHEN, SPORTS FIELDS, AN EXTENSIVE ADVENTURE COURSE AND A HEATED POOL, AND PROVIDED THERAPEUTIC RECREATION TO 21,338 YOUTH IN 2014 CAMP FOWLER IS USED EXTENSIVELY BY VALLEY YOUTH HOUSE PROGRAMS AS WELL AS A VARIETY OF COMMUNITY GROUPS SUCH AS THE BOY SCOUTS, THE GIRL SCOUTS, THE PA STATE POLICE CAMP CADET, THE PA LUNG ASSOCIATION ASTHMA CAMP, AND THE LEHIGH VALLEY HEALTH NETWORK'S CAMP RED JACKET FOR CHILDREN WITH DIABETES THE CARBON LEHIGH INTERMEDIATE UNIT 21 ALSO REGULARLY CONDUCTS PROGRAMMING FOR THEIR SPECIAL NEEDS AND ALTERNATIVE EDUCATION CLASSES AT CAMP FOWLER ONGOING FITNESS CLASSES, SWIM LESSONS AND NATURE EDUCATION PROGRAMS IN PARTNERSHIP WITH THE WILDLANDS CONSERVANCY ARE ALSO CONDUCTED AT THE CAMP THE CAMP EMPLOYS A YOUTH STAFF WHICH HANDLES ALL LIFEGUARDING, CAMP GROUNDS AND LAWN MAINTENANCE ASSIST WITH THERAPEUTIC RECREATION THE AGENCY HAS A CORPS OF 20 CERTIFIED ADVENTURE FACILITATORS TOPLAN AND IMPLEMENT ADVENTURE-BASED PROGRMAMING					

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)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ANNETTE DURANSO PRESIDENT & CEO	40 00	X		X				148,229	0	12,054
(1) PATRICK GARAY CHAIR	1 00	X		X				0	0	0
(2) LESLEY FALLON VICE CHAIR	1 00	X		X				0	0	0
(3) CHARLES VERSAGGI SECRETARY	1 00	X		X				0	0	0
(4) KATHRYN BROWN TREASURER	1 00	X		X				0	0	0
(5) JONATHAN DURN MEMBER-AT-LARGE	1 00	X						0	0	0
(6) DR MICHAEL CONSUELOS MEMBER-AT-LARGE	1 00	X						0	0	0
(7) WILLIAM CARMODY DIRECTOR	1 00	X						0	0	0
(8) SALISA BERRIEN DIRECTOR	1 00	X						0	0	0
(9) PATRICK CAHILL DIRECTOR	1 00	X						0	0	0
(10) EDWARD CWALINA JR DIRECTOR	1 00	X						0	0	0
(11) MELODY NYONI DIRECTOR	1 00	X						0	0	0
(12) GREG DUDKIN DIRECTOR	1 00	X						0	0	0
(13) DOLAND SACHS DIRECTOR	1 00	X						0	0	0
(14) MICHAEL HAILYE DIRECTOR	1 00	X						0	0	0
(15) JOHN HAYES DIRECTOR	1 00	X						0	0	0
(16) ERIC LUFTIG DIRECTOR	1 00	X						0	0	0
(17) JAMES MACK DIRECTOR	1 00	X						0	0	0
(18) SUSAN SALVADOR DIRECTOR	1 00	X						0	0	0
(19) LORETTA TUBIELLO-HARR DIRECTOR	1 00	X						0	0	0
(20) ANTHONY SALVINO DIRECTOR	1 00	X						0	0	0
(21) WES SCHANTZ DIRECTOR	1 00	X						0	0	0
(22) PAUL SMITH DIRECTOR	1 00	X						0	0	0
(23) KRIS ANN TOOMEY DIRECTOR	1 00	X						0	0	0
(24) DOUGLAS DOWNING DIRECTOR	1 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)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(26) ROBERT RUPEL DIRECTOR	1 00	X						0	0	0
(1) MATT SMITH DIRECTOR	1 00	X						0	0	0
(2) TRACEY SMITH DIRECTOR	1 00	X						0	0	0
(3) LIZ WOOLLEY DIRECTOR	1 00	X						0	0	0
(4) CORNING PAINTER DIRECTOR	1 00	X						0	0	0
(5) DON WENNER DIRECTOR	1 00	X						0	0	0
(6) DEMARA WILLIAMS DIRECTOR	1 00	X						0	0	0
(7) PAUL ZIEGENFUS DIRECTOR OF FINANCE	40 00			X				83,886	0	26,534
(8) PATRICIA MCGARRY SENIOR VICE PRESIDENT	40 00			X				243,969	0	5,843
(9) ROBERT ROBERTSON EXECUTIVE VICE PRESIDENT	40 00			X				120,947	0	16,283
(10) WILLIAM MOTSAVAGE SENIOR VICE PRESIDENT	40 00			X				92,642	0	14,891
(11) ANNE ADAMS SENIOR VICE PRESIDENT	40 00			X				224,154	0	5,555
(12) SANDRA MOLNAR PROGRAMS DIRECTOR	40 00				X			181,289	0	6,586

