



See a Social Security Number? Say Something!
Report Privacy Problems to <https://public.resource.org/privacy>
Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form 990



Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public
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 YOUNG MENS CHRISTIAN ASSOCIATION OF THE GREATER TWIN CITIES		D Employer identification number 45-2563299
	Doing business as		
	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telephone number (612) 465-0450
	City or town, state or province, country, and ZIP or foreign postal code MINNEAPOLIS, MN 55413		G Gross receipts \$ 221,139,393
	F Name and address of principal officer GLEN GUNDERSON 2125 EAST HENNEPIN AVENUE MINNEAPOLIS, MN 55413		
I Tax-exempt status ☒ 501(c)(3) ☐ 501(c) () ☐ (insert no) ☐ 4947(a)(1) or ☐ 527		H(a) Is this a group return for subordinates? ☐ Yes ☒ No H(b) Are all subordinates included? ☐ Yes ☐ No If "No," attach a list (see instructions) H(c) Group exemption number ☐	
J Website: WWW.YMCATWINCITIES.ORG			
K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ☐		L Year of formation 2011	M State of legal domicile MN

Part I

Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities TO PUT CHRISTIAN PRINCIPLES INTO PRACTICE THROUGH PROGRAMS THAT BUILD HEALTHY SPIRIT, MIND AND BODY		
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	51
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	51
	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)	5	7,403
	6	Total number of volunteers (estimate if necessary)	6	7,857
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	-19,119
	b	Net unrelated business taxable income from Form 990-T, line 34	7b	-19,619
	Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year
9		Program service revenue (Part VIII, line 2g)	14,720,898	21,328,944
10		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	112,221,536	118,984,811
11		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,764,104	4,457,727
12		Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,524,565	2,050,226
			132,231,103	146,821,708
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	8,373,381	8,054,604
	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)	71,463,675	74,305,423
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	61,165	47,349
	b	Total fundraising expenses (Part IX, column (D), line 25) ☐ 5,022,908		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	45,979,928	48,186,548
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	125,878,149	130,593,924
	19	Revenue less expenses Subtract line 18 from line 12	6,352,954	16,227,784
Net Assets or Fund Balances			Beginning of Current Year	End of Year
	20	Total assets (Part X, line 16)	264,845,220	286,294,354
	21	Total liabilities (Part X, line 26)	81,201,641	82,568,585
	22	Net assets or fund balances Subtract line 21 from line 20	183,643,579	203,725,769

Part II

Signature Block

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

Sign Here	***** Signature of officer	2015-09-15 Date			
	GREGORY WAIBEL CFO Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name JOHN TAUER	Preparer's signature JOHN TAUER	Date	Check ☐ if self-employed	PTIN P00294068
	Firm's name ☐ CLIFTONLARSONALLEN LLP			Firm's EIN ☐ 41-0746749	
	Firm's address ☐ 220 SOUTH SIXTH STREET SUITE 300 MINNEAPOLIS, MN 55402			Phone no (612) 376-4500	

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

Part III

Statement of Program Service Accomplishments

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

☐

1

Briefly describe the organization's mission

THE MISSION OF THE YMCA OF THE GREATER TWIN CITIES IS TO PUT CHRISTIAN PRINCIPLES INTO PRACTICE THROUGH PROGRAMS THAT BUILD HEALTHY SPIRIT, MIND AND BODY FOR ALL WE ARE A CAUSE-DRIVEN ORGANIZATION THAT STRENGTHENS COMMUNITIES THROUGH YOUTH DEVELOPMENT, HEALTHY LIVING AND SOCIAL RESPONSIBILITY FOUR CORE VALUES OF CARING, HONESTY, RESPECT AND RESPONSIBILITY ARE TAUGHT AND MODELED IN ALL OF OUR PROGRAMS AND ACTIVITIES A UNITED WAY - AFFILIATED AGENCY, THE YMCA IS DRIVEN BY COMMUNITY SOCIAL NEEDS AND GUIDED BY COMMUNITY VOLUNTEERS THE Y IS OPEN TO ALL - NO ONE IS DENIED PARTICIPATION IN YMCA MEMBERSHIP, PROGRAMS OR SERVICES BASED SOLELY ON INABILITY TO PAY THE FEES, SUBJECT TO AVAILABLE RESOURCES

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 \$ 51,504,060 including grants of \$ 3,423,002) (Revenue \$ 48,652,984)

YOUTH DEVELOPMENT NURTURING THE POTENTIAL OF EVERY CHILD AND TEEN THE YMCA BELIEVES IN YOUTH DEVELOPMENT NURTURING THE POTENTIAL OF EVERY CHILD AND TEEN AT THE Y, CHILDREN AND TEENS LEARN VALUES AND POSITIVE BEHAVIORS, AND CAN EXPLORE THEIR UNIQUE TALENTS AND INTERESTS, HELPING THEM REALIZE THEIR POTENTIAL THAT MAKES FOR CONFIDENT KIDS TODAY AND CONTRIBUTING AND ENGAGED ADULTS TOMORROW THE Y BELIEVES THE VALUES AND SKILLS LEARNED EARLY ON ARE VITAL BUILDING BLOCKS FOR LIFE BECAUSE OF THE Y, MORE YOUNG PEOPLE IN NEIGHBORHOODS AROUND THE NATION ARE TAKING A GREATER INTEREST IN LEARNING AND MAKING SMARTER LIFE CHOICES KEY PROGRAM AREAS IN WHICH THAT TAKES PLACE AT THE Y ARE CHILD CARE (SAFE, NURTURING ENVIRONMENT FOR CHILDREN TO LEARN, GROW AND DEVELOP SOCIAL SKILLS), EDUCATION & LEADERSHIP (KNOWLEDGE, CHARACTER DEVELOPMENT, GUIDANCE AND ENCOURAGEMENT TO HELP YOUTH DEVELOP AND REALIZE THEIR POTENTIAL), SWIM, SPORTS & PLAY - (POSITIVE, FUN ACTIVITIES THAT BUILD ATHLETIC, SOCIAL AND INTERPERSONAL SKILLS), CAMP - (EXCITING, SAFE COMMUNITY FOR YOUNG PEOPLE TO EXPLORE THE OUTDOORS, BUILD SELF-ESTEEM, DEVELOP INTERPERSONAL SKILLS AND MAKE LASTING FRIENDSHIPS AND MEMORIES) YOUTH DEVELOPMENT IN THE Y INCLUDES LEADERSHIP DEVELOPMENT PROGRAMS (SUCH AS Y SCHOOL SUCCESS CENTERS, Y BEACONS CENTERS, AND Y LEADERS CLUB), YOUTH CIVIC ENGAGEMENT (SUCH AS Y YOUTH IN GOVERNMENT AND MODEL UNITED NATIONS), POST-SECONDARY EDUCATIONAL PREP (SUCH AS Y MULTICULTURAL ACHIEVERS), COMPETITIVE SWIMMING AND SPORTS, RECREATION ACTIVITIES, YOUTH SWIM LESSONS, DAY AND OVERNIGHT CAMPS AND SPECIALTY CAMP PROGRAMS IN 2014, MORE THAN 14,921 KIDS WENT TO DAY CAMP WHERE THEY LEARN, PLAY, MAKE FRIENDS AND CONNECT WITH CARING COUNSELORS MOREOVER, 9,335 KIDS PARTICIPATED IN SPORTS PROGRAMS AND MORE THAN 9,774 ADULTS, TEENS AND YOUTH TOOK PART IN Y OVERNIGHT CAMPING SPECIFIC Y PROGRAMS IN YOUTH DEVELOPMENT ALSO INCLUDE EARLY CHILDHOOD CHILD CARE, SCHOOL-AGE CHILD CARE AND KIDS STUFF (IN BRANCHES) MOST CHILDCARE SITES ARE IN YMCA BRANCHES, SCHOOLS, CHURCHES AND OTHER NON-YMCA LOCATIONS IN 2014, MORE THAN 21,368 KIDS IN Y CHILD CARE LEARNED THE CORE VALUES OF CARING, HONESTY, RESPECT AND RESPONSIBILITY

