



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 <b>990</b><br><br>Department of the Treasury<br>Internal Revenue Service | <b>Return of Organization Exempt From Income Tax</b>  | OMB No 1545-0047                                    |
|   | <b>Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)</b><br><br>▶ Do not enter social security numbers on this form as it may be made public<br>▶ Information about Form 990 and its instructions is at <a href="http://www.irs.gov/form990">www.irs.gov/form990</a> | <b>2014</b><br><br><b>Open to Public Inspection</b> |

**A For the 2014 calendar year, or tax year beginning 07-01-2014 , and ending 06-30-2015**

|   |  |  |   |
|---|--|--|---|
| <b>B</b> Check if applicable<br><input type="checkbox"/> Address change<br><input type="checkbox"/> Name change<br><input type="checkbox"/> Initial return<br><input type="checkbox"/> Final return/terminated<br><input type="checkbox"/> Amended return<br><input type="checkbox"/> Application pending | <b>C</b> Name of organization<br>Young Mens Christian Assoc McGaw Inc                                      |  | <b>D</b> Employer identification number<br>36-2169194 |
|   | Doing business as  |  | <b>E</b> Telephone number<br>(847) 475-7400           |
|   | Number and street (or P O box if mail is not delivered to street address)<br>1000 Grove Street             | Room/suite   | <b>G</b> Gross receipts \$ 18,339,320                 |
|   | City or town, state or province, country, and ZIP or foreign postal code<br>Evanston, IL 60201             |  |   |
|   | <b>F</b> Name and address of principal officer<br>Mark A Dennis<br>1000 Grove Street<br>Evanston, IL 60201 |  |   |
| <b>I</b> Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) <input type="checkbox"/> (insert no ) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527  |  | <b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br><br><b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>If "No," attach a list (see instructions) |   |
| <b>J</b> Website: ► mcgawymca.org   |  | <b>H(c)</b> Group exemption number ►   |   |

|   |                                 |                                     |
|---|---------------------------------|-------------------------------------|
| <b>K</b> Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other <input type="checkbox"/> | <b>L</b> Year of formation 1885 | <b>M</b> State of legal domicile IL |
|---|---------------------------------|-------------------------------------|

## Part I Summary

|  |   |                           |              |
|--|---|---------------------------|--------------|
| Activities & Governance  | <b>1</b> Briefly describe the organization's mission or most significant activities<br>The McGaw YMCA is an open charitable, membership association that promotes growth in spirit, mind, and body through programs and services for all. As a cause-driven, charitable organization, we are committed to building the foundations of community. We seek to understand and address community needs in order to effect lasting personal and social change in our three areas of focus: <u>youth development, healthy living, and social responsibility</u> . |                           |              |
|  |   |                           |              |
|  |   |                           |              |
|  | <b>2</b> Check this box <input checked="" type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets  |                           |              |
|  | <b>3</b> Number of voting members of the governing body (Part VI, line 1a) . . . . .  | <b>3</b>                  | 27           |
|  | <b>4</b> Number of independent voting members of the governing body (Part VI, line 1b) . . . . .  | <b>4</b>                  | 27           |
|  | <b>5</b> Total number of individuals employed in calendar year 2014 (Part V, line 2a) . . . . .   | <b>5</b>                  | 715          |
| <b>6</b> Total number of volunteers (estimate if necessary) . . . . .                    | <b>6</b>  | 1,300                     |              |
| <b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12 . . . . . | <b>7a</b>   | 0                         |              |
| <b>b</b> Net unrelated business taxable income from Form 990-T, line 34 . . . . .        | <b>7b</b>   | 0                         |              |
| Revenue  | <b>8</b> Contributions and grants (Part VIII, line 1h) . . . . .  | Prior Year                | Current Year |
|  | <b>9</b> Program service revenue (Part VIII, line 2g) . . . . .   | 1,260,250                 | 2,394,757    |
|  | <b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . . . .   | 12,734,571                | 13,141,831   |
|  | <b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)  | 617,144                   | 133,173      |
|  | <b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) . . . . .  | 360,956                   | 286,644      |
|  |   | 14,972,921                | 15,956,405   |
| Expenses   | <b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1–3) . . . . .  | 1,704,023                 | 1,971,597    |
|  | <b>14</b> Benefits paid to or for members (Part IX, column (A), line 4) . . . . .   | 0                         | 0            |
|  | <b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)   | 8,278,923                 | 8,906,089    |
|  | <b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e) . . . . .  | 0                         | 0            |
|  | <b>b</b> Total fundraising expenses (Part IX, column (D), line 25) <u>366,129</u>   |                           |              |
|  | <b>17</b> Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) . . . . .  | 4,748,681                 | 5,104,577    |
|  | <b>18</b> Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)   | 14,731,627                | 15,982,263   |
|  | <b>19</b> Revenue less expenses. Subtract line 18 from line 12 . . . . .  | 241,294                   | -25,858      |
| Net Assets or Fund Balances  |   | Beginning of Current Year | End of Year  |
|  | <b>20</b> Total assets (Part X, line 16) . . . . .  | 23,152,666                | 22,891,445   |
|  | <b>21</b> Total liabilities (Part X, line 26) . . . . .   | 8,719,877                 | 8,454,090    |
|  | <b>22</b> Net assets or fund balances. Subtract line 21 from line 20 . . . . .  | 14,432,789                | 14,437,355   |

## 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.

|                               |  |  |   |                           |      |
|-------------------------------|--|--|---|---------------------------|------|
| <b>Sign Here</b>              | Signature of officer   |  |   | 2016-02-12                |      |
|                               | Nancy J Petrillo Chief Financial Officer<br>Type or print name and title     |  |   | Date                      |      |
| <b>Paid Preparer Use Only</b> | Print/Type preparer's name<br>Marcy Steindler                                |  | Preparer's signature<br>Marcy Steindler |                           | Date |
|                               | Check <input type="checkbox"/> if self-employed                              |  | PTIN<br>P00573131                       |                           |      |
|                               | Firm's name   ▶ Mann Weitz & Associates LLC                                  |  |   | Firm's EIN   ▶ 36-3963131 |      |
|                               | Firm's address   ▶ 111 Deer Lake Rd Suite 125<br><br>Deerfield, IL 600159578 |  |   | Phone no   (847) 267-3400 |      |