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization VALLEY YOUTH HOUSE COMMITTEE INC	Employer identification number 23-7178820
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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 in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g
- a

☐

Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**
- b

☐

Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**
- c

☐

Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**
- d

☐

Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**
- e

☐

Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization
- f

Enter the number of supported organizations _____
- g

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 listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
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) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	899,455	3,245,725	3,823,334	4,781,166	4,271,462	17,021,142
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	899,455	3,245,725	3,823,334	4,781,166	4,271,462	17,021,142
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						17,021,142

Section B. Total Support							
Calendar year (or fiscal year beginning in) ▶		(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4	899,455	3,245,725	3,823,334	4,781,166	4,271,462	17,021,142
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	52,992	78,085	163,761	127,878	170,367	593,083
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 VI)						
11	Total support Add lines 7 through 10						17,614,225
12	Gross receipts from related activities, etc (see instructions)					12	73,009,849
13	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage						
14	Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))	<table><tr><td>14</td><td>96 630 %</td></tr><tr><td>15</td><td>96 130 %</td></tr></table>	14	96 630 %	15	96 130 %
14	96 630 %					
15	96 130 %					
15	Public support percentage for 2013 Schedule A, Part II, line 14					
16a	33 1/3% support test—2014. 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—2013. 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—2014. 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 VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization	☐				
b	10%-facts-and-circumstances test—2013. 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 VI 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 IIISupport 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) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
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						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
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						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage			
15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))	15		
16 Public support percentage from 2013 Schedule A, Part III, line 15	16		

Section D. Computation of Investment Income Percentage			
17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f))	17		
18 Investment income percentage from 2013 Schedule A, Part III, line 17	18		
19a 33 1/3% support tests—2014. 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—2013. 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 Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1	
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2	
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a	
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b	
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c	
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a	
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b	
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c	
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a	
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b	
c Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c	
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6	
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7	
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).	8	
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a	
b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b	
c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c	
10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a	
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10b	
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a	
b A family member of a person described in (a) above?	11b	
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c	

Part IV

Supporting Organizations (continued)

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
a ☐ The organization satisfied the Activities Test. Complete line 2 below.			
b ☐ The organization is the parent of each of its supported organizations. Complete line 3 below.			
c ☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).			
2 <u>Activities Test</u> Answer (a) and (b) below.			
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.			
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
3 <u>Parent of Supported Organizations</u> Answer (a) and (b) below.			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.			
b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.			

Part V – Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI) _____		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	☐ Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2014 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause required--see instructions)			
3 Excess distributions carryover, if any, to 2014			
a From 2009.			
b From 2010.			
c From 2011.			
d From 2012.			
e From 2013.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount			
i Carryover from 2009 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2015. Add lines 3j and 4c			
8 Breakdown of line 7			
a From 2010.			
b From 2011.			
c From 2012.			
d From 2013.			
e From 2014.			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference

Explanation

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.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization VALLEY YOUTH HOUSE COMMITTEE INC	Employer identification number 23-7178820
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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 value of contributions to (during year)	
3	Aggregate value of 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
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register

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) Revenue 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

Revenue 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
1c	
1d	
1e	
1f	
- 2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

☐ 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	b (c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance	5,136,543	4,052,952	3,698,497	3,735,976	1,215,085
b Contributions	6,202	328,679	5,833	4,886	4,710
c Net investment earnings, gains, and losses	428,347	892,924	483,879	90,946	322,598
d Grants or scholarships					
e Other expenditures for facilities and programs	115,200	102,000	102,000	102,000	-2,205,471
f Administrative expenses	41,953	36,012	33,257	31,311	11,888
g End of year balance	5,413,939	5,136,543	4,052,952	3,698,497	3,735,976