4b

(Code) (Expenses \$ 47,643,649 including grants of \$ 4,470,273) (Revenue \$ 68,050,731)

HEALTHY LIVING IMPROVING THE NATION'S HEALTH AND WELL-BEING BEING HEALTHY MEANS MORE THAN SIMPLY BEING PHYSICALLY ACTIVE IT'S ABOUT MAINTAINING A BALANCED SPIRIT, MIND AND BODY THE Y IS A PLACE WHERE YOU CAN WORK TOWARD THAT BALANCE BY CHALLENGING YOURSELF TO LEARN A NEW SKILL OR HOBBY, FOSTERING CONNECTIONS WITH FRIENDS THROUGH OUR LIFELONG LEARNING PROGRAMS, OR BRINGING YOUR LOVED ONES CLOSER TOGETHER THROUGH OUR MANY FAMILY-CENTERED ACTIVITIES AT THE Y, IT'S NOT ABOUT THE ACTIVITY YOU CHOOSE AS MUCH AS IT IS ABOUT THE BENEFITS OF LIVING HEALTHIER ON THE INSIDE AS WELL AS THE OUTSIDE THE Y'S COMMITMENT TO HEALTHY LIVING IS ACCOMPLISHED THROUGH A VARIETY OF FOCUS AREAS HEALTH, WELL-BEING AND FITNESS PROVIDES RESOURCES AND GUIDANCE TO MAINTAIN OR IMPROVE PHYSICAL ACTIVITY, HEALTH AND WELLNESS FAMILY TIME BRINGS FAMILIES TOGETHER TO HAVE FUN AND GROW TOGETHER SPORTS & RECREATION PROVIDES HEALTHY LIFESTYLE ACTIVITIES THAT BRING TOGETHER PEOPLE WITH SHARED ATHLETIC AND RECREATIONAL INTERESTS GROUP INTEREST OFFERS SOCIAL NETWORKS AND ACTIVITIES THAT BRING TOGETHER PEOPLE THAT SHARE COMMON PASSIONS AND PERSONAL INTERESTS SPECIFIC CORE PROGRAMS THAT PROMOTE HEALTHY LIVING AT THE Y INCLUDE GROUP FITNESS CLASSES, WATER ACTIVITIES (SWIM LESSONS, WATER SAFETY LESSONS, SWIM TEAMS, ETC), YOUTH FITNESS, FAMILY ACTIVITIES, OPEN GYM & SWIM TIMES, AND ACTIVE OLDER ADULT PROGRAMS AND ACTIVITIES THE Y IS ALSO ENGAGED IN PREVENTATIVE HEALTH MEASURES INCLUDING PROGRAMS THAT ADDRESS YOUTH OBESITY AND THAT ARE HELPING PEOPLE OF ALL AGES FACE THE GROWING PROBLEM OF DIABETES (Y DIABETES PREVENTION PROGRAM, OR YDPP)

4c

(Code) (Expenses \$ 2,308,610 including grants of \$ 161,329) (Revenue \$ 2,281,096)

SOCIAL RESPONSIBILITY GIVING BACK AND PROVIDING SUPPORT TO OUR NEIGHBORS THE YMCA BELIEVES IN SOCIAL RESPONSIBILITY, GIVING BACK AND PROVIDING SUPPORT TO OUR NEIGHBORS THE GENEROSITY OF OTHERS IS AT THE CORE OF THE Y'S EXISTENCE AS A NONPROFIT IT IS ONLY THROUGH THE SUPPORT OF OUR HUNDREDS OF THOUSANDS OF VOLUNTEERS AND PUBLIC AND PRIVATE DONORS THAT WE ARE ABLE TO SUPPORT AND GIVE BACK TO THE COMMUNITIES WE ENGAGE CORE PROGRAM AREAS IN THIS FOCUS ARE SOCIAL SERVICES (OFFERING TRAINING, RESOURCES AND SUPPORT TO EMPOWER OUR NEIGHBORS TO MAKE CHANGE, BRIDGE GAPS AND OVERCOME OBSTACLES), GLOBAL SERVICES (SUPPORT SYSTEMS THAT WELCOME, CELEBRATE, EDUCATE AND CONNECT DIVERSE DEMOGRAPHIC POPULATIONS IN THE U S AND AROUND THE WORLD), VOLUNTEERISM & GIVING (VOLUNTARY CONTRIBUTIONS THAT FUND, LEAD AND SUPPORT THE Y'S CRITICAL WORK), AND ADVOCACY (BUILDING COLLABORATIONS WITH POLICY MAKERS, COMMUNITY LEADERS AND PRIVATE AND PUBLIC ORGANIZATIONS TO DEVELOP YOUTH, PREVENT CHRONIC DISEASE, AND BUILD HEALTHIER COMMUNITIES AND ENCOURAGE SOCIAL RESPONSIBILITY) SPECIFIC PROGRAMS THAT BUILD SOCIAL RESPONSIBILITY ARE COMMUNITY HEALTH, COMMUNITY OUTREACH, EDUCATION AND WORK FORCE DEVELOPMENT, ENVIRONMENTAL EDUCATION, YOUTH INTERVENTION SERVICES, GLOBAL EDUCATION, NEWCOMER/IMMIGRATION SERVICES, FINANCIAL SUPPORT, PROGRAM AND POLICY VOLUNTEERS, ADVOCACY AND PUBLIC POLICY

4d

Other program services (Describe in Schedule O)

(Expenses \$ including grants of \$) (Revenue \$)

4e

Total program service expenses

101,456,319

Form 990 (2014)

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 Yes	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? 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 Yes	
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 	11e Yes	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 	11f Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 	12a	No
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 	12b Yes	
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 Yes	
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 Yes	
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 Yes	
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	Yes	
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	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3), 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	Yes	
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	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 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.	174	
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	0	
c. Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		1c	
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.	7,403	
b. If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).		2b	Yes
3a. Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a	Yes
b. If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O.</i>		3b	Yes
4a. At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a	No
b. If "Yes," enter the name of the foreign country: See instructions for filing requirements for 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?		5a	No
b. Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b	No
c. If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c	
6a. Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		6a	No
b. If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b	
7. Organizations that may receive deductible contributions under section 170(c).			
a. Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		7a	Yes
b. If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	Yes
c. Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c	No
d. If "Yes," indicate the number of Forms 8282 filed during the year.		7d	
e. Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e	No
f. Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f	No
g. If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7g	
h. If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h	Yes
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?		8	
9a. Did the sponsoring organization make any taxable distributions under section 4966?		9a	
b. Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b	
10. Section 501(c)(7) organizations. Enter			
a. Initiation fees and capital contributions included on Part VIII, line 12.		10a	
b. Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		10b	
11. Section 501(c)(12) organizations. Enter			
a. Gross income from members or shareholders.		11a	
b. Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).		11b	
12a. Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12a	
b. If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		12b	
13. Section 501(c)(29) qualified nonprofit health insurance issuers.			
a. Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		13a	
b. Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.		13b	
c. Enter the amount of reserves on hand.		13c	
14a. Did the organization receive any payments for indoor tanning services during the tax year?		14a	No
b. If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O.</i>		14b	

Part VI

Governance, Management, and Disclosure

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

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O		
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	Yes
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	Yes
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	MN , WI	
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		
	GREGORY WAIBEL		

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

(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)	2,271,452	0	331,260

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 ▶27

		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
MARSHALL LINEMN COACHES PO BOX 131 FARMINGTON, MN 55024	TRANSPORTATION	1,316,377
CONTRACT MANAGEMENT SOLUTIONS 418 COUNTY ROAD D EAST ST PAUL, MN 55117	TEMP LABOR	638,581
PERSONIFY INC PO BOX 759470 BALTIMORE, MD 212759470	SOFTWARE CONSULTANTS	562,747
CLOCKWORK ACTIVE MEDIA SYSTEMS LLC 1501 EAST HENNEPIN AVENUE MINNEAPOLIS, MN 554142428	WEB DEVELOPMENT CONSULTANTS	449,463
PREMIER KITCHEN INC 4301 QUEBEC AVENUE NORTH 5 NEW HOPE, MN 55428	PROGRAM FOOD	428,913