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   |  |  |  |  |
| <p>The McGaw YMCA is an open charitable, membership association that promotes growth in spirit, mind and body through programs and services for all in our diverse community The YMCA is a cause-driven, charitable organization committed to building the foundations of community We seek to understand and address community needs in order to effect lasting personal and social change in our three areas of focus youth development, healthy living and social responsibility</p>  |   |  |  |  |  |
|  |   |  |  |  |  |
|  |   |  |  |  |  |
|  |   |  |  |  |  |
| 2  | Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 \$ 5,363,759 including grants of \$ 827,829 ) (Revenue \$ 5,378,340 )   |  |  |  |  |
| <p>HEALTHY LIVING With over 12,000 members, the McGaw YMCA has a long-standing policy that no one is turned away from our Y due to the inability to afford membership Each year we strive to fulfill our mission of service through our income-based "membership for all" pricing that sets membership fees based on household income and the number of individuals in the household Our goal is to open the doors of the McGaw Y to everyone using an affordable pricing structure This helps keep our Health and Wellness facilities accessible to the vast majority of those living and working in Evanston and the surrounding communities In order to increase accessibility, we supply a free child care drop in center for members using the facility To remain true to our commitment to serving our entire community, our scholarships and fee assistance goes far beyond memberships We offer scholarships to reduce tuition and fees on youth sports, swim lessons, day and residential camp, child care, fee-based programs, and rental assistance for the men's residence In FY2015 we provided nearly \$2 million in Scholarships and other fee assistance, the most the McGaw YMCA has ever given in a single year In total 5,383 youth, families and adults benefited from scholarships and other fee assistance from the McGaw YMCA The McGaw YMCA 's approach to healthy living focuses on caring for oneself from the inside out, including the spirit, mind and body At the McGaw YMCA, we aim to improve the health outcomes and lifestyles of youth, adults and families in our community We provide members with the supportive relationships and community they need to create a healthy life style This is particularly important as our nation and community struggle with an obesity epidemic and work/life balance as individuals search for personal fulfillment We bring families together and offer sport, recreational and social networks that build relationships and strengthen bonds This area of focus contains general and targeted health and wellness programming with a total cost of \$3.3 million \$1.6 million spent on swim, sports and play for youth and families, including competitive swim teams, swim lessons, martial arts and basketball and other sports teams and leagues We also have the annual youth triathlon with over 200 young athletes competing and Evanston Swims!, a collaboration with Evanston/Skokie school district 65 and YMCA Evanston/north shore, offering free monthly swim and water safety lessons to over 300 second graders from three title one district 65 schools Across all of the McGaw YMCA youth swim programs we served over 2,600 children in FY2015 Also during the year we gave over \$79,000 in scholarships for swim, sports and play Finally, we spent nearly \$1.7 million on health and wellness programming including group exercise, personal training and pilates, weight management and nutrition education classes, massage therapy and chronic disease management through a research project led by Northwestern University Most recently we have been identified by YUSA as one of 12 to 15 Ys nationally to participate in an Alzheimers study call "EXERT" The EXERT study is a result of seven years of work at the University of California, San Diego Locally they will be using Rush University Medical Center's Alzheimer's Disease Center in Chicago to screen patients from Evanston with symptoms of early on-set dementia to participate in the project at our Y Our Y's project team will be responsible for implementing study activity as well as measuring the results of exercise on patients to determine the effect of the preventing progress of this disease</p>   |   |  |  |  |  |
| 4b   | (Code ) (Expenses \$ 1,117,997 including grants of \$ 95,705 ) (Revenue \$ 1,117,449 )  |  |  |  |  |
| <p>SOCIAL RESPONSIBILITY At the McGaw YMCA, a diverse population of individuals and families who live and work in Evanston and neighboring communities come together every day The McGaw YMCA membership base and program participants reflect the diversity in income, race and ethnicity, age, and ability - found in the region as whole This is particularly true for our men's residence program, which provides affordable rental housing, supportive services and a caring community for low-income men at various stages of their lives The Men's residence includes 172 Single Room Occupancy units on three floors of the McGaw YMCA's main building at 1000 Grove Street 100% of long-term and permanent Resident Members' annual income is below the area median income, 65% of Resident Members live at the McGaw YMCA for 3 or more years and 65% of the Resident Members are over 50 years old During fiscal year 2015 we served 239 men and awarded more than \$100,000 in fee assistance and subsidies to 62 of these low- and very low-income resident member AS SRO housing faces conversion to higher income apartments and condominiums in other parts of the region, McGaw YMCA's Men's Residence is a stable fixture in the community On average 93% of our 172 single rooms for men remained occupied in fiscal year 2015, signaling the continued demand for affordable, accessible housing in Evanston The McGaw YMCA is much more than a landlord A highly skilled and trained staff provides ongoing case management, wellness checks, and referrals to community partners and services Through a holistic housing structure, resident members not only have a place to sleep but have the resources and support system to help stabilize their housing and live their most productive lives</p>   |   |  |  |  |  |
| 4c   | (Code ) (Expenses \$ 7,670,525 including grants of \$ 1,047,313 ) (Revenue \$ 6,646,042 )   |  |  |  |  |
| <p>YOUTH DEVELOPMENT From six weeks old to high school seniors, the McGaw YMCA serves youth at every stage of development by nurturing the potential of every child and teen Our aim is to ensure youth realize their potential to become active, engaged and thriving members of the community We nurture their socio-emotional, cognitive, and physical development through holistic youth development programming, experiences and supports The YMCA in Evanston has been offering child care services for working parents for more than 60 years The McGaw YMCA Children's Center (a stand-alone facility a block from our main building) provides a safe, active, stimulating, and creative learning environment that addresses the whole child To ensure the highest quality we maintain accreditation through NAEYC, the nation's leading organization overseeing early childhood professionals Through the partnership between child, parent and dedicated staff, we strive to nourish the physical, intellectual, emotional and social development of every child we serve by providing well-rounded, fun, creative and enriching programs and experiences In FY2015 we served 991 unique youth from infants to school age (kindergarten through 5th grade) in full-day and part-day pre-school programs as well as after school programs Starting at age three, children receive weekly swim lessons and gym time at the McGaw Y main facility During FY2015 \$662,662 of scholarships were given to enable more children in our diverse community to participate in our program In addition, we provided summer Day Camp programs to 558 campers, from 3 years to 5th grade, helping kids build strong values and create self-confidence and character (also providing \$182,000 of fee assistance for our camper families) For many children from low-income households, learning stops when the school year ends, while higher income classmates continue to learn through vacations, trips to museums and fee-based summer camps Low-income children have far fewer opportunities to gain academic ground while out of school The McGaw Y Readers program is a free literacy and enrichment program serving nising 1st through 3rd graders who read below grade level It is designed to reverse summer learning loss and help close the achievement gap among children in Evanston Its core components are daily literacy instruction from D-65 certified teachers, strong parental engagement, enrichment activities in character development, music, art, and nutrition as well as weekly field trips that reinforce classroom learning, daily physical activity, including weekly swim lessons and beach days and finally continuous assessment and reporting Launched as a pilot in 2012, Y Readers is now one of the McGaw YMCA's most successful and impactful programs Y Readers is a partnership between McGaw YMCA and the Evanston/Skokie School District 65 Over the course of four summers, Y Readers has grown from serving 32 students at one site to 187 students at four sites in 2015 The students gained on average three months of reading skills over the course of the program in 2014 Had they not participated in Y Readers, these students would typically have lost as much as two months of reading skills A guiding principle of the McGaw YMCA is the transformational power of an adult mentor in a child's life Positive, caring relationships with adults can significantly improve a range of outcomes for youth, including academic performance, educational attainment, self-esteem, self-confidence, and the ability to make good decisions Project SOAR (Supporting Our Adolescents Responsibly) is one McGaw YMCA's longest-running and consistently successful youth programs Project SOAR is a one-on-one mentoring program that matches youth ages 9 to 14 with adult mentors In order to participate, both mentees and mentors commit to meeting once a week for a minimum of one school year However, the majority of mentors and mentees participate in Project SOAR for more than one year Mentees and their families are especially committed to the program, with 100% of eligible mentees reenrolled in Project SOAR after the most recently completed school year Project SOAR's largest source of mentors is Northwestern University students These young adult mentors play the role of an older sibling offering advice and using their own recent experiences growing up as teachable moments Mentees learn from these college-aged role models, who can make a significant difference in the youth's lives at a critical time in their development At the end of FY15, 100% of the parents surveyed said SOAR made a positive impact on their child's life There were 78 matches and 3,120 hours spent mentoring During FY2013 and 2014 the youth services team researched and assessed community needs, collaborating with community partners and youth in order to design new programs and structures that help us focus on meeting the needs of the youth in our community as well as better serve underserved youth As a result of this work two new initiatives began in FY2013 and 2014 The Achievers program targets students attending Evanston Township High School, Evanston's only public high school The Achievers program, now in its third year, follows cohorts of students at risk of not graduating and provides them with the guidance, motivation, and tools to complete high school and enroll in college The Achievers program provides students with academic support and mentorship, teaching them skills for self-advocacy and perseverance The five core components of the program are College and career readiness, academic support, parental involvement, community engagement and steering committee Achievers recruit diverse professionals-who look like Achievers and have similar backgrounds-to share with the students their academic and professional journeys Through career workshops and field trips to their places of work, these adults expose student Achievers to potential careers and college majors Weekly academic support and regular parent workshops complement the bimonthly career workshops Community service opportunities and a Spring Break College Tour help Achievers participants gain a broader perspective on the world around them and their futures When surveyed at the beginning of the school year, 66% of students felt they could not graduate high school on time and go to the college of their choice with their current grades However, at year-end, 95% of students said that they had gained the tools to obtain acceptance to college The McGaw YMCA's newest youth program, MetaMedia, is a free digital media and technology center and hang-out space open exclusively to middle school youth with programming focused on STEAM (Science, Technology, Engineering, Art/Design and Math) MetaMedia increases access to technology to underserved youth from Evanston, while providing middle school students a safe place to go after school and during school breaks Programming is youth driven, meaning program participants or "makers" drive the program's offerings MetaMedia staff, which includes instructors skilled in digital media and arts, supports makers in their learning, offering ongoing critiques and encouragement that build both skills and confidence in youth Makers choose how they will participate in MetaMedia By giving youth autonomy over their learning, they discover their own interests and passions At MetaMedia, a new generation of computer scientists, engineers, music producers, film makers, media artists, and designers is born In MetaMedia's first four months, 643 middle schoolers made 3,389 total visits, far exceeding the McGaw YMCA's expectations At Camp Echo, the McGaw YMCA's resident camp on 500 acres of lakeshore, woodlands and wetlands in Michigan, every moment has the potential to be a life-changing experience that teaches them independence, life skills, and respect for one another Camp echo's goal is to operate a fun, engaging program while fostering the physical, emotional and spiritual well-being of its participants We promote character development, celebrate diversity, encourage service learning and teach our teen participants leadership skills During the summer of 2015 we had over 1,500 campers experience camp (1,300 individual youth) and hosted family camp four times during the summer where children and adults of all ages can experience camp echo together Campers choose their own activities, including horseback riding, water skiing, paddle boarding, arts and crafts, archery, bike riding, and much more The McGaw YMCA works hard to ensure camp is accessible to youth and their families from a range of backgrounds Scholarships covering up to 90% of fees are available to help all who wish to attend camp In FY2015 Camp Echo provided scholarships totaling \$202,941, a 25% increase over the previous year, allowing more children, youth and families the opportunity to participate in camp programming</p> |   |  |  |  |  |
| 4d   | Other program services (Describe in Schedule O )  |  |  |  |  |
| (Expenses \$ including grants of \$ ) (Revenue \$ )  |   |  |  |  |  |
| 4e   | Total program service expenses 14,152,281   |  |  |  |  |