- 2

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

a

Board designated or quasi-endowment ▶ 35 000 %

b

Permanent endowment ▶ 65 000 %

c

Temporarily restricted endowment ▶

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

(i) unrelated organizations

3a(i)

☐ Yes

☐ No

(ii) related organizations

3a(ii)

☐ Yes

☐ No
- b

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

3b

☐ Yes

☐ No
- 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		441,945		441,945
b Buildings		5,620,592	2,570,261	3,050,331
c Leasehold improvements				
d Equipment		648,043	471,300	176,743
e Other		355,334	200,478	154,856
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				3,823,875

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	20,817,770
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	134,426
b	Donated services and use of facilities	2b	110,202
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	345,343
e	Add lines 2a through 2d	2e	589,971
3	Subtract line 2e from line 1	3	20,227,799
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	0
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	20,227,799

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	20,345,220
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	110,202
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	345,343
e	Add lines 2a through 2d	2e	455,545
3	Subtract line 2e from line 1	3	19,889,675
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	19,889,675

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
PART V, LINE 4	THE VALLEY YOUTH HOUSE ENDOWMENT IS INTENDED TO SUSTAIN AND SUPPORT THE ONGOING OPERATIONS OF THE AGENCY. VALLEY YOUTH HOUSE MAINTAINS A SEPARATE ENDOWMENT TO SUSTAIN AND SUPPORT CAMP FOWLER. THE ENDOWMENT ALSO ENSURES THAT VALLEY YOUTH HOUSE CLIENTS CAN USE THE CAMP AT NO CHARGE, AND FEES FOR CLIENTS OF COMMUNITY GROUPS CAN BE MINIMIZED.
PART X, LINE 2	AS A NOT-FOR-PROFIT ORGANIZATION, THE ORGANIZATION IS GENERALLY EXEMPT FROM FEDERAL AND STATE INCOME TAXES. THE ORGANIZATION IS SUBJECT TO FEDERAL AND STATE INCOME TAXES ON UNRELATED BUSINESS INCOME. THE ORGANIZATION RECOGNIZES PENALTIES AND INTEREST ACCRUED RELATED TO INCOME TAX LIABILITIES IN THE PROVISION (BENEFIT) FOR INCOME TAXES IN ITS STATEMENTS OF ACTIVITIES. AT DECEMBER 31, 2014 AND 2013, THERE WAS NO ACCRUAL FOR THE PAYMENT OF PENALTIES AND INTEREST. WHEN RETURNS ARE FILED, IT IS HIGHLY CERTAIN THAT SOME POSITIONS TAKEN WOULD BE SUSTAINED UPON EXAMINATION BY THE TAXING AUTHORITIES, WHILE OTHERS ARE SUBJECT TO UNCERTAINTY ABOUT THE MERITS OF THE POSITION TAKEN OR THE AMOUNT OF THE POSITION THAT WOULD BE ULTIMATELY SUSTAINED. THE BENEFIT OF A TAX POSITION IS RECOGNIZED IN THE FINANCIAL STATEMENTS IN THE PERIOD DURING WHICH, BASED ON ALL AVAILABLE EVIDENCE, MANAGEMENT BELIEVES IT IS MORE LIKELY THAN NOT THAT THE POSITION WILL BE SUSTAINED UPON EXAMINATION, INCLUDING THE RESOLUTION OF APPEALS OR LITIGATION PROCESSES, IF ANY. TAX POSITIONS TAKEN ARE NOT OFFSET OR AGGREGATED WITH OTHER POSITIONS. TAX POSITIONS THAT MEET THE MORE-LIKELY-THAN-NOT RECOGNITION THRESHOLD ARE MEASURED AS THE LARGEST AMOUNT OF TAX BENEFIT THAT IS MORE THAN 50% LIKELY OF BEING REALIZED UPON SETTLEMENT WITH THE APPLICABLE TAXING AUTHORITY. THE PORTION OF THE BENEFITS ASSOCIATED WITH TAX POSITIONS TAKEN THAT EXCEEDS THE AMOUNT MEASURED AS DESCRIBED ABOVE IS REFLECTED AS A LIABILITY FOR UNRECOGNIZED TAX BENEFITS IN THE ACCOMPANYING STATEMENT OF NET ASSETS, ALONG WITH ANY ASSOCIATED INTEREST AND PENALTIES THAT WOULD BE PAYABLE TO THE TAXING AUTHORITIES UPON EXAMINATION. THE ORGANIZATION FILES INFORMATIONAL RETURNS (IRS FORM 990) IN THE U.S. FEDERAL JURISDICTION. THE ORGANIZATION'S RETURNS ARE NOT SUBJECT TO EXAMINATION THROUGH THE YEAR ENDED DECEMBER 31, 2011.
PART XI, LINE 2D - OTHER ADJUSTMENTS	SPECIAL EVENTS EXPENSE 344,544 GAMING EXPENSE (ADDITIONAL EXPENSE NOT ALREADY NETTED TO INCOME) 800 ROUNDING -1
PART XII, LINE 2D - OTHER ADJUSTMENTS	SPECIAL EVENTS EXPENSE 344,544 GAMING EXPENSE (ADDITIONAL EXPENSE NOT ALREADY NETTED TO INCOME) 800 ROUNDING -1