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 ▶26

Part VIII

Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a	1,699,134	21,328,944			
	b	Membership dues	1b					
	c	Fundraising events	1c	536,103				
	d	Related organizations	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	19,093,707				
	g	Noncash contributions included in lines 1a-1f \$		7,715,058				
	h	Total. Add lines 1a-1f						
Program Service Revenue			Business Code					
	2a	HEALTHY LIVING	713940	68,050,731	68,050,731			
	b	YOUTH DEVELOPMENT	713940	48,652,984	48,652,984			
	c	SOCIAL RESPONSIBILITY	713940	2,281,096	2,281,096			
	d							
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f			118,984,811			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		1,780,461		-19,119	1,799,580	
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties						
	6a	Gross rents	(i) Real	(ii) Personal	321,317			321,317
			589,139					
			267,822					
			321,317					
	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	2,677,266			2,677,266
			71,557,578	4,040,045				
			68,624,873	4,295,484				
			2,932,705	-255,439				
	b	Less cost or other basis and sales expenses						
	c	Gain or (loss)						
	d	Net gain or (loss)						
	8a	Gross income from fundraising events (not including \$ 536,103 of contributions reported on line 1c) See Part IV, line 18			-238,217			-238,217
	a	220,703						
	b	Less direct expenses		458,920				
	c	Net income or (loss) from fundraising events						
	9a	Gross income from gaming activities See Part IV, line 19						
	a							
	b	Less direct expenses						
	c	Net income or (loss) from gaming activities						
	10a	Gross sales of inventory, less returns and allowances			449,119			449,119
	a			1,119,705				
	b	Less cost of goods sold		670,586				
	c	Net income or (loss) from sales of inventory						
	Miscellaneous Revenue			Business Code				
	11a	PARTNER BENEFIT REVENUE		900099	826,531			826,531
	b	MISCELLANEOUS REVENUE		900099	348,869			348,869
	c	TOWEL AND LOCKER SERVICE		900099	342,607			342,607
	d	All other revenue						
	e	Total. Add lines 11a-11d			1,518,007			
	12	Total revenue. See Instructions			146,821,708	118,984,811	-19,119	6,527,072

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	293,160	293,160		
2	Grants and other assistance to domestic individuals See Part IV, line 22	7,716,944	7,716,944		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	44,500	44,500		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,660,154	107,220	1,277,392	275,542
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	59,913,212	45,848,212	11,371,193	2,693,807
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	3,921,066	2,505,580	1,085,823	329,663
9	Other employee benefits	2,891,687	1,860,774	788,104	242,809
10	Payroll taxes	5,919,304	4,396,633	1,286,244	236,427
11	Fees for services (non-employees)				
a	Management				
b	Legal	119,375	45,905	68,840	4,630
c	Accounting	71,394		71,394	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17	47,349			47,349
f	Investment management fees	54,448		54,448	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	6,799,336	2,660,312	3,918,041	220,983
12	Advertising and promotion	2,665,525	1,142,760	885,572	637,193
13	Office expenses	1,459,871	575,642	836,890	47,339
14	Information technology	576,146	221,554	332,245	22,347
15	Royalties				
16	Occupancy	9,626,360	9,540,542	85,679	139
17	Travel	1,450,868	695,351	703,787	51,730
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	144,684	11,066	37,734	95,884
20	Interest	1,887,269	1,887,269		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	10,334,601	10,072,939	261,662	
23	Insurance	763,491	756,868	6,612	11
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a	PROGRAM SUPPLIES	7,970,112	7,433,332	482,037	54,743
b	EQUIPMENT	3,396,982	3,323,196	65,332	8,454
c	MEMBERSHIP DUES	440,724	300,762	107,858	32,104
d	MISCELLANEOUS	425,362	15,798	387,810	21,754
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	130,593,924	101,456,319	24,114,697	5,022,908
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		6,473,381	1	9,853,409
	2	Savings and temporary cash investments		10,168,943	2	25,388,121
	3	Pledges and grants receivable, net		17,543,687	3	21,190,343
	4	Accounts receivable, net		1,999,935	4	2,645,397
	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		60,600	8	129,629
	9	Prepaid expenses and deferred charges		1,677,222	9	1,584,410
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a279,996,429			
	b	Less accumulated depreciation	10b135,590,868	146,294,414	10c	144,405,561
	11	Investments—publicly traded securities		65,667,725	11	58,967,029
	12	Investments—other securities See Part IV, line 11			12	7,536,380
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		14,959,313	15	14,594,075
	16	Total assets. Add lines 1 through 15 (must equal line 34)		264,845,220	16	286,294,354
Liabilities	17	Accounts payable and accrued expenses		8,402,377	17	8,235,543
	18	Grants payable			18	
	19	Deferred revenue		4,663,604	19	10,462,741
	20	Tax-exempt bond liabilities		29,580,589	20	27,067,184
	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		20,312,168	23	19,648,249
	24	Unsecured notes and loans payable to unrelated third parties		12,702,698	24	12,702,698
	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		5,540,205	25	4,452,170
	26	Total liabilities. Add lines 17 through 25		81,201,641	26	82,568,585
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		126,669,274	27	139,261,108
	28	Temporarily restricted net assets		30,272,707	28	37,305,143
	29	Permanently restricted net assets		26,701,598	29	27,159,518
	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		183,643,579	33	203,725,769
	34	Total liabilities and net assets/fund balances		264,845,220	34	286,294,354

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	146,821,708
2	Total expenses (must equal Part IX, column (A), line 25)	2	130,593,924
3	Revenue less expenses Subtract line 2 from line 1	3	16,227,784
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	183,643,579
5	Net unrealized gains (losses) on investments	5	-839,108
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	4,693,514
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	203,725,769