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   | Yes |    |
| 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?   | 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   |     | No |
| 4 <b>Section 501(c)(3) organizations.</b> 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  |     | No |
| 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III  |     |    |
| 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   |     | 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   |     | No |
| 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III  |     | 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                                      |     | 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   | 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.    | 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  |     | 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  |     | 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   |     | No |
| e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X   | 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  | Yes |    |
| 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII    | Yes |    |
| b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional  |     | No |
| 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E   |     | No |
| 14a Did the organization maintain an office, employees, or agents outside of the United States?  |     | 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                          |     | No |
| 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV  |     | No |
| 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV  |     | 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)   |     | No |
| 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II   | 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  |     | No |
| 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  |     | No |
| b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?   |     |    |

Part IV

Checklist of Required Schedules (continued)

|     |  |     |     |    |
|-----|--|-----|-----|----|
| 21  | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II . . .</i>   | 21  |     | No |
| 22  | Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III . . .</i>   | 22  | Yes |    |
| 23  | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J . . .</i>  | 23  | Yes |    |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a . . .</i>                            | 24a |     | No |
| b   | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .  | 24b |     |    |
| c   | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . .   | 24c |     |    |
| d   | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .  | 24d |     |    |
| 25a | <b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I . . .</i>   | 25a |     | No |
| b   | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I . . .</i>                                       | 25b |     | No |
| 26  | Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II . . .</i>                                 | 26  |     | No |
| 27  | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III . . .</i> | 27  |     | No |
| 28  | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)   |     |     |    |
| a   | A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV . . .</i>   | 28a |     | No |
| b   | A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV . . .</i>  | 28b |     | No |
| c   | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV . . .</i>  | 28c |     | No |
| 29  | Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M . . .</i>  | 29  | Yes |    |
| 30  | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M . . .</i>  | 30  |     | No |
| 31  | Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I . . .</i>  | 31  |     | No |
| 32  | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II . . .</i>  | 32  |     | No |
| 33  | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I . . .</i>  | 33  |     | No |
| 34  | Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 . . .</i>  | 34  |     | No |
| 35a | Did the organization have a controlled entity within the meaning of section 512(b)(13)?  | 35a |     | No |
| b   | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2 . . .</i>   | 35b |     |    |
| 36  | <b>Section 501(c)(3) organizations.</b> 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? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . .  | 38  | Yes |    |

Part V

Statements Regarding Other IRS Filings and Tax Compliance

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

|     |  | Yes | No |
|-----|--|-----|----|
| 1a  | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.  |     |    |
| 1b  | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.   |     |    |
| 1c  | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?   | Yes |    |
| 2a  | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.   |     |    |
| 2b  | If at least one is reported on line 2a, did the organization file all required federal employment tax returns?<br><b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).        | Yes |    |
| 3a  | Did the organization have unrelated business gross income of \$1,000 or more during the year?  |     | No |
| 3b  | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.   |     |    |
| 4a  | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? |     | No |
| b   | If "Yes," enter the name of the foreign country:<br>See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  |     |    |
| 5a  | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  |     | No |
| 5b  | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?   |     | No |
| 5c  | If "Yes," to line 5a or 5b, did the organization file Form 8886-T?   |     |    |
| 6a  | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?                                    |     | No |
| 6b  | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  |     |    |
| 7   | <b>Organizations that may receive deductible contributions under section 170(c).</b>   |     |    |
| 7a  | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  | Yes |    |
| 7b  | If "Yes," did the organization notify the donor of the value of the goods or services provided?  | Yes |    |
| 7c  | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?   |     | No |
| 7d  | If "Yes," indicate the number of Forms 8282 filed during the year.   |     |    |
| 7e  | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  |     | No |
| 7f  | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?   |     | No |
| 7g  | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?   |     |    |
| 7h  | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?   | Yes |    |
| 8   | <b>Sponsoring organizations maintaining donor advised funds.</b><br>Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?  |     |    |
| 9a  | Did the sponsoring organization make any taxable distributions under section 4966?   |     |    |
| 9b  | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  |     |    |
| 10  | <b>Section 501(c)(7) organizations.</b> Enter  |     |    |
| 10a | Initiation fees and capital contributions included on Part VIII, line 12.  |     |    |
| 10b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.   |     |    |
| 11  | <b>Section 501(c)(12) organizations.</b> Enter   |     |    |
| 11a | Gross income from members or shareholders.   |     |    |
| 11b | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).   |     |    |
| 12a | <b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?  |     |    |
| 12b | If "Yes," enter the amount of tax-exempt interest received or accrued during the year.   |     |    |
| 13  | <b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>  |     |    |
| 13a | Is the organization licensed to issue qualified health plans in more than one state?<br><b>Note.</b> See the instructions for additional information the organization must report on Schedule O.   |     |    |
| 13b | Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.   |     |    |
| 13c | Enter the amount of reserves on hand.  |     |    |
| 14a | Did the organization receive any payments for indoor tanning services during the tax year?   |     | No |
| 14b | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.   |     |    |

Part VI

Governance, Management, and Disclosure

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

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

Section A. Governing Body and Management

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

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

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

Section C. Disclosure

|    |  |    |
|----|--|----|
| 17 | List the States with which a copy of this Form 990 is required to be filed   | IL |
| 18 | Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.<br><input checked="" type="checkbox"/> Own website <input type="checkbox"/> Another's website <input type="checkbox"/> Upon request <input type="checkbox"/> 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<br>Nancy Petrillo   |    |

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

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

Form **990** (2014)



Part VII

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

| (A)<br>Name and Title | (B)<br>Average hours per week (list any hours for related organizations below dotted line) | (C)<br>Position (do not check more than one box, unless person is both an officer and a director/trustee) |                       |         |              |                              |        | (D)<br>Reportable compensation from the organization (W-2/1099-MISC) | (E)<br>Reportable compensation from related organizations (W-2/1099-MISC) | (F)<br>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) . . . . .                           | ▶ | 793,487 | 0 | 95,482 |

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization▶5

|   |   | Yes | No  |
|---|---|-----|-----|
| 3 | Did the organization list any <b>former</b> 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)<br>Name and business address  | (B)<br>Description of services | (C)<br>Compensation |
|   |   |                                |                     |
|   |   |                                |                     |
|   |   |                                |                     |
|   |   |                                |                     |
|   |   |                                |                     |
| 2 | Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶0   |                                |                     |