[illegible]

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.

▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Open to Public
Inspection

Name of the organization
VALLEY YOUTH HOUSE COMMITTEE INC

Employer identification number

23-7178820

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?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
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	(b) Event #2	(c) Other events	(d) Total events	
			<u>JAMMIN FOR YOUTH/ BACKPACK CHALLENGE</u> (event type)	<u>GALA</u> (event type)	<u>2</u> (total number)	(add col (a) through col (c))	
Revenue	1	Gross receipts	128,906	76,429	102,456	307,791	
	2	Less Contributions . . .	114,728	59,660	58,925	233,313	
	3	Gross income (line 1 minus line 2)	14,178	16,769	43,531	74,478	
Direct Expenses	4	Cash prizes					
	5	Noncash prizes	106,361	14,894	619	121,874	
	6	Rent/facility costs . . .	479	3,150	13,865	17,494	
	7	Food and beverages . .	170	12,113	11,711	23,994	
	8	Entertainment		800	110	910	
	9	Other direct expenses .	6,090	1,707	17,169	24,966	
	10	Direct expense summary Add lines 4 through 9 in column (d) ►					(189,238)
	11	Net income summary Subtract line 10 from line 3, column (d) ►					-114,760

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.

Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
	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 conducts gaming activities _____

a Is the organization licensed to conduct 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 conduct 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 activities conducted 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

\$ and the \$

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 provide any additional information (see instructions).

Return Reference	Explanation
------------------	-------------

Schedule G (Form 990 or 990-EZ) 2014

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
VALLEY YOUTH HOUSE COMMITTEE INC

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

2014

Open to Public
Inspection

Employer identification number
23-7178820

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 Domestic Organizations and Domestic Governments. 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 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 Domestic Individuals. 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) FOOD, CLOTHING, AND HOUSING TO HOMELESS YOUTH	829	3,167,806	0	FMV	VALLEY YOUTH HOUSE PAYS FOR CLIENTS' RENT, FOOD, CLOTHING, AND PERSONAL NEEDS

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
PART I, LINE 2	VALLEY YOUTH HOUSE FOLLOWS ALL FEDERAL, STATE, AND COUNTY REGULATIONS AND PROCEDURES FOR MONITORING AS PRESCRIBED BY HUD (HOUSING AND URBAN DEVELOPMENT), HHS (HEALTH & HUMAN SERVICES), PCCD (PENNSYLVANIA COMMISSION ON CRIME AND DELINQUENCY), HSDF (HUMAN SERVICES DEVELOPMENT FUND), AND NSLP (NATIONAL SCHOOL LUNCH PROGRAM), ETC VALLEY YOUTH HOUSE IS SUBJECT TO AN A-133 AUDIT EACH YEAR

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.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
VALLEY YOUTH HOUSE COMMITTEE INC