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: 45-2563299

Name: YOUNG MENS CHRISTIAN ASSOCIATION OF THE GREATER TWIN CITIES

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) DAVID J GRAFF CHAIR	1 00 0 00	X		X				0	0	0
(1) LISA HUMPHREYS SECRETARY	1 00 0 00	X		X				0	0	0
(2) DAVID S WICHMANN TREASURER & VICE CHAIR	1 00 0 00	X		X				0	0	0
(3) ANDREA M WALSH BOARD MEMBER	1 00 0 00	X						0	0	0
(4) ANTHONY BASSETT BOARD MEMBER	1 00 0 00	X						0	0	0
(5) ANTHONY E COFFEY BOARD MEMBER	1 00 0 00	X						0	0	0
(6) BONNIE BASKIN BOARD MEMBER	1 00 0 00	X						0	0	0
(7) BRUCE W MOOTY BOARD MEMBER	1 00 0 00	X						0	0	0
(8) CALVIN U ALLEN BOARD MEMBER	1 00 0 00	X						0	0	0
(9) CATHERINE A ZAPPA BOARD MEMBER	1 00 0 00	X						0	0	0
(10) CHUCK KELLY BOARD MEMBER	1 00 0 00	X						0	0	0
(11) COURTNEY J BAECHLER BOARD MEMBER	1 00 0 00	X						0	0	0
(12) DAVID ST PETER BOARD MEMBER	1 00 0 00	X						0	0	0
(13) DENIZ CULTU BOARD MEMBER	1 00 0 00	X						0	0	0
(14) EILEEN YOUTS BOARD MEMBER	1 00 0 00	X						0	0	0
(15) ELIZABETH NELSON BOARD MEMBER	1 00 0 00	X						0	0	0
(16) GREG SOMERVILLE BOARD MEMBER	1 00 0 00	X						0	0	0
(17) IP KIP KNELLMAN BOARD MEMBER	1 00 0 00	X						0	0	0
(18) JACQUELYN K DAYLOR BOARD MEMBER	1 00 0 00	X						0	0	0
(19) JAMES L ALTMAN BOARD MEMBER	1 00 0 00	X						0	0	0
(20) JAYME D JAY OLSON BOARD MEMBER	1 00 0 00	X						0	0	0
(21) JEFFREY LAFAVRE BOARD MEMBER	1 00 0 00	X						0	0	0
(22) JEFFREY P GREINER BOARD MEMBER	1 00 0 00	X						0	0	0
(23) JOHN BENDT BOARD MEMBER	1 00 0 00	X						0	0	0
(24) JOHN P GAINOR BOARD MEMBER	1 00 0 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) JON F RUPPEL BOARD MEMBER	1 00 0 00	X						0	0	0
(1) KATHRYN CORREIA BOARD MEMBER	1 00 0 00	X						0	0	0
(2) KATHRYN MITCHELL RAMSTAD BOARD MEMBER	1 00 0 00	X						0	0	0
(3) LANCE WHITACRE BOARD MEMBER	1 00 0 00	X						0	0	0
(4) MATTHEW W MAREK BOARD MEMBER	1 00 0 00	X						0	0	0
(5) MICHAEL JOHNSON BOARD MEMBER	1 00 0 00	X						0	0	0
(6) MICHAEL J KLINGENSMITH BOARD MEMBER	1 00 0 00	X						0	0	0
(7) MICHAEL J LOVETT BOARD MEMBER	1 00 0 00	X						0	0	0
(8) MICHAEL L LEJEUNE BOARD MEMBER	1 00 0 00	X						0	0	0
(9) MICHAEL REEVES BOARD MEMBER	1 00 0 00	X						0	0	0
(10) MIKE GUSTAFSON BOARD MEMBER	1 00 0 00	X						0	0	0
(11) PAUL H SEIFERTH BOARD MEMBER	1 00 0 00	X						0	0	0
(12) PAUL SNYDER BOARD MEMBER	1 00 0 00	X						0	0	0
(13) RAJNI SHAH BOARD MEMBER	1 00 0 00	X						0	0	0
(14) REID LINDQUIST BOARD MEMBER	1 00 0 00	X						0	0	0
(15) RICHARD K DAVIS BOARD MEMBER	1 00 0 00	X						0	0	0
(16) RICHARD M DORN BOARD MEMBER	1 00 0 00	X						0	0	0
(17) ROBERT EHREN BOARD MEMBER	1 00 0 00	X						0	0	0
(18) ROBERT J MARZEC BOARD MEMBER	1 00 0 00	X						0	0	0
(19) ROBERT L KEENE BOARD MEMBER	1 00 0 00	X						0	0	0
(20) RONALD J SCHUTZ BOARD MEMBER	1 00 0 00	X						0	0	0
(21) RONALD J TOUCHETTE BOARD MEMBER	1 00 0 00	X						0	0	0
(22) SCOTT S HULTS BOARD MEMBER	1 00 0 00	X						0	0	0
(23) SCOTT PETERSON BOARD MEMBER	1 00 0 00	X						0	0	0
(24) STEVE W MEADS BOARD MEMBER	1 00 0 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			
(51) TOM FORSYTHE BOARD MEMBER	1 00 0 00	X						0	0	0
(1) TY W ERICKSON BOARD MEMBER	1 00 0 00	X						0	0	0
(2) VICTORIA A REINHARDT BOARD MEMBER	1 00 0 00	X						0	0	0
(3) WALTER T CHESLEY BOARD MEMBER	1 00 0 00	X						0	0	0
(4) WENDY S LOVELL-SMITH BOARD MEMBER	1 00 0 00	X						0	0	0
(5) WILLIAM F SHARPE III BOARD MEMBER	1 00 0 00	X						0	0	0
(6) GLEN GUNDERSON PRESIDENT AND CEO	40 00 0 00			X				516,273	0	51,357
(7) GREGORY WAIBEL CFO	40 00 0 00			X				243,865	0	49,373
(8) TODD TIBBITS COO	40 00 0 00			X				273,161	0	46,396
(9) SHARON BERGLUND CHRO	40 00 0 00			X				196,185	0	43,956
(10) ROBERT THOMAS CXO	40 00 0 00			X				215,605	0	23,982
(11) ANITA LANCELLO BYDLON VP	40 00 0 00					X		172,036	0	23,043
(12) NATHAN MAEHREN VP	40 00 0 00					X		186,579	0	8,432
(13) STEPAHNIE CHAUSS VP	40 00 0 00					X		143,657	0	27,292
(14) PATRICIA RIEMERSMA VP	40 00 0 00					X		144,639	0	25,130
(15) ELIZABETH FENTON VP	40 00 0 00					X		179,452	0	32,299

SCHEDULE A
(Form 990 or 990EZ)

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

Department of the Treasury
Internal Revenue Service

Name of the organization YOUNG MENS CHRISTIAN ASSOCIATION OF THE GREATER TWIN CITIES	Employer identification number 45-2563299
---	--

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.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11 Total support Add lines 7 through 10						
12 Gross receipts from related activities, etc (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 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))		14				
15 Public support percentage for 2013 Schedule A, Part II, line 14		15				
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 IIIPart III

Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 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.")			174,129,396	14,720,898	21,328,944	210,179,238
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			104,951,760	113,183,005	120,325,219	338,459,984
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			279,081,156	127,903,903	141,654,163	548,639,222
7a Amounts included on lines 1, 2, and 3 received from disqualified persons			286,206	485,172	298,813	1,070,191
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0
c Add lines 7a and 7b			286,206	485,172	298,813	1,070,191
8 Public support (Subtract line 7c from line 6)						547,569,031

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			279,081,156	127,903,903	141,654,163	548,639,222
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources			2,040,308	1,981,898	2,388,719	6,410,925
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975			61,124	3,901		65,025
c Add lines 10a and 10b			2,101,432	1,985,799	2,388,719	6,475,950
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)			2,783,417	1,490,564	1,518,007	5,791,988
13 Total support. (Add lines 9, 10c, 11, and 12)			283,966,005	131,380,266	145,560,889	560,907,160
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 A, PART III, LINE 12, EXPLANATION OF OTHER INCOME	MISCELLANEOUS REVENUE - 2012 AMOUNT \$ 2,783,417 2013 AMOUNT \$ 1,490,564 2014 AMOUNT \$ 1,518,007

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Political Campaign and Lobbying Activities

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

▶ **Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.**

▶ **Information about Schedule C (Form 990 or 990-EZ) and its instructions is at**

www.irs.gov/form990.

OMB No 1545-0047

2014

Open to Public Inspection

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

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

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

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

If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

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

Name of the organization YOUNG MENS CHRISTIAN ASSOCIATION OF THE GREATER TWIN CITIES	Employer identification number 45-2563299
--	--

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1	Provide a description of the organization's direct and indirect political campaign activities in Part IV	
2	Political expenditures	▶ \$ 0
3	Volunteer hours	0

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

1	Enter the amount of any excise tax incurred by the organization under section 4955	▶ \$ 0
2	Enter the amount of any excise tax incurred by organization managers under section 4955	▶ \$ 0
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	☐ Yes ☐ No
4a	Was a correction made?	☐ Yes ☐ No
b	If "Yes," describe in Part IV	

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

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

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

Part II-A

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

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

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

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B

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

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.		(a)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?	Yes		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		
c	Media advertisements?		No	
d	Mailings to members, legislators, or the public?		No	
e	Publications, or published or broadcast statements?		No	
f	Grants to other organizations for lobbying purposes?		No	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		64,311
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
i	Other activities?		No	
j	Total. Add lines 1c through 1i.			64,311
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b	If "Yes," enter the amount of any tax incurred under section 4912.			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912.			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A

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

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

Part III-B

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

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

Part IV

Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference	Explanation
PART II-B, LINE 1	THE LOBBYING ACTIVITIES OF THE YMCA OF THE GREATER TWIN CITIES INCLUDE THE FOLLOWING DIRECTLY COMMUNICATING YMCA POSITIONS TO LEGISLATORS, MAKING PRESENTATIONS TO COMMUNICATE YMCA POSITIONS, MONITORING LEGISLATIVE ACTIVITIES IMPACTING THE YMCA, AND INTRODUCING AND LOBBYING FOR YMCA LEGISLATIVE INITIATIVES

[illegible]

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 YOUNG MENS CHRISTIAN ASSOCIATION OF THE GREATER TWIN CITIES	Employer identification number 45-2563299
--	--

