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DLN: 93493146002136

Form 990

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public

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

OMB No 1545-0047

Open to Public Inspection

A Fo	r the	2014 ca	lendar year, or tax year beg	inning 09-01-2014 , and ending 08-31-20	15			
B Ch	eck ıf a	pplicable	C Name of organization Young Men's Christian Associa	tion of the Greater Houston Area		D Emplo	oyer ide	ntification number
☐ Ad	dress ch	nange				74-1	10973	7
∏ Na	me cha	inge	Doing business as					
Ini	tıal retu	ırn		<u>_</u>		E Teleph	one num	ber
Fir		mınated	Number and street (or P O bo 2600 North Loop West	ox if mail is not delivered to street address) Room/s	suite			
	nended		City on town state or province	and 7TD or foreign postel and)659-5	300
		return 1 pending	Houston, TX 77092	e, country, and ZIP or foreign postal code		G Gross	receipts	172,527,555
,			F Name and address o	of principal officer	11/-> * .			_
			Paul E McEntire	or principal officer		:his a group ordinates?		for
			2600 North Loop West Houston, TX 77092					
			110031011,1777732			all subord luded?	ınates	Γ Y es Γ No
I Ta	ıx-exem	npt status	501(c)(3) 501(c) () ◀ (insert no)			n a list	(see instructions)
J W	ebsite	e: ► ww	w ymcahouston org		H(c) Gro	oup exemp	tion nur	mber ►
K For	m of or	ganization	Corporation Trust Ass	ociation Other ►	L Year of	formation 1	886 M	State of legal domicile TX
	rt I		nmary		- 1001 01			otate of logar dollinois 17
Activities & Governance	'	The YM	CA of the Greater Houston A	nission or most significant activities Area is a Christian fellowship dedicated to opment and social responsibility	improving qu	ality of life	through	n programs which
¥eII	2	 Check t	his box 🕶 if the organizati	on discontinued its operations or disposed	of more than	25% of its	s net as	sets
ទី	-							
න් ග	1			overning body (Part VI, line 1a)			3	54
ЩE	1			bers of the governing body (Part VI, line 1b			4	54
ਓ				ed in calendar year 2014 (Part V, line 2a)			5	7,394
⋖	1			te if necessary)			6	18,245
				om Part VIII, column (C), line 12 ome from Form 990-T, line 34			7a 7b	
	"	ivet uiii e	erated business taxable mice	ine nom roth 990-1, the 34		ior Year	<u> </u>	Current Year
	8	Contr	abutions and grants (Part VI	II, line 1h)		13,631,	.547	15,636,768
횰	9			III, line 2g)		101,986,967		109,139,624
Revenue	10			olumn (A), lines 3, 4, and 7d)		259,		2,565,149
益	11	Other	revenue (Part VIII, columr	n (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		241,	,642	503,582
	12			jh 11 (must equal Part VIII, column (A), lii	ne	116,119,	607	127,845,123
	13			(Part IX, column (A), lines 1–3)		2,368,		4,250,567
	14			Part IX, column (A), line 4)		2,300,	0	4,230,307
	15		·	ployee benefits (Part IX, column (A), lines		64.120	201	
8		5-10		, , , , , , , , , , , , , , , , , , , ,		64,129,	,801	66,383,821
Expenses	16a			rt IX, column (A), line 11e)			0	С
ਡੌ	Ь	Total f	undraısıng expenses (Part IX, colur	mn (D), line 25) • 2,298,481				
	17	Other	expenses (Part IX, column	(A), lines 11a-11d, 11f-24e)		50,819,	,358	53,033,381
	18	Total	expenses Add lines 13-17	(must equal Part IX, column (A), line 25)		117,318,	,023	123,667,769
	19	Rever	nue less expenses Subtract	line 18 from line 12		-1,198,	,416	4,177,354
Not Assets or Fund Balances					Beginni	ng of Curre Year	ent	End of Year
SS et al	20	Total	assets (Part X, line 16) .			311,391,	,236	307,000,207
A B	21	Total	liabilities (Part X, line 26)			161,367,	,416	154,667,737
žZ	22	Neta	ssets or fund balances Sub	tract line 21 from line 20		150,023,	,820	152,332,470
Pa	rt II	Sigr	nature Block					
my k	nowled arer ha	dge and as any k		re examined this return, including accompa d complete Declaration of preparer (other	than officer) i			
		Тур	e or print name and title					
			Prınt/Type preparer's name Jody Blazek	Preparer's signature Jody Blazek		heck 🔽 if	PTIN P00072	 2674
Pai			Firm's name Blazek & Vetterli			elf-employed ım's EIN 🟲 7		
Pre	pare	I .	Fırm's address ► 2900 Weslayan S	Ste 200	PI	hone no (71	3) 439-5	739