Part VIII

Statement of Revenue

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

|   |                       |  | (A)<br>Total revenue | (B)<br>Related or<br>exempt<br>function<br>revenue | (C)<br>Unrelated<br>business<br>revenue | (D)<br>Revenue<br>excluded from<br>tax under<br>sections<br>512-514 |
|---|-----------------------|--|----------------------|--|---|---|
| Contributions, Gifts, Grants<br>and Other Similar Amounts | 1a                    | Federated campaigns . . . . .  | 1a0                  |  |   |   |
|   | b                     | Membership dues . . . . .  | 1b0                  |  |   |   |
|   | c                     | Fundraising events . . . . .   | 1c42,050             |  |   |   |
|   | d                     | Related organizations . . . . .  | 1d0                  |  |   |   |
|   | e                     | Government grants (contributions)  | 1e45,000             |  |   |   |
|   | f                     | All other contributions, gifts, grants, and<br>similar amounts not included above  | 1f2,307,707          |  |   |   |
|   | g                     | Noncash contributions included in lines<br>1a-1f \$  | 67,140               |  |   |   |
|   | h                     | Total. Add lines 1a-1f . . . . .   | 2,394,757            |  |   |   |
| Program Service Revenue                                   | Business Code         |  |                      |  |   |   |
|   | 2a                    | Youth Development  | 8134106,646,042      | 6,646,042  |   |   |
|   | b                     | Healthy Living   | 8134105,378,340      | 5,378,340  |   |   |
|   | c                     | Social Responsibility  | 8134101,117,449      | 1,117,449  |   |   |
|   | d                     |  |                      |  |   |   |
|   | e                     |  |                      |  |   |   |
|   | f                     | All other program service revenue  | 0                    | 0  | 0                                       | 0   |
|   | g                     | Total. Add lines 2a-2f . . . . .   | 13,141,831           |  |   |   |
| Other Revenue   | 3                     | Investment income (including dividends, interest,<br>and other similar amounts) . . . . .  | 140,210              |  |   | 140,210   |
|   | 4                     | Income from investment of tax-exempt bond proceeds . . . . .   |                      |  |   |   |
|   | 5                     | Royalties . . . . .  |                      |  |   |   |
|   | (i) Real              |  | (ii) Personal        |  |   |   |
|   | 6a                    | Gross rents  |                      |  |   |   |
|   | b                     | Less rental expenses   |                      |  |   |   |
|   | c                     | Rental income or (loss)  | 00                   |  |   |   |
|   | d                     | Net rental income or (loss) . . . . .  |                      |  |   |   |
|   | (i) Securities        |  | (ii) Other           |  |   |   |
|   | 7a                    | Gross amount from sales of assets other than inventory   | 2,225,433            |  |   |   |
|   | b                     | Less cost or other basis and sales expenses  | 2,232,470            |  |   |   |
|   | c                     | Gain or (loss)   | -7,0370              |  |   |   |
|   | d                     | Net gain or (loss) . . . . .   | -7,037               |  |   | -7,037  |
|   | 8a                    | Gross income from fundraising events (not including<br>\$ 42,050 of contributions reported on line 1c)<br>See Part IV, line 18 . . . . . |                      |  |   |   |
|   | a                     |  | 171,517              |  |   |   |
|   | b                     | Less direct expenses . . . . .   | b93,686              |  |   |   |
|   | c                     | Net income or (loss) from fundraising events . . . . .   | 77,831               |  |   | 77,831  |
|   | 9a                    | Gross income from gaming activities<br>See Part IV, line 19 . . . . .  |                      |  |   |   |
|   | a                     |  |                      |  |   |   |
|   | b                     | Less direct expenses . . . . .   | b                    |  |   |   |
|   | c                     | Net income or (loss) from gaming activities . . . . .  |                      |  |   |   |
|   | 10a                   | Gross sales of inventory, less returns and allowances . . . . .  | a                    |  |   |   |
|   |                       |  | 96,726               |  |   |   |
|   | b                     | Less cost of goods sold . . . . .  | b56,759              |  |   |   |
|   | c                     | Net income or (loss) from sales of inventory . . . . .   | 39,967               |  |   | 39,967  |
|   | Miscellaneous Revenue |  | Business Code        |  |   |   |
|   | 11a                   | Use of Space   | 81341094,273         |  |   | 94,273  |
|   | b                     | Locker Rental  | 81341042,767         |  |   | 42,767  |
|   | c                     | Parking Lot Income   | 8134109,465          |  |   | 9,465   |
|   | d                     | All other revenue . . . . .  | 22,341               | 0  | 0                                       | 22,341  |
|   | e                     | Total. Add lines 11a-11d . . . . .   | 168,846              |  |   |   |
|   | 12                    | Total revenue. See Instructions . . . . .  | 15,956,405           | 13,141,831   | 0                                       | 419,817   |

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)<br>Total expenses | (B)<br>Program service expenses | (C)<br>Management and general expenses | (D)<br>Fundraising expenses |
|--|---|-----------------------|---------------------------------|--|-----------------------------|
| 1  | Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.   |                       |                                 |  |                             |
| 2  | Grants and other assistance to domestic individuals. See Part IV, line 22.  | 1,970,847             | 1,970,847                       |  |                             |
| 3  | Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.   | 750                   | 750                             |  |                             |
| 4  | Benefits paid to or for members.  |                       |                                 |  |                             |
| 5  | Compensation of current officers, directors, trustees, and key employees.   | 977,280               | 333,149                         | 489,136                                | 154,995                     |
| 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.   | 6,224,009             | 5,969,722                       | 139,172                                | 115,115                     |
| 8  | Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).   | 394,461               | 349,963                         | 33,188                                 | 11,310                      |
| 9  | Other employee benefits.  | 790,027               | 733,518                         | 33,514                                 | 22,995                      |
| 10   | Payroll taxes.  | 520,312               | 461,618                         | 43,776                                 | 14,918                      |
| 11   | Fees for services (non-employees):  |                       |                                 |  |                             |
| a  | Management.   |                       |                                 |  |                             |
| b  | Legal.  | 23,786                |                                 | 23,786                                 |                             |
| c  | Accounting.   | 23,410                |                                 | 23,410                                 |                             |
| d  | Lobbying.   |                       |                                 |  |                             |
| e  | Professional fundraising services. See Part IV, line 17.  |                       |                                 |  |                             |
| f  | Investment management fees.   | 20,054                |                                 | 20,054                                 |                             |
| g  | Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).   | 426,498               | 187,066                         | 233,773                                | 5,659                       |
| 12   | Advertising and promotion.  | 174,812               | 105,761                         | 46,034                                 | 23,017                      |
| 13   | Office expenses.  | 319,694               | 276,938                         | 38,868                                 | 3,888                       |
| 14   | Information technology.   | 148,452               | 133,591                         | 8,233                                  | 6,628                       |
| 15   | Royalties.  |                       |                                 |  |                             |
| 16   | Occupancy.  | 1,546,701             | 1,486,850                       | 59,851                                 |                             |
| 17   | Travel.   | 21,306                | 14,398                          | 6,778                                  | 130                         |
| 18   | Payments of travel or entertainment expenses for any federal, state, or local public officials.   |                       |                                 |  |                             |
| 19   | Conferences, conventions, and meetings.   | 117,127               | 45,171                          | 67,830                                 | 4,126                       |
| 20   | Interest.   | 5,882                 | 5,882                           |  |                             |
| 21   | Payments to affiliates.   | 138,244               | 0                               | 138,244                                | 0                           |
| 22   | Depreciation, depletion, and amortization.  | 886,357               | 843,523                         | 42,834                                 |                             |
| 23   | Insurance.  | 80,271                | 71,265                          | 9,006                                  |                             |
| 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  | Direct Program Expenses   | 808,234               | 808,234                         |  |                             |
| b  | Bad Debt for Program  | 103,559               | 103,559                         |  |                             |
| c  | Vehicle Rental & Expenses   | 214,648               | 214,625                         | 23                                     |                             |
| d  | Dues and Subscription   | 30,363                | 25,576                          | 4,787                                  | 0                           |
| e  | All other expenses  | 15,179                | 10,275                          | 1,556                                  | 3,348                       |
| 25   | Total functional expenses. Add lines 1 through 24e.   | 15,982,263            | 14,152,281                      | 1,463,853                              | 366,129                     |
| 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 <input type="checkbox"/> 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  |               | 154,357           | 1   | 205,418     |
|                             | 2   | Savings and temporary cash investments   |               | 695,069           | 2   | 570,815     |
|                             | 3   | Pledges and grants receivable, net   |               | 59,153            | 3   | 106,336     |
|                             | 4   | Accounts receivable, net   |               | 313,632           | 4   | 401,218     |
|                             | 5   | Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L   |               | 0                 | 5   |             |
|                             | 6   | Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L |               | 0                 | 6   |             |
|                             | 7   | Notes and loans receivable, net  |               | 0                 | 7   | 0           |
|                             | 8   | Inventories for sale or use  |               | 0                 | 8   | 18,955      |
|                             | 9   | Prepaid expenses and deferred charges  |               | 155,807           | 9   | 147,552     |
|                             | 10a   | Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D  | 10a28,858,260 |                   |     |             |
|                             | b   | Less accumulated depreciation  | 10b13,421,795 | 14,899,046        | 10c | 15,436,465  |
|                             | 11  | Investments—publicly traded securities   |               | 6,592,083         | 11  | 5,742,123   |
|                             | 12  | Investments—other securities See Part IV, line 11  |               | 50,206            | 12  | 26,183      |
|                             | 13  | Investments—program-related See Part IV, line 11   |               | 0                 | 13  |             |
|                             | 14  | Intangible assets  |               | 0                 | 14  | 0           |
|                             | 15  | Other assets See Part IV, line 11  |               | 233,313           | 15  | 236,380     |
|                             | 16  | Total assets. Add lines 1 through 15 (must equal line 34)  |               | 23,152,666        | 16  | 22,891,445  |
| Liabilities                 | 17  | Accounts payable and accrued expenses  |               | 1,102,189         | 17  | 1,102,502   |
|                             | 18  | Grants payable   |               |                   | 18  |             |
|                             | 19  | Deferred revenue   |               | 1,517,291         | 19  | 1,635,478   |
|                             | 20  | Tax-exempt bond liabilities  |               | 0                 | 20  | 0           |
|                             | 21  | Escrow or custodial account liability Complete Part IV of Schedule D   |               |                   | 21  |             |
|                             | 22  | Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L  |               | 0                 | 22  |             |
|                             | 23  | Secured mortgages and notes payable to unrelated third parties   |               | 6,051,547         | 23  | 5,681,085   |
|                             | 24  | Unsecured notes and loans payable to unrelated third parties   |               | 0                 | 24  | 0           |
|                             | 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   |               | 48,850            | 25  | 35,025      |
|                             | 26  | Total liabilities. Add lines 17 through 25   |               | 8,719,877         | 26  | 8,454,090   |
| 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  |               | 13,139,027        | 27  | 12,936,195  |
|                             | 28  | Temporarily restricted net assets  |               | 466,804           | 28  | 615,687     |
|                             | 29  | Permanently restricted net assets  |               | 826,958           | 29  | 885,473     |
|                             | Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34.               |  |               |                   |     |             |
|                             | 30  | Capital stock or trust principal, or current funds   |               |                   | 30  |             |
|                             | 31  | Paid-in or capital surplus, or land, building or equipment fund  |               |                   | 31  |             |
|                             | 32  | Retained earnings, endowment, accumulated income, or other funds   |               |                   | 32  |             |
|                             | 33  | Total net assets or fund balances  |               | 14,432,789        | 33  | 14,437,355  |
|                             | 34  | Total liabilities and net assets/fund balances   |               | 23,152,666        | 34  | 22,891,445  |