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

► \$ _____

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Cat No 52283D

Schedule D (Form 990) 2014

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 | |

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance
- 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	45,610,154	41,556,913			
b Contributions	1,689,270	210,996	38,418,959		
c Net investment earnings, gains, and losses	2,370,378	5,411,624	4,835,755		
d Grants or scholarships					
e Other expenditures for facilities and programs	1,655,198	1,537,636	1,529,767		
f Administrative expenses	26,246	31,743	168,034		
g End of year balance	47,988,358	45,610,154	41,556,913		

- 2

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

Board designated or quasi-endowment

28 040 %
- b

Permanent endowment

54 060 %
- c

Temporarily restricted endowment

17 900 %
- 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)

No

(ii)

related organizations

3a(ii)

No
- b

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

3b
- 4

Describe in Part 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		13,861,631		13,861,631
b Buildings		232,678,156	107,961,597	124,716,559
c Leasehold improvements		469,581	379,274	90,307
d Equipment		32,245,715	27,249,997	4,995,718
e Other		741,346		741,346
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				144,405,561

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	138,461,642
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	-839,108
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	1,397,328
e	Add lines 2a through 2d	2e	558,220
3	Subtract line 2e from line 1	3	137,903,422
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	54,448
b	Other (Describe in Part XIII)	4b	8,863,838
c	Add lines 4a and 4b	4c	8,918,286
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	146,821,708

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	124,743,146
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	1,397,328
e	Add lines 2a through 2d	2e	1,397,328
3	Subtract line 2e from line 1	3	123,345,818
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	54,448
b	Other (Describe in Part XIII)	4b	7,193,658
c	Add lines 4a and 4b	4c	7,248,106
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	130,593,924

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	TO PROVIDE GENERAL DISCRETIONARY SUPPORT TO THE ANNUAL BUDGET, WITH SPECIAL EMPHASIS ON PROVIDING FINANCIAL ASSISTANCE TO CHILDREN, INDIVIDUALS, FAMILIES AND OTHER PARTICIPANTS WHO WOULD NOT BE ABLE TO PARTICIPATE IN YMCA PROGRAMS DUE TO FINANCIAL REASONS. THE ENDOWMENT FUND ALSO HELPS TO SUPPORT STAFF TRAINING, MAINTAINING HIGH QUALITY EQUIPMENT, PRESERVATION OF BUILDINGS AND GROUNDS AND ENSURING THAT YMCA PROGRAMS ARE AFFORDABLE.
PART X, LINE 2	YOUNG MEN'S CHRISTIAN ASSOCIATION OF THE GREATER TWIN CITIES IS A TAX-EXEMPT ORGANIZATION UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND SIMILAR MINNESOTA STATUTES. THE ENTITY IS NOT CONSIDERED A PRIVATE FOUNDATION AND CONTRIBUTIONS ARE CONSIDERED TAX DEDUCTIBLE. TWIN CITIES YMCA PARTNERS, LLC AND URBAN YMCA, LLC ARE WHOLLY OWNED LIMITED LIABILITY CORPORATIONS OF THE YMCA AND ALL ACTIVITIES ARE INCLUDED IN THE FILINGS OF THE YMCA. THE YMCA FOLLOWS A POLICY THAT CLARIFIED THE ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES RECOGNIZED IN AN ORGANIZATION'S CONSOLIDATED FINANCIAL STATEMENTS. THE POLICY PRESCRIBES A RECOGNITION THRESHOLD AND MEASUREMENT PRINCIPLES FOR THE FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT OF TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN ON A TAX RETURN THAT ARE NOT CERTAIN TO BE REALIZED. THE APPLICATION OF THIS POLICY HAS NO IMPACT ON THE YMCA'S CONSOLIDATED FINANCIAL STATEMENTS. THE YMCA FILES AS A TAX-EXEMPT ORGANIZATION. THE YMCA'S 2011, 2012, AND 2013 TAX YEARS ARE OPEN FOR EXAMINATION BY THE INTERNAL REVENUE SERVICE.
PART XI, LINE 2D - OTHER ADJUSTMENTS	SPECIAL FUNDRAISING EVENT EXPENSES 458,920. COST OF GOODS SOLD 670,586. RENTAL EXPENSES 267,822.
PART XI, LINE 4B - OTHER ADJUSTMENTS	SPECIFIC ASSISTANCE TO INDIVIDUALS 7,193,658. NON-OPERATING INVESTMENT INCOME 1,925,619. LOSS ON SALE OF ASSETS -255,439.
PART XII, LINE 2D - OTHER ADJUSTMENTS	SPECIAL FUNDRAISING EVENT EXPENSES 458,920. COST OF GOODS SOLD 670,586. RENTAL EXPENSES 267,822.
PART XII, LINE 4B - OTHER ADJUSTMENTS	SPECIFIC ASSISTANCE TO INDIVIDUALS 7,193,658.

[illegible]

SCHEDULE F
(Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990,
Part IV, line 14b, 15, or 16.
► Attach to Form 990.
► Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
YOUNG MENS CHRISTIAN ASSOCIATION OF THE
GREATER TWIN CITIES

Employer identification number
45-2563299

Part I

General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

- 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- 3 Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) SUB-SAHARAN AFRICA	0	0	GRANTS	N/A	44,500
(2) CENTRAL AMERICA AND THE CARIBBEAN	0	0	INVESTMENTS	N/A	6,704,056
(3)					
(4)					
(5)					
3a Sub-total	0	0			6,748,556
b Total from continuation sheets to Part I	0	0			0
c Totals (add lines 3a and 3b)	0	0			6,748,556

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SUB-SAHARAN AFRICA	CARRY ON CHARITABLE PROGRAMS IN GHANA, LIBERIA, ETHIOPA & SOUTH AFRICA YMCAS	44,500	CHECK	0	N/A	N/A
(2)									
(3)									
(4)									

2

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶

1

3

Enter total number of other organizations or entities ▶

0

Part III

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 1

Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)*

☐ Yes

☒ No
- 2

Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)*

☐ Yes

☒ No
- 3

Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)*

☒ Yes

☐ No
- 4

Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)*

☒ Yes

☐ No
- 5

Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)*

☐ Yes

☒ No
- 6

Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)*

☐ Yes

☒ No

Part V

Supplemental Information
Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART I, LINE 2	ORGANIZATIONAL REPORTS AND FINANCIAL STATEMENTS FROM INTERNATIONAL ORGANIZATIONS ARE SUBMITTED TO THE YMCA OF THE GREATER TWIN CITIES. THE YMCA ALSO MAKES REGULAR TRIPS TO VISIT THESE LOCATIONS WHERE THE MONEY HAS BEEN SPENT.

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART I, LINE 3	ACCRUAL METHOD

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
YOUNG MENS CHRISTIAN ASSOCIATION OF THE
GREATER TWIN CITIES

Employer identification number
45-2563299

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

e

☒

Solicitation of non-government grants

b

☒

Internet and email solicitations

f

☒

Solicitation of government grants

c

☒

Phone solicitations

g

☒

Special fundraising events

d

☒

In-person solicitations

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 CAPITAL CAMPAIGN INSTITUTE 3339 ATWATER STREET MINNETONKA, MN 55305	SOLICITATION CAMPAIGN		No	400,000	47,349	352,651
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total				400,000	47,349	352,651

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.

MN, WI

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.