Houston, TX 77027

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

✓ Yes ☐ No

Form	990 (2014)					Page 2
Par		nt of Program Serv chedule O contains a res			II	
1	Briefly describe t	he organization's missio	n			
	the mission of the \and body for all Se		n to put Judeo-	-Christian principles int	o practice through programs th	at build a healthy spirit,
2		on undertake any signifi 0 or 990-EZ?			which were not listed on	┌ Yes ┌ No
	If "Yes," describe	these new services on S	Schedule O			
3	services?	on cease conducting, or			nducts, any program	┌ Yes ┌ No
4	expenses Section		4) organization	s are required to report	ee largest program services, as the amount of grants and alloca	
4a	(Code) (Expenses \$	66,595,568	ıncludıng grants of \$) (Revenue \$	64,495,941)
		RTICIPANTS 388,831 FACILIT S \$3,735,025 SEE SCHEDULE			TON AREA ASSISTANCE PROVIDED TO	PARTICIPANTS IN THE FORM
4b	(Code) (Expenses \$	28,592,238	ıncludıng grants of \$) (Revenue \$	34,179,337)
	(Adventure Guides, I		Home, and other	family events), YMCA Swim,	rly Childhood, Infant Care and Middle Sports & Play (Aquatics, Youth Sports additional information	
4 c	(Code) (Expenses \$	11,297,027		4,250,567) (Revenue \$	10,464,346)
	ACTIVITIES, SUMMER OLDER ADULTS, YMO	R PROGRAMS, CORE PRÓGRA	MS, AND SOCIAL S CA EMPLOYMENT I	SERVICE PROGRAMS), YMCA I DEVELOPMENT AND TRAINING	TY CENTERS (AFTERSCHOOL PROGRA RESIDENCES, YMCA INTERNATIONAL S G, AND YMCA OPERATION BACKPACK formation	SERVICES, YMCA ACTIVE
4d	Other program s	ervices (Describe in Sch	redule O)			

) (Revenue \$

including grants of \$

106,484,833

(Expenses \$

Total program service expenses ►

Part TV	Chec	klist 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 $A^{\bullet \bullet}$	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? *	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		Νo
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i> complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt[3]{2}$	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.*	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X^{\bullet}	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section 170 (b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t 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? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <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? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νo
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			1
_		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	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? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <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? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <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? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

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	<u> </u>	<u> </u>	厂_
4 -	5-h		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 74 Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
Ī	gaming (gambling) winnings to prize winners?	1 c	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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		105	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Νo
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Νo
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6a		No
U	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
_	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
_	contract?	7e		Νo
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a			
	Form 1098-C?	7h		
0	Did a donor advised fund maintaining donor advised runds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states			
_	In which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand	 		N -
	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b		No

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.

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?.	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	avani	ie Cod	<u> </u>
	section Bit one to the section B requests in ormation about poweres mot required by the internal K	CVCIIL	ic cou	<u> </u>
	The section B requests who interest about powers hot required by the Internal in	event	Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		
10a			Yes	
10a b	Did the organization have local chapters, branches, or affiliates?	10a	Yes Yes	
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes Yes Yes	
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes Yes Yes	
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes Yes Yes	
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes Yes Yes Yes	
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes Yes Yes	
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10a 10b 11a 12a 12b	Yes Yes Yes Yes Yes Yes	
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes Yes	
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes Yes	
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes Yes	
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes	
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes	
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	10a 10b 11a 12a 12b 12c 13 14	Yes	No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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?	10a 10b 11a 12a 12b 12c 13 14	Yes	No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization intoest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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	10a 10b 11a 12a 12b 12c 13 14 15a 15b	Yes	No

Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply

Own website Another's website V Upon request Other (explain in Schedule O)

- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records ►Karen Sawyer

Form 990 (2014)	
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Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

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

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

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

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

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

(A) Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					1	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustée or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations

1b	Sub-Total	►			
C	Total from continuation sheets to Part VII, Section A	•			
d	Total (add lines 1b and 1c)	P	2,476,626	0	382,802

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization►25

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
Sehgal & Sons Enterprises Inc 10501 Corporate Dr Stafford, TX 77477	Janıtonal	