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  | 15,956,405 |
| 2  | Total expenses (must equal Part IX, column (A), line 25) . . . . .  | 2  | 15,982,263 |
| 3  | Revenue less expenses Subtract line 2 from line 1 . . . . .   | 3  | -25,858    |
| 4  | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . . . .           | 4  | 14,432,789 |
| 5  | Net unrealized gains (losses) on investments . . . . .  | 5  | 23,900     |
| 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  | 6,524      |
| 10 | Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) | 10 | 14,437,355 |

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 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____<br>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?<br>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<br><input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis |     | No |
| 2b | Were the organization's financial statements audited by an independent accountant?<br>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<br><input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> 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?<br>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? . . . . .   |     | No |
| 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   |     |    |



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

| (A)<br>Name and Title   | (B)<br>Average hours per week (list any hours for related organizations below dotted line) | (C)<br>Position (do not check more than one box, unless person is both an officer and a director/trustee) |                       |         |              |                              |        | (D)<br>Reportable compensation from the organization (W-2/1099-MISC) | (E)<br>Reportable compensation from related organizations (W-2/1099-MISC) | (F)<br>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) Anne Reusche<br>Director of the Board                      | 2 50<br>.....  | X   |                       |         |              |                              |        | 0  | 0   | 0   |
| (1) Kristin Brown<br>Director of the Board                      | 2 00<br>.....  | X   |                       |         |              |                              |        | 0  | 0   | 0   |
| (2) Nancy Petrillo<br>Chief Administrator & Financial Officer   | 50 00<br>.....   |   |                       |         | X            |                              |        | 102,868  | 0   | 19,523  |
| (3) Bruce Carmichael<br>Chief Human Capital Development Officer | 50 00<br>.....   |   |                       |         | X            |                              |        | 95,571   | 0   | 12,546  |
| (4) Monique Parsons<br>Chief Operating Officer                  | 50 00<br>.....   |   |                       |         | X            |                              |        | 101,705  | 0   | 25,401  |
| (5) Mirna Holton<br>Chief Development Officer                   | 50 00<br>.....   |   |                       |         | X            |                              |        | 123,439  | 0   | 536   |
| (6) William F Geiger<br>Former President/CEO                    | 50 00<br>.....   |   |                       |         | X            |                              |        | 210,469  | 0   | 34,257  |
| (7) Mark A Dennis Jr<br>President/CEO                           | 50 00<br>.....   |   |                       |         | X            |                              |        | 159,435  | 0   | 3,219   |

SCHEDULE A  
(Form 990 or 990EZ)

Department of the Treasury  
Internal Revenue Service

Public Charity Status and Public Support  
Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.  
▶ Attach to Form 990 or Form 990-EZ.  
▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047  
2014  
Open to Public Inspection

|  |  |
|--|--|
| Name of the organization<br>Young Mens Christian Assoc McGaw Inc | Employer identification number<br>36-2169194 |
|--|--|

Part I

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

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

1

☐

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

2

☐

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

3

☐

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

4

☐

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

5

☐

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

6

☐

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

7

☐

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

8

☐

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

9

☒

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

10

☐

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

11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box 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.")  | 5,326,005  | 5,637,954  | 5,424,010  | 5,435,147  | 2,394,757  | 24,217,873 |
| 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose | 7,678,646  | 8,246,853  | 8,097,070  | 8,728,775  | 13,410,074 | 46,161,418 |
| 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   | 13,004,651 | 13,884,807 | 13,521,080 | 14,163,922 | 15,804,831 | 70,379,291 |
| 7a Amounts included on lines 1, 2, and 3 received from disqualified persons  | 516,054    | 251,354    | 141,881    | 136,798    | 124,212    | 1,170,299  |
| b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year           | 0          | 0          | 0          | 0          | 0          | 0          |
| c Add lines 7a and 7b  | 516,054    | 251,354    | 141,881    | 136,798    | 124,212    | 1,170,299  |
| 8 Public support (Subtract line 7c from line 6.)   |            |            |            |            |            | 69,208,992 |

| 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  | 13,004,651 | 13,884,807 | 13,521,080 | 14,163,922 | 15,804,831 | 70,379,291 |
| 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources   | 142,691    | 136,995    | 161,206    | 190,428    | 140,210    | 771,530    |
| b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  |            |            |            |            |            |            |
| c Add lines 10a and 10b  | 142,691    | 136,995    | 161,206    | 190,428    | 140,210    | 771,530    |
| 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.)   | 308,837    | 267,553    | 244,751    | 287,833    | 168,846    | 1,277,820  |
| 13 Total support. (Add lines 9, 10c, 11, and 12.)  | 13,456,179 | 14,289,355 | 13,927,037 | 14,642,183 | 16,113,887 | 72,428,641 |
| 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 | 95.55 % |  |
| 16 Public support percentage from 2013 Schedule A, Part III, line 15                      | 16 | 94.90 % |  |

| Section D. Computation of Investment Income Percentage   |    |        |  |
|--|----|--------|--|
| 17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f))   | 17 | 1.07 % |  |
| 18 Investment income percentage from 2013 Schedule A, Part III, line 17  | 18 | 1.09 % |  |
| 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 <b>Part VI</b> 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 <b>Part VI</b> 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 <b>Part VI</b> 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 <b>Part VI</b> 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 <b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?   | 5b  |    |
| c <b>Substitutions only.</b> 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 <b>Part VI</b> .   | 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 <b>Part VI</b> .  | 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 <b>Part VI</b> .  | 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 <b>Part VI</b> .   | 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 <b>Part VI</b> 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 <b>Part VI</b> 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 <b>Part VI</b> 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 <b>Part VI</b> 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 <b>Part VI</b> 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 <input type="checkbox"/> The organization satisfied the Activities Test. Complete <b>line 2</b> below.   |  |  |  |
| b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete <b>line 3</b> below.  |  |  |  |
| c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).   |  |  |  |
| 2 <u>Activities Test</u> <b>Answer (a) and (b) below.</b>  |  |  |  |
| 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 <b>Part VI identify those supported organizations and explain</b> 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 <b>Part VI</b> 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> <b>Answer (a) and (b) below.</b>  |  |  |  |
| 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                               | <b>Adjusted Net Income</b> (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                                | <b>Total</b> (add lines 1a, 1b, and 1c)  | 1d             |                             |
| e                                | <b>Discount</b> 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                                | <b>Minimum Asset Amount</b> (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                                | <b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)   | 6 |              |
| 7                                | <input type="checkbox"/> 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)<br>Excess Distributions | (ii)<br>Underdistributions<br>Pre-2014 | (iii)<br>Distributable<br>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 Other Income | Use of Space \$94,273 Locker Rental \$42,767 Parking Lot Income \$9,465 Miscellaneous Revenue \$22,341   |
| Schedule A, Part III, Line 12 Other Income | DESCRIPTION - MISCELLANEOUS INCOME, COLUMN A - 308837 0, COLUMN B - 267553 0, COLUMN C - 244751 0, COLUMN D - 287833 0, COLUMN E - 168846 0, COLUMN F - 1277820 0, |

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](http://www.irs.gov/form990).