Revenue			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events	
			UNIVERSITY GOLF TOURNAMENT	RIVER VALLEY - FORE! THE Y	34	(add col (a) through col (c))	
			(event type)	(event type)	(total number)		
	1	Gross receipts	98,637	75,985	519,136	693,758	
	2	Less Contributions . .	75,637	59,324	372,083	507,044	
3	Gross income (line 1 minus line 2)	23,000	16,661	147,053	186,714		
Direct Expenses	4	Cash prizes			10,750	10,750	
	5	Noncash prizes . .	39,873	23,357	163,111	226,341	
	6	Rent/facility costs . .		14,170	23,186	37,356	
	7	Food and beverages .	10,819	9,788	59,578	80,185	
	8	Entertainment	1,200	1,750	7,600	10,550	
	9	Other direct expenses .	8,586	2,229	52,801	63,616	
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶					(428,798)
	11	Net income summary Subtract line 10 from line 3, column (d) ▶					-242,084

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)

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

Department of the Treasury
Internal Revenue Service

Name of the organization
YOUNG MENS CHRISTIAN ASSOCIATION OF THE
GREATER TWIN CITIES

Employer identification number
45-2563299

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
(1) SIOUX YMCA PO BOX 218 DUPREE,SD 57623	46-0336514	501(C)(3)	20,000	0	N/A	N/A	GENERAL OPERATING SUPPORT
(2) YMCA OF THE USA 101 N WACKER DR CHICAGO,IL 60606	36-3258696	501(C)(3)	8,500	0	N/A	N/A	FINANCIAL SUPPORT TO THE YMCA WORLD SERVICE PROGRAM
(3) YMCA OF COLUMBIA WILLAMETTE 9500 SW BARBUR BLVD PORTLAND,OR 97219	93-0386981	501(C)(3)	10,000	0	N/A	N/A	US MISSION NETWORK
(4) KAUTZ FAMILY YMCA ARCHIVES 222 21ST AVE SO 318 MINNEAPOLIS,MN 55455	41-6007513	501(C)(3)	12,360	0	N/A	N/A	FINANCIAL SUPPORT FOR THE YMCA ARCHIVES
(5) YOUTHPRISE 615 1ST AVE NE 125 MINNEAPOLIS,MN 55413	27-4126970	501(C)(3)	200,000	0	N/A	N/A	SUPPORT YOUTHPRISE'S WORK ON SOCIAL RESPONSIBILITY BEYOND THE CLASSROOM
(6) ST PAUL NEIGHBORHOOD NETWORK 375 JACKSON ST 250 SAINT PAUL,MN 55101	41-1500773	501(C)(3)	6,000	0	N/A	N/A	COMMUNITY TECHNOLOGY EMPOWERMENT PROJECT AMERICORPS PROGRAM SUPPORT
(7) MN ALLIANCE WITH YOUTH 2233 UNIVERSITY AVE W 235 SAINT PAUL,MN 55114	45-3774063	501(C)(3)	13,800	0	N/A	N/A	PROMISE FELLOW MATCH
(8) OPEN PATH RESOURCES 883 RAYMOND AVE SAINT PAUL,MN 55114	46-2424429	501(C)(3)	22,500	0	N/A	N/A	COMMUNITY OUTREACH PARTNER

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 8

3 Enter total number of other organizations listed in the line 1 table 0

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) YOUTH DEVELOPMENT	7178	2,749,479	0	N/A	N/A
(2) HEALTHY LIVING	42654	4,444,179	0	N/A	N/A

Return Reference	Explanation
PART I, LINE 2	ORGANIZATIONAL REPORTS AND FINANCIAL STATEMENTS FROM THE ORGANIZATIONS ARE SUBMITTED TO THE YMCA OF THE GREATER TWIN CITIES THE YMCA ALSO MAKES REGULAR TRIPS TO VISIT THE LOCATIONS WHERE THE MONEY HAS BEEN SPENT

Additional Data

Software ID:
Software Version:
EIN: 45-2563299
Name: YOUNG MENS CHRISTIAN ASSOCIATION OF THE
GREATER TWIN CITIES

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SIOUX YMCAPO BOX 218 DUPREE,SD 57623	46-0336514	501(C)(3)	20,000	0	N/A	N/A	GENERAL OPERATING SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YMCA OF THE USA101 N WACKER DR CHICAGO,IL 60606	36-3258696	501(C)(3)	8,500	0	N/A	N/A	FINANCIAL SUPPORT TO THE YMCA WORLD SERVICE PROGRAM

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YMCA OF COLUMBIA WILLAMETTE9500 SW BARBUR BLVD PORTLAND,OR 97219	93-0386981	501(C)(3)	10,000	0	N/A	N/A	US MISSION NETWORK

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KAUTZ FAMILY YMCA ARCHIVES222 21ST AVE SO 318 MINNEAPOLIS,MN 55455	41-6007513	501(C)(3)	12,360	0	N/A	N/A	FINANCIAL SUPPORT FOR THE YMCA ARCHIVES

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YOUTHPRISE615 1ST AVE NE 125 MINNEAPOLIS,MN 55413	27-4126970	501(C)(3)	200,000	0	N/A	N/A	SUPPORT YOUTHPRISE'S WORK ON SOCIAL RESPONSIBILITY BEYOND THE CLASSROOM

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ST PAUL NEIGHBORHOOD NETWORK375 JACKSON ST 250 SAINT PAUL,MN 55101	41-1500773	501(C)(3)	6,000	0	N/A	N/A	COMMUNITY TECHNOLOGY EMPOWERMENT PROJECT AMERICORPS PROGRAM SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MN ALLIANCE WITH YOUTH2233 UNIVERSITY AVE W 235 SAINT PAUL,MN 55114	45-3774063	501(C)(3)	13,800	0	N/A	N/A	PROMISE FELLOW MATCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OPEN PATH RESOURCES 883 RAYMOND AVE SAINT PAUL, MN 55114	46-2424429	501(C)(3)	22,500	0	N/A	N/A	COMMUNITY OUTREACH PARTNER

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
YOUNG MENS CHRISTIAN ASSOCIATION OF THE GREATER TWIN CITIES

Employer identification number
45-2563299

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 ☐ Travel for companions ☐ Tax idemnification and gross-up payments ☐ Discretionary spending account ☐ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☐ Health or social club dues or initiation fees ☐ 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 ☒ Independent compensation consultant ☒ Form 990 of other organizations ☐ Written employment contract ☒ Compensation survey or study ☒ 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? b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 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.	4a 4b 4c	Yes No 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? b Any related organization? If "Yes," to line 5a or 5b, describe in Part III.	5a 5b	No 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? b Any related organization? If "Yes," to line 6a or 6b, describe in Part III.	6a 6b	No 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				
See Additional Data Table								

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 4A	ELIZABETH FENTON, SEVERANCE \$50,482

Additional Data

Software ID:

Software Version:

EIN: 45-2563299

Name: YOUNG MENS CHRISTIAN ASSOCIATION OF THE GREATER TWIN CITIES

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

(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 GLEN GUNDERSON, PRESIDENT AND CEO	(i) 382,608 (ii) 0	(i) 123,465 (ii) 0	(i) 10,200 (ii) 0	(i) 27,675 (ii) 0	(i) 23,682 (ii) 0	(i) 567,630 (ii) 0	(i) 0 (ii) 0
1 GREGORY WAIBEL, CFO	(i) 212,183 (ii) 0	(i) 31,082 (ii) 0	(i) 600 (ii) 0	(i) 30,510 (ii) 0	(i) 18,863 (ii) 0	(i) 293,238 (ii) 0	(i) 0 (ii) 0
2 TODD TIBBITS, COO	(i) 232,361 (ii) 0	(i) 32,400 (ii) 0	(i) 8,400 (ii) 0	(i) 31,200 (ii) 0	(i) 15,196 (ii) 0	(i) 319,557 (ii) 0	(i) 0 (ii) 0
3 SHARON BERGLUND, CHRO	(i) 169,651 (ii) 0	(i) 25,934 (ii) 0	(i) 600 (ii) 0	(i) 24,523 (ii) 0	(i) 19,433 (ii) 0	(i) 240,141 (ii) 0	(i) 0 (ii) 0
4 ROBERT THOMAS, CXO	(i) 191,755 (ii) 0	(i) 23,250 (ii) 0	(i) 600 (ii) 0	(i) 0 (ii) 0	(i) 23,982 (ii) 0	(i) 239,587 (ii) 0	(i) 0 (ii) 0
5 ANITA LANCELLO BYDLON, VP	(i) 156,918 (ii) 0	(i) 14,518 (ii) 0	(i) 600 (ii) 0	(i) 20,665 (ii) 0	(i) 2,378 (ii) 0	(i) 195,079 (ii) 0	(i) 0 (ii) 0
6 NATHAN MAEHREN, VP	(i) 169,287 (ii) 0	(i) 16,692 (ii) 0	(i) 600 (ii) 0	(i) 0 (ii) 0	(i) 8,432 (ii) 0	(i) 195,011 (ii) 0	(i) 0 (ii) 0
7 STEPAHNIE CHAUSS, VP	(i) 126,168 (ii) 0	(i) 16,889 (ii) 0	(i) 600 (ii) 0	(i) 18,059 (ii) 0	(i) 9,233 (ii) 0	(i) 170,949 (ii) 0	(i) 0 (ii) 0
8 PATRICIA RIEMERSMA, VP	(i) 129,183 (ii) 0	(i) 14,758 (ii) 0	(i) 698 (ii) 0	(i) 17,462 (ii) 0	(i) 7,668 (ii) 0	(i) 169,769 (ii) 0	(i) 0 (ii) 0
9 ELIZABETH FENTON, VP	(i) 102,254 (ii) 0	(i) 15,326 (ii) 0	(i) 61,872 (ii) 0	(i) 16,327 (ii) 0	(i) 15,972 (ii) 0	(i) 211,751 (ii) 0	(i) 0 (ii) 0