Employer identification number
23-7178820

Part I	Questions Regarding Compensation		Yes	No
1a	Check the appropriate 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	Yes	
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), 501(c)(4), and 501(c)(29) organizations 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 accrued 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 in column(B) reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 ANNETTE DURANSO, PRESIDENT & CEO	(i)	148,229	0	0	12,033	21	160,283	0
	(ii)	0	0	0	0	0	0	0
2 PATRICIA MCGARRY, SENIOR VICE PRESIDENT	(i)	93,773	0	150,196	5,822	21	249,812	0
	(ii)	0	0	0	0	0	0	0
3 ANNE ADAMS, SENIOR VICE PRESIDENT	(i)	88,514	0	135,640	0	5,555	229,709	0
	(ii)	0	0	0	0	0	0	0
4 SANDRA MOLNAR, PROGRAMS DIRECTOR	(i)	78,672	0	102,617	4,666	1,920	187,875	0
	(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
PART I, LINE 4B	ANNETTE DURANSO, PRESIDENT/CEO, \$7,030

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

2014

Open to Public Inspection

Name of the organization
VALLEY YOUTH HOUSE COMMITTEE INC

Employer identification number
23-7178820

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	X	10	8,701	
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods	X		399,620	DONOR DESIGNATED
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded				
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (ADMISSION TICKETS)	X	24	8,293	DONOR DESIGNATED
26 Other ▶ (ELECTRONIC EQUIPMENT)	X	7	5,101	DONOR DESIGNATED
27 Other ▶ (FOOD & MEALS)	X	23	4,898	DONOR DESIGNATED
28 Other ▶ (EVENT SUPPLIES & DECORATIONS)	X	9	4,413	DONOR DESIGNATED
Other ▶ (SPORTING EVENTS)	X	12	4,327	DONOR DESIGNATED
Other ▶ (GIFT CERTIFICATES)	X	39	3,279	FAIR MARKET VALUE
Other ▶ (VACATION HOME RENTAL - 1 WEEK)	X	5	950	DONOR DESIGNATED

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

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

Yes

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

No

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 III

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
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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 990-EZ 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

2014

Open to Public
Inspection

Name of the organization VALLEY YOUTH HOUSE COMMITTEE INC	Employer identification number 23-7178820
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990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART V, LINE 1C	
FORM 990, PART VI, SECTION B, LINE 11	A COPY OF THE ORGANIZATION'S FORM 990 IS PROVIDED TO THE BOARD OF DIRECTORS FOR REVIEW BEFORE IT IS FILED
FORM 990, PART VI, SECTION B, LINE 12C	THE BOARD OF DIRECTORS MONITORS AND ENFORCES THE CONFLICT OF INTEREST POLICY ACTUAL CONFL ICTS ARE REVIEWED BY THE PRESIDENT AND THE PERSONNEL COMMITTEE OF THE BOARD OF DIRECTORS, WHICH IS COMPRISED OF CORPORATE EXECUTIVES AND BOARD MEMBERS
FORM 990, PART VI, SECTION B, LINE 15	THE ORGANIZATION'S CEO'S COMPENSATION IS APPROVED THROUGH A SEPARATE MOTION OF THE BOARD O F DIRECTOR'S, AS RECOMMENDED BY THE EXECUTIVE COMPENSATION COMMITTEE RESEARCH ON COMPARAB LE SALARIES WAS DONE IN 2011 A COMPANY , YAFFEE INC WAS ENGAGED TO DO THIS STUDY FOR 2011 AND DETERMINED EXECUTIVE SALARIES MET SAFE HARBOR PROVISIONS
FORM 990, PART VI, SECTION C, LINE 18	THE ORGANIZATION'S FORM 990 IS MADE AVAILABLE FOR PUBLIC INSPECTION THROUGH ITS WEBSITE AN D UPON REQUEST ITS FORM 1023 IS MADE AVAILABLE UPON REQUEST ONLY
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE NOT MADE AVAILA BLE TO THE PUBLIC THE FINANCIAL STATEMENTS ARE AVAILABLE ON THE ORGANIZATION'S WEBSITE
FORM 990, PART XI, LINE 2C	THE ORGANIZATION HAS A FINANCE, AUDIT AND PROPERTY COMMITTEE THIS COMMITTEE ASSUMES THE R ESPONSIBLTY FOR OVERSIGHT OF THE AUDIT OF THE ORGANIZATION'S FINANCIAL STATEMENTS AND THE SELECTION OF AN INDEPENDENT AUDITOR