OMB No 1545-0047

2014

Open to Public Inspection

|   |   |
|---|---|
| <b>Name of the organization</b><br>Young Mens Christian Assoc McGaw Inc | <b>Employer identification number</b><br>36-2169194 |
|---|---|

Part I

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

|   |   |                              |
|---|---|------------------------------|
|   | (a) Donor advised funds   | (b) Funds and other accounts |
| 1 | Total number at end of year   |                              |
| 2 | Aggregate 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? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>  |                              |
| 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? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div> |                              |

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 . . . . .                     | 826,958         | 819,974       | 786,163             | 770,820             | 673,139            |
| b Contributions . . . . .                                  | 58,515          | 6,984         | 33,811              | 15,343              | 97,681             |
| c Net investment earnings, gains, and losses               |                 | 0             | 0                   | 0                   | 0                  |
| d Grants or scholarships . . . . .                         |                 | 0             | 0                   | 0                   | 0                  |
| e Other expenditures for facilities and programs . . . . . | 0               | 0             | 0                   | 0                   | 0                  |
| f Administrative expenses . . . . .                        |                 |               |                     |                     |                    |
| g End of year balance . . . . .                            | 885,473         | 826,958       | 819,974             | 786,163             | 770,820            |

- 2

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

Board designated or quasi-endowment

0 %
- b

Permanent endowment

100 %
- c

Temporarily restricted endowment

0 %
- The percentages in lines 2a, 2b, and 2c should equal 100%
- 3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by
- (i) unrelated organizations . . . . .

3a(i)

Yes

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 . . . . .  | 0                                    | 1,142,512                      |                              | 1,142,512      |
| b Buildings . . . . .  | 0                                    | 22,960,147                     | 10,001,783                   | 12,958,364     |
| c Leasehold improvements . . . . .   | 0                                    | 88,801                         | 14,880                       | 73,921         |
| d Equipment . . . . .  | 0                                    | 850,677                        | 686,297                      | 164,380        |
| e Other . . . . .  | 0                                    | 3,816,123                      | 2,718,835                    | 1,097,288      |
| Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).) |                                      |                                |                              | 15,436,465     |



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  | 14,146,373 |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12                       |    |            |
| a | Net unrealized gains (losses) on investments . . . . .                                   | 2a | 30,425     |
| b | Donated services and use of facilities . . . . .   | 2b |            |
| c | Recoveries of prior year grants . . . . .  | 2c |            |
| d | Other (Describe in Part XIII ) . . . . .   | 2d | 0          |
| e | Add lines 2a through 2d . . . . .  | 2e | 30,425     |
| 3 | Subtract line 2e from line 1 . . . . .   | 3  | 14,115,948 |
| 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 | 20,054     |
| b | Other (Describe in Part XIII ) . . . . .   | 4b | 1,877,161  |
| c | Add lines 4a and 4b . . . . .  | 4c | 1,897,215  |
| 5 | Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12 ) . . . . . | 5  | 16,013,163 |

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  | 14,141,807 |
| 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 | 93,686     |
| e | Add lines 2a through 2d . . . . .   | 2e | 93,686     |
| 3 | Subtract line 2e from line 1 . . . . .  | 3  | 14,048,121 |
| 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 | 20,054     |
| b | Other (Describe in Part XIII ) . . . . .  | 4b | 1,970,847  |
| c | Add lines 4a and 4b . . . . .   | 4c | 1,990,901  |
| 5 | Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 ) . . . . . | 5  | 16,039,022 |

Part XIII

Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

| Return Reference   | Explanation   |
|--|---|
| Schedule D, Part V, Line 4 Intended uses of endowment funds                                    | Provide support for youth and family programs and Camp Echo   |
| Schedule D, Part X, Line 2 FIN 48 (ASC 740) footnote   | The financial statement effects of a tax position taken or expected to be taken are recognized in the financial statements when it is more likely than not, based on technical merits, that the position will be sustained upon examination. As of June 30, 2015, the Association had no uncertain tax positions that qualify for recognition or disclosure in the consolidated financial statements. |
| Schedule D, Part XI, Line 4(b) Other revenues in form 990 not in audited financial statements  | Special Event Direct Expenses - - 93686 Fee Assistance - 1970847  |
| Schedule D, Part XII, Line 2(d) Other expenses in audited financial statements not in form 990 | Special Event Direct Expenses - 93686   |
| Schedule D, Part XII, Line 4(b) Other expenses in form 990 not in audited financial statements | Fee Assistance - 1970847  |
|  |   |
|  |   |

[illegible]

SCHEDULE G  
(Form 990 or 990-EZ)

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](http://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 Assoc McGaw Inc

Employer identification number  
36-2169194

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

- 1

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

a

☐

Mail solicitations

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   |               |  |    |                                   |  |   |
| 2   |               |  |    |                                   |  |   |
| 3   |               |  |    |                                   |  |   |
| 4   |               |  |    |                                   |  |   |
| 5   |               |  |    |                                   |  |   |
| 6   |               |  |    |                                   |  |   |
| 7   |               |  |    |                                   |  |   |
| 8   |               |  |    |                                   |  |   |
| 9   |               |  |    |                                   |  |   |
| 10  |               |  |    |                                   |  |   |
| Total . . . . . ▶   |               |  |    |                                   |  |   |

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

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

| Revenue         |   |   | (a) Event #1                       | (b) Event #2                     | (c) Other events    | (d) Total events<br>(add col (a) through<br>col (c)) |          |
|-----------------|---|---|------------------------------------|----------------------------------|---------------------|--|----------|
|                 |   |   | Youth Program Gala<br>(event type) | Youth Triathlons<br>(event type) | 6<br>(total number) |  |          |
|                 | 1   | Gross receipts . . . .  | 164,539                            | 25,598                           | 23,430              | 213,567  |          |
|                 | 2   | Less Contributions . . . .  | 26,300                             | 15,750                           | 0                   | 42,050   |          |
| 3               | Gross income (line 1<br>minus line 2) . . . . | 138,239   | 9,848                              | 23,430                           | 171,517             |  |          |
| Direct Expenses | 4   | Cash prizes . . . .   |                                    |                                  |                     |  |          |
|                 | 5   | Noncash prizes . . . .  | 9,233                              |                                  |                     | 9,233  |          |
|                 | 6   | Rent/facility costs . . . .   | 5,520                              |                                  |                     | 5,520  |          |
|                 | 7   | Food and beverages . . . .  | 32,475                             |                                  |                     | 32,475   |          |
|                 | 8   | Entertainment . . . .   | 10,825                             |                                  |                     | 10,825   |          |
|                 | 9   | Other direct expenses . . . .   | 9,374                              | 12,892                           | 13,367              | 35,633   |          |
|                 | 10  | Direct expense summary Add lines 4 through 9 in column (d) . . . . . ▶  |                                    |                                  |                     |  | (93,686) |
|                 | 11  | Net income summary Subtract line 10 from line 3, column (d) . . . . . ▶ |                                    |                                  |                     |  | 77,831   |