Schedule K
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.
▶ Attach to Form 990.
▶ Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Open to Public
Inspection

Name of the organization
YOUNG MENS CHRISTIAN ASSOCIATION OF THE
GREATER TWIN CITIES

Employer identification number
45-2563299

Part I Bond Issues												
(a) Issuer name		(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
							Yes	No	Yes	No	Yes	No
A	ECONOMIC DEVELOPMENT AUTHORITY OF WOODBURY MINNESOTA	20-4003857	308684490	12-29-2005	5,400,000	EXPAND WOODBURY AND SHOREVIEW YMCAS		X		X		X
B	HOUSING AND REDEVELOPMENT AUTHORITY OF ST PAUL MINNESOTA	41-6005521		06-21-2006	450,000	RENOVATE DOWNTOWN ST PAUL YMCA		X		X		X
C	CITY OF LINO LAKES MINNESOTA	41-0883446	536060KK1	06-28-2006	4,000,000	CONSTRUCT NEW LINO LAKES YMCA		X		X		X
D	HOUSING AND REDEVELOPMENT AUTHORITY IN AND FOR THE CITY OF HASTINGS MINNES	41-6005522		12-08-2006	2,700,000	CONSTRUCT NEW HASTINGS YMCA		X		X		X

Part II		Proceeds							
		A		B		C		D	
1	Amount of bonds retired	3,707,453		211,145		2,181,730		2,023,350	
2	Amount of bonds legally defeased								
3	Total proceeds of issue	5,400,000		450,000		4,000,000		2,700,000	
4	Gross proceeds in reserve funds								
5	Capitalized interest from proceeds	68,983				73,836		34,491	
6	Proceeds in refunding escrows								
7	Issuance costs from proceeds	50,845		9,000		50,000		45,662	
8	Credit enhancement from proceeds								
9	Working capital expenditures from proceeds								
10	Capital expenditures from proceeds	5,280,172		441,000		3,876,164		2,619,847	
11	Other spent proceeds								
12	Other unspent proceeds								
13	Year of substantial completion	2008		2006		2007		2007	
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?		X		X		X		X
15	Were the bonds issued as part of an advance refunding issue?		X		X		X		X
16	Has the final allocation of proceeds been made?	X		X		X		X	
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X		X		X	

Part III Private Business Use									
		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X		X		X		X
2	Are there any lease arrangements that may result in private business use of bond-financed property?		X		X		X		X

Part III

Private Business Use (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?		X		X		X		X
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c	Are there any research agreements that may result in private business use of bond-financed property?		X		X		X		X
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government	0 %		0 %		0 %		0 %	
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government	0 %		0 %		0 %		0 %	
6	Total of lines 4 and 5	0 %		0 %		0 %		0 %	
7	Does the bond issue meet the private security or payment test?		X		X		X		X
8a	Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X		X		X		X
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of								
c	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?		X		X		X		X

Part IV

Arbitrage

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X		X		X		X
2	If "No" to line 1, did the following apply?								
a	Rebate not due yet?		X		X		X		X
b	Exception to rebate?		X		X		X		X
c	No rebate due?	X		X		X		X	
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
3	Is the bond issue a variable rate issue?		X		X		X		X
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X		X		X		X
b	Name of provider								
c	Term of hedge								
d	Was the hedge superintegrated?								
e	Was the hedge terminated?								

Part IV

Arbitrage (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		X		X		X
b	Name of provider								
c	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?		X		X		X		X
7	Has the organization established written procedures to monitor the requirements of section 148?		X		X		X		X

Part V

Procedures To Undertake Corrective Action

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
	Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?	X		X		X		X	

Part VI

Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions).

Return Reference	Explanation
DATE REBATE COMPUTATION PERFORMED	ISSUER NAME ECONOMIC DEVELOPMENT AUTHORITY OF WOODBURY, MINNESOTA DATE THE REBATE COMPUTATION WAS PERFORMED 12/29/2010 ISSUER NAME HOUSING AND REDEVELOPMENT AUTHORITY OF ST PAUL, MINNESOTA DATE THE REBATE COMPUTATION WAS PERFORMED 06/21/2011 ISSUER NAME CITY OF LINO LAKES, MINNESOTA DATE THE REBATE COMPUTATION WAS PERFORMED 06/28/2011 ISSUER NAME HOUSING AND REDEVELOPMENT AUTHORITY IN AND FOR THE CITY OF HAS DATE THE REBATE COMPUTATION WAS PERFORMED 12/08/2011 ISSUER NAME MINNEAPOLIS COMMUNITY DEVELOPMENT AGENCY DATE THE REBATE COMPUTATION WAS PERFORMED 10/06/2010 ISSUER NAME MINNESOTA AGRICULTURAL & ECONOMIC DEVELOPMENT BOARD DATE THE REBATE COMPUTATION WAS PERFORMED 10/29/2013

Schedule K
(Form 990)

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.
▶ Attach to Form 990.
▶ Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
YOUNG MENS CHRISTIAN ASSOCIATION OF THE GREATER TWIN CITIES

Employer identification number
45-2563299

Part I Bond Issues												
(a) Issuer name		(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
							Yes	No	Yes	No	Yes	No
A CITY OF WHITE BEAR LAKE MINNESOTA		41-6005641	963454AA1	09-09-2013	3,067,220	EXPAND AND RENOVATE WHITE BEAR AREA YMCA		X		X		X
B MINNEAPOLIS COMMUNITY DEVELOPMENT AGENCY		41-6009115		10-06-2005	5,000,000	RENOVATE YMCA FACILITIES		X		X		X
C MINNESOTA AGRICULTURAL & ECONOMIC DEVELOPMENT BOARD		41-6007162		12-28-2010	18,000,000	EXPAND AND RENOVATE SOUTHDALE YMCA		X		X		X

Part II Proceeds												
					A		B		C		D	
1 Amount of bonds retired					540,264		4,416,094					
2 Amount of bonds legally defeased												
3 Total proceeds of issue					3,067,220		5,000,000		18,000,000			
4 Gross proceeds in reserve funds												
5 Capitalized interest from proceeds												
6 Proceeds in refunding escrows												
7 Issuance costs from proceeds					61,722		11,266					
8 Credit enhancement from proceeds												
9 Working capital expenditures from proceeds												
10 Capital expenditures from proceeds							4,988,734		18,000,000			
11 Other spent proceeds					3,005,498							
12 Other unspent proceeds												
13 Year of substantial completion					2010		2006		2011		Yes	
					Yes	No	Yes	No	Yes	No		
14 Were the bonds issued as part of a current refunding issue?					X			X	X			
15 Were the bonds issued as part of an advance refunding issue?						X		X		X		
16 Has the final allocation of proceeds been made?					X		X		X			
17 Does the organization maintain adequate books and records to support the final allocation of proceeds?					X		X		X			

Part III Private Business Use												
					A		B		C		D	
					Yes	No	Yes	No	Yes	No	Yes	No
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?												
2 Are there any lease arrangements that may result in private business use of bond-financed property?												