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

|                 |   | (a) Bingo   | (b) Pull tabs/Instant<br>bingo/progressive bingo                                | (c) Other gaming  | (d) Total gaming (add<br>col (a) through col<br>(c)) |
|-----------------|---|---|---|---|--|
|                 |   |   |   |   |  |
| Revenue         | 1 | Gross revenue . . . . .   |   |   |  |
| Direct Expenses | 2 | Cash prizes . . . . .   |   |   |  |
|                 | 3 | Non-cash prizes . . . . .   |   |   |  |
|                 | 4 | Rent/facility costs . . . . .   |   |   |  |
|                 | 5 | Other direct expenses . . . . .   |   |   |  |
|                 | 6 | <div><input type="checkbox"/> Yes _____ %<br/><input type="checkbox"/> No</div> | <div><input type="checkbox"/> Yes _____ %<br/><input type="checkbox"/> No</div> | <div><input type="checkbox"/> Yes _____ %<br/><input type="checkbox"/> No</div> |  |
|                 | 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 \$

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 I  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Name of the organization  
Young Mens Christian Assoc McGaw Inc

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

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

▶ Information about Schedule I (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2014

Open to Public  
Inspection

Employer identification number  
36-2169194

Part I

General Information on Grants and Assistance

1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No

2

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

Part II

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

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

2

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

3

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



**Part III**

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

| (a)Type of grant or assistance           | (b)Number of recipients | (c)Amount of cash grant | (d)Amount of non-cash assistance | (e)Method of valuation (book, FMV, appraisal, other) | (f)Description of non-cash assistance |
|--|-------------------------|-------------------------|----------------------------------|--|---------------------------------------|
| (1) YOUTH DEVELOPMENT FEE ASSISTANCE     | 676                     | 1,047,313               |                                  | Book   |                                       |
| (2) HEALTHY LIVING FEE ASSISTANCE        | 4654                    | 827,829                 |                                  | Book   |                                       |
| (3) SOCIAL RESPONSIBILITY FEE ASSISTANCE | 53                      | 95,705                  |                                  | Book   |                                       |

**Part IV**

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

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

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](http://www.irs.gov/form990).

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization  
Young Mens Christian Assoc McGaw Inc

Employer identification number  
36-2169194

| Part I | Questions Regarding Compensation   |    | Yes | No |
|--------|--|----|-----|----|
| 1a     | Check the 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.<br><div><div><input type="checkbox"/> First-class or charter travel</div><div><input type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input type="checkbox"/> Tax idemnification and gross-up payments</div><div><input type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Discretionary spending account</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div> |    |     |    |
| 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.<br><div><div><input checked="" type="checkbox"/> Compensation committee</div><div><input type="checkbox"/> Written employment contract</div><div><input type="checkbox"/> Independent compensation consultant</div><div><input checked="" type="checkbox"/> Compensation survey or study</div><div><input type="checkbox"/> Form 990 of other organizations</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div>  |    |     |    |
| 4      | During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization:  |    |     |    |
| a      | Receive a severance payment or change-of-control payment?  | 4a |     | No |
| b      | Participate in, or receive payment from, a supplemental nonqualified retirement plan?  | 4b |     | No |
| c      | Participate in, or receive payment from, an equity-based compensation arrangement?<br>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.  | 4c |     | No |
|        | Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.   |    |     |    |
| 5      | For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:   |    |     |    |
| a      | The organization?  | 5a |     | No |
| b      | Any related organization?<br>If "Yes," to line 5a or 5b, describe in Part III.   | 5b |     | No |
| 6      | For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:   |    |     |    |
| a      | The organization?  | 6a |     | No |
| b      | Any related organization?<br>If "Yes," to line 6a or 6b, describe in Part III.   | 6b |     | No |
| 7      | For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III.  | 7  |     | No |
| 8      | Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.   | 8  |     | No |
| 9      | If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?   | 9  |     |    |

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

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

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

| (A) Name and Title  |      | (B) Breakdown of W-2 and/or 1099-MISC compensation |                                     |                                     | (C) Retirement and other deferred compensation | (D) Nontaxable benefits | (E) Total of columns (B)(i)-(D) | (F) Compensation in column(B) reported as deferred in prior Form 990 |
|---|------|--|-------------------------------------|-------------------------------------|--|-------------------------|---------------------------------|--|
|   |      | (i) Base compensation                              | (ii) Bonus & incentive compensation | (iii) Other reportable compensation |  |                         |                                 |  |
| 1 Nancy Petrillo<br>Chief Administrator & Financial Officer   | (i)  | 102,868  | 0                                   | 0                                   | 11,536   | 7,987                   | 122,391                         | 0  |
|   | (ii) | 0  | 0                                   | 0                                   | 0  | 0                       | 0                               | 0  |
| 2 Bruce Carmichael<br>Chief Human Capital Development Officer | (i)  | 95,571   | 0                                   | 0                                   | 10,552   | 1,994                   | 108,117                         | 0  |
|   | (ii) | 0  | 0                                   | 0                                   | 0  | 0                       | 0                               | 0  |
| 3 Monique Parsons<br>Chief Operating Officer                  | (i)  | 101,705  | 0                                   | 0                                   | 11,584   | 13,817                  | 127,106                         | 0  |
|   | (ii) | 0  | 0                                   | 0                                   | 0  | 0                       | 0                               | 0  |
| 4 Mirna Holton<br>Chief Development Officer                   | (i)  | 123,439  | 0                                   | 0                                   | 0  | 536                     | 123,975                         | 0  |
|   | (ii) | 0  | 0                                   | 0                                   | 0  | 0                       | 0                               | 0  |
| 5 William F Geiger<br>Former President/CEO                    | (i)  | 121,555  | 0                                   | 88,914                              | 23,579   | 10,678                  | 244,726                         | 0  |
|   | (ii) | 0  | 0                                   | 0                                   | 0  | 0                       | 0                               | 0  |
| 6 Mark A Dennis Jr<br>President/CEO                           | (i)  | 114,704  | 20,000                              | 24,731                              | 0  | 3,219                   | 162,654                         | 0  |
|   | (ii) | 0  | 0                                   | 0                                   | 0  | 0                       | 0                               | 0  |

**Part III**   **Supplemental Information**

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

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

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](http://www.irs.gov/form990).

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization  
Young Mens Christian Assoc McGaw Inc

Employer identification number  
36-2169194

Part I Types of Property

|  | (a)<br>Check<br>if<br>applicable | (b)<br>Number of contributions<br>or items contributed | (c)<br>Noncash contribution<br>amounts reported on<br>Form 990, Part VIII, line<br>1g | (d)<br>Method of determining<br>noncash contribution amounts |
|--|----------------------------------|--|---|--|
| 1 Art—Works of art . . . . .   |                                  |  |   |  |
| 2 Art—Historical treasures . . . . .                                       |                                  |  |   |  |
| 3 Art—Fractional interests . . . . .                                       |                                  |  |   |  |
| 4 Books and publications . . . . .   |                                  |  |   |  |
| 5 Clothing and household<br>goods . . . . .                                |                                  |  |   |  |
| 6 Cars and other vehicles . . . . .  | X                                | 1  | 3,979   | Market value   |
| 7 Boats and planes . . . . .   |                                  |  |   |  |
| 8 Intellectual property . . . . .  |                                  |  |   |  |
| 9 Securities—Publicly traded . . . . .                                     | X                                | 10   | 63,161  | Market value   |
| 10 Securities—Closely held stock . . . . .                                 |                                  |  |   |  |
| 11 Securities—Partnership, LLC,<br>or trust interests . . . . .            |                                  |  |   |  |
| 12 Securities—Miscellaneous . . . . .                                      |                                  |  |   |  |
| 13 Qualified conservation<br>contribution—Historic<br>structures . . . . . |                                  |  |   |  |
| 14 Qualified conservation<br>contribution—Other . . . . .                  |                                  |  |   |  |
| 15 Real estate—Residential . . . . .                                       |                                  |  |   |  |
| 16 Real estate—Commercial . . . . .  |                                  |  |   |  |
| 17 Real estate—Other . . . . .   |                                  |  |   |  |
| 18 Collectibles . . . . .  |                                  |  |   |  |
| 19 Food inventory . . . . .  |                                  |  |   |  |
| 20 Drugs and medical supplies . . . . .                                    |                                  |  |   |  |
| 21 Taxidermy . . . . .   |                                  |  |   |  |
| 22 Historical artifacts . . . . .  |                                  |  |   |  |
| 23 Scientific specimens . . . . .  |                                  |  |   |  |
| 24 Archeological artifacts . . . . .                                       |                                  |  |   |  |
| 25 Other ▶ ( )   |                                  |  |   |  |
| 26 Other ▶( )  |                                  |  |   |  |
| 27 Other ▶( )  |                                  |  |   |  |
| 28 Other ▶ ( )   |                                  |  |   |  |