Part III

Private Business Use (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?		X		X		X		
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c	Are there any research agreements that may result in private business use of bond-financed property?		X		X		X		
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government	0 %		0 %		0 %			
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government	0 %		0 %		0 %			
6	Total of lines 4 and 5	0 %		0 %		0 %			
7	Does the bond issue meet the private security or payment test?		X		X		X		
8a	Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X		X		X		
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of								
c	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?		X		X		X		

Part IV

Arbitrage

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X		X		X		
2	If "No" to line 1, did the following apply?								
a	Rebate not due yet?	X			X		X		
b	Exception to rebate?		X		X		X		
c	No rebate due?		X	X		X			
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
3	Is the bond issue a variable rate issue?		X		X	X			
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X		X		X		
b	Name of provider								
c	Term of hedge								
d	Was the hedge superintegrated?								
e	Was the hedge terminated?								

Part IV

Arbitrage (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		X		X		
b	Name of provider								
c	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?		X		X		X		
7	Has the organization established written procedures to monitor the requirements of section 148?		X		X		X		

Part V

Procedures To Undertake Corrective Action

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
	Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?	X		X		X			

Part VI

Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions).

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
YOUNG MENS CHRISTIAN ASSOCIATION OF THE GREATER TWIN CITIES

Employer identification number
45-2563299

Part I

Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods	X		7,362	APPRAISED VALUE
6 Cars and other vehicles				
7 Boats and planes	X	1	2,500	APPRAISED VALUE
8 Intellectual property				
9 Securities—Publicly traded	X	55	479,990	STOCK MARKET QUOTES
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	X	1	260,000	APPRAISED VALUE
16 Real estate—Commercial	X	1	589,200	APPRAISED VALUE
17 Real estate—Other	X	1	132,000	APPRAISED VALUE
18 Collectibles				
19 Food inventory	X	17	19,303	COST
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (SOFTWARE AND LICENSES)	X	1	5,715,014	FAIR MARKET VALUE
26 Other ▶ (AUCTION ITEMS)	X	1,833	245,457	ESTIMATED VALUE
27 Other ▶ (EARTH MACHINE COMPOSTER AND OTHERS)	X	5	14,885	ESTIMATED VALUE
28 Other ▶ (SUPERBOWL, BASEBALL GAME TICKETS, SOCCER BALLS)	X	3	3,890	ESTIMATED VALUE

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

3

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

30a

No

b If "Yes," describe the arrangement in Part II

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

31

Yes

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

32a

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 II

Supplemental Information.

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

Return Reference	Explanation
PART I, COLUMN (B)	ON PART I COLUMN B, THE ORGANIZATION REPORTS THE NUMBER OF ITEMS CONTRIBUTED FOR DONATED AUCTION ITEMS FOR ALL OTHER NON-CASH CONTRIBUTIONS, THE ORGANIZATION REPORTS THE NUMBER OF CONTRIBUTORS

2014

Open to Public Inspection

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.

Name of the organization YOUNG MENS CHRISTIAN ASSOCIATION OF THE GREATER TWIN CITIES	Employer identification number 45-2563299
--	--

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 1	
FORM 990, PART VI, SECTION B, LINE 11	THE AUDIT COMMITTEE REVIEWED THE IRS FORM 990 BEFORE RECOMMENDING APPROVAL TO THE GENERAL BOARD THE GENERAL BOARD REVIEWED AND APPROVED SUBMISSION OF THE IRS FORM 990 BEFORE IT WA S FILED
FORM 990, PART VI, SECTION B, LINE 12C	UPON ASSUMING OFFICE OR EMPLOYMENT AND ANNUALLY THEREAFTER, THE YMCA SURVEYS ITS GENERAL B OARD MEMBERS, OFFICERS AND KEY EMPLOYEES TO DETERMINE IF THERE IS A CONFLICT OF INTEREST THE FINDINGS ARE SUMMARIZED AND A FORMAL REPORT IS REVIEWED BY THE AUDIT COMMITTEE THE RE PORT INDICATES WHETHER ANY CONFLICTS WERE REPORTED, OR IF CONFLICTS ARE REPORTED, WHETHER PARTICIPATION SHOULD BE DISALLOWED OR BE CAREFULLY MONITORED THROUGHOUT THE YEAR
FORM 990, PART VI, SECTION B, LINE 15	THE CEO'S SALARY IS REVIEWED ANNUALLY BY A CEO REVIEW COMMITTEE COMPRISED OF MEMBERS OF TH E BOARD OF DIRECTORS AND HEADED BY THE BOARD CHAIR AS A COMPONENT OF THIS REVIEW, THE HR COMMITTEE CONDUCTS A MARKET COMPARISON OF THE CEO'S COMPENSATION TO THOSE AT OTHER NATIONA L YMCA'S OF COMPARABLE SIZE AND TO NON-PROFITS OF A SIMILAR SIZE THIS PROCESS OCCURRED IN 2014 FOR THE CEO, GLEN GUNDERSON OTHER OFFICERS' AND KEY EMPLOYEES' SALARIES ARE REVIEWE D ANNUALLY BY THE HUMAN RESOURCES COMMITTEE COMPRISED OF MEMBERS OF THE BOARD OF DIRECTORS AND HEADED BY THE HR COMMITTEE CHAIR AS A COMPONENT OF THIS REVIEW, THE HUMAN RESOURCES COMMITTEE ANNUALLY USES SALARY SURVEYS AND A COMPENSATION CONSULTANT FOR MARKET COMPARISON S THIS PROCESS OCCURRED IN 2014 FOR ALL OFFICERS OF THE YMCA OF THE GREATER TWIN CITIES
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION DOES NOT MAKE AVAILABLE ITS GOVERNING DOCUMENTS OR CONFLICT OF INTEREST P OLICY TO THE GENERAL PUBLIC THE FINANCIAL STATEMENTS ARE AVAILABLE TO THE GENERAL PUBLIC UPON REQUEST AND ON THE ORGANIZATION'S WEBSITE
FORM 990, PART XI, LINE 9	CHANGE IN VALUE OF BENEFICIARY AGREEMENTS -132,654 CHANGE IN VALUE OF DEFERRED SWAP RATE LIABILITY -4,387 GAIN ON SALE OF NON-OPERATING LAND, BUILDING & EQUIPMENT 4,830,555

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990.
▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
YOUNG MENS CHRISTIAN ASSOCIATION OF THE
GREATER TWIN CITIES

Employer identification number

45-2563299

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.					
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) URBAN YMCA LLC 2125 E HENNEPIN AVE STE 150 MINNEAPOLIS, MN 55402 41-0695629	FACILITIES RENTAL	MN	0	582,785	YOUNG MEN'S CHRISTIAN ASSOCIATION OF THE GREATER TWIN CITIES

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.						
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?
						Yes No

Part III

Identification of Related Organizations Taxable as a Partnership

Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end- of-year assets	(h) Disproprrionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) TWIN CITIES PARTNERS LLC 2125 E HENNEPIN AVE STE 150 MINNEAPOLIS, MN 55413 26-2038976	INVESTMENT	MN	YOUNG MEN'S CHRISTIAN ASSOCIATION OF THE GREATER TWIN CITIES	INVESTMENT	85,130	8,978,216		No		Yes		99 900 %

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust

Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
(1) CHARITABLE REMAINDER TRUSTS (3)	INVESTMENTS	MN		T					No

Part V

Transactions With Related Organizations

Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

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

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity

b Gift, grant, or capital contribution to related organization(s)

c Gift, grant, or capital contribution from related organization(s)

d Loans or loan guarantees to or for related organization(s)

e Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

j Lease of facilities, equipment, or other assets to related organization(s)

k Lease of facilities, equipment, or other assets from related organization(s)

l Performance of services or membership or fundraising solicitations for related organization(s)

m Performance of services or membership or fundraising solicitations by related organization(s)

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

r Other transfer of cash or property to related organization(s)

s Other transfer of cash or property from related organization(s)

Yes

No

1a

No

1b

No

1c

No

1d

No

1e

No

1f

No

1g

No

1h

No

1i

No

1j

No

1k

No

1l

No

1m

No

1n

Yes

1o

Yes

1p

No

1q

No

1r

No

1s

No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) NA			

Schedule R (Form 990) 2014

Part VI **Unrelated Organizations Taxable as a Partnership** Complete if the organization answered "Yes" on Form 990, Part IV, line 37.
Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R (see instructions)

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