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

29

0

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

30a

No

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

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

31

Yes

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

32a

Yes

b If "Yes," describe in Part II

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

Part II

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

| Return Reference   | Explanation  |
|--|--|
| Schedule M, Part I, Line 32b Third parties used to solicit, process, or sell noncash contributions | Securities that are traded on public exchanges, or other readily marketable securities, shall be accepted by the YMCA In most cases such securities will be immediately sold by the YMCA If an individual or his/her broker indicates a willingness to donate stock or securities, that person should be informed that such transfers are handled by the YMCA's investment advisor The broker of record shall then be instructed to communicate with the donor or donor's broker Valuation of donated securities will be determined as the mean between the high and the low on the date of the gift |
| Schedule M, Part I Explanations of reporting method for number of contributions                    | Cars and other vehicles Number of items Securities - Publicly traded Number of items   |
| Schedule M, Part I, Line 6 Number of contributions or items contributed                            | Number of items  |
| Schedule M, Part I, Line 9 Number of contributions or items contributed                            | Number of items  |
| Schedule M, Part I, Line 32b Third parties used to solicit, process, or sell noncash contributions | Securities that are traded on public exchanges, or other readily marketable securities, shall be accepted by the YMCA In most cases such securities will be immediately sold by the YMCA If an individual or his/her broker indicates a willingness to donate stock or securities, that person should be informed that such transfers are handled by the YMCA's investment advisor The broker of record shall then be instructed to communicate with the donor or donor's broker Valuation of donated securities will be determined as the mean between the high and the low on the date of the gift |

**SCHEDULE 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](http://www.irs.gov/form990).**

OMB No 1545-0047

**2014**

**Open to Public  
Inspection**

|  |  |
|--|--|
| Name of the organization<br>Young Mens Christian Assoc McGaw Inc | Employer identification number<br><br>36-2169194 |
|--|--|

| Return<br>Reference   | Explanation  |
|---|--|
| Form 990, Part VI,<br>Line 1a Delegate<br>broad authority to a<br>committee | The Executive Committee, which is a Standing Committee of the Board of Directors, shall consist of the elected officers of the Association. The Chair may appoint additional Directors to serve on the Executive Committee, subject to the approval of the Board of Directors. Subject to such restrictions imposed by law, the Executive Committee has all the powers of the Board of Directors during intervals between meetings of the Board of Directors and must report all actions taken at the next meeting of the Board of Directors. A majority shall constitute a quorum for meeting of the Executive Committee, and any action taken by the Committee shall be by vote of a majority of the Committee members present and voting at a meeting at which a quorum is present. |

| Return Reference   | Explanation  |
|--|--|
| Form 990, Part VI, Line 6 Classes of members or stockholders | The organization is a membership organization for purposes of the use of its facilities and programs |



| Return Reference  | Explanation  |
|---|--|
| Form 990, Part VI, Line 7a Members or stockholders electing members of governing body | The board of directors is elected by members at the annual meeting |

| Return Reference   | Explanation   |
|--|---|
| Form 990, Part VI, Line 11b Review of form 990 by governing body | The Association provides an electronic copy of the final version of Form 990 to all Board members for their review before it is filed |

| Return<br>Reference  | Explanation   |
|--|---|
| Form 990, Part VI, Line 12c<br>Conflict of interest policy | <p>An Interested person must disclose the existence of the financial interest and be given the opportunity to disclose all material facts to the directors and members of committees with governing board delegated powers considering the proposed transaction or arrangement. All board members must sign an annual statement that they have read and that they will comply with the policy. An interested person may make a presentation at the governing board or committee meeting, but after the presentation, he/she may be asked to leave the meeting during the discussion of, and the vote on, the transaction or arrangement involving the possible conflict of interest. After exercising due diligence, the governing board or committee shall determine whether the organization can obtain with reasonable efforts a more advantageous transaction or arrangement from a person or entity that would not give rise to a conflict of interest. If a more advantageous transaction or arrangement is not reasonably possible under circumstances not producing a conflict of interest, the governing board or committee shall determine by a majority vote of the disinterested directors whether the transaction or arrangement is in the Organization's best interest, for its own benefit, and whether it is fair and reasonable. In conformity with the above determination it shall make its decision as to whether to enter into the transaction or arrangement.</p> |

| Return<br>Reference  | Explanation  |
|--|--|
| Form 990, Part VI, Line 15a Process to establish compensation of top management official | <p>Annually, the Human Resources Task Force of the YMCA of the USA sends to all Y's their Salary Administration Guideline Recommendation. The guideline lists salary ranges and recommended merit increases. In addition they post on the website the US Department of Labor statistics. In support of these guidelines, salary ranges are based on subjective criteria, the Arthur Anderson "Hay Plan" developed in 2000. There is a point system rating for each job, which includes total revenue responsibility, managerial know-how, and decision complexity for each salary job. The Human Resources Committee reviews the guidelines and recommends to the Board Chair and the Executive Committee an appropriate merit increase for the CEO. The HR committee consists of 7 individuals who are YMCA members and/or Independent volunteers. The Board Chair completes an employee status change form authorizing the merit raise and this form is permanently kept as part of the CEO's payroll records in the Finance Department. Officers' and key employees' compensation and merit increases are determined in a similar manner using the HR Committee to give guidance using the "Hay" pointing system for compensation levels within a specified range for the related responsibilities and experience, and developing ranges of increases that adhere to specific performance appraisal results and overall budget guidelines developed to apply increases. The CEO reviews the performance of all direct reports as well as job salary scales for all key employees.</p> |

| Return<br>Reference  | Explanation  |
|--|--|
| Form 990, Part VI, Line 15b Process to establish compensation of other employees | <p>Annually, the Human Resources Task Force of the YMCA of the USA sends to all Y's their Salary Administration Guideline Recommendation. The guideline lists salary ranges and recommended merit increases. In addition they post on the website the US Department of Labor statistics. In support of these guidelines, salary ranges are based on subjective criteria, the Arthur Anderson developed the "Hay Plan" in 2000. There is a point system rating for each job, which includes total revenue responsibility, managerial know-how, and decision complexity for each salary job. The Human Capital Development Committee reviews the guidelines and recommends to the Board Chair and the Executive Committee an appropriate merit increase for the CEO. The HR committee consists of 7 individuals who are YMCA members and/or Independent volunteers. The Board Chair completes an employee status change form authorizing the merit raise and this form is permanently kept as part of the CEO's payroll records. In the Finance Department, officers' and key employees' compensation and merit increases are determined in a similar manner using the Human Capital Development Committee to give guidance using the "Hay" pointing system for compensation levels within a specified range for the related responsibilities and experience, and developing ranges of increases that adhere to specific performance appraisal results and overall budget guidelines developed to apply increases. The CEO reviews the performance of all direct reports and job salary scale for all key employees.</p> |

| Return Reference  | Explanation   |
|---|---|
| Form 990, Part VI, Line 19 Required documents available to the public | The governing documents, conflict of interest policy, and financial statements are available upon request |

| Return Reference   | Explanation   |
|--|---|
| Form 990, Part VIII, Line 2f<br>Other Program Service<br>Revenue | - Total Revenue , Related or Exempt Function Revenue , Unrelated Business Revenue , Revenue Excluded from<br>Tax Under Sections 512, 513, or 514 , - Total Revenue , Related or Exempt Function Revenue , Unrelated<br>Business Revenue , Revenue Excluded from Tax Under Sections 512, 513, or 514 , |

| Return Reference   | Explanation   |
|--|---|
| Form 990, Part VIII,<br>Line 11d Other<br>Miscellaneous<br>Revenue | Vending Sale - Total Revenue 4146, Related or Exempt Function Revenue , Unrelated Business Revenue , Revenue Excluded from Tax Under Sections 512, 513, or 514 4146, Laundromat - Total Revenue 11936, Related or Exempt Function Revenue , Unrelated Business Revenue , Revenue Excluded from Tax Under Sections 512, 513, or 514 11936, Other Miscellaneous - Total Revenue 6259, Related or Exempt Function Revenue , Unrelated Business Revenue , Revenue Excluded from Tax Under Sections 512, 513, or 514 6259, |



| Return Reference   | Explanation   |
|--|---|
| Form 990, Part XI, Line 9 Other changes in net assets or fund balances | Change in FMV of Charitable Remainder Trust - 6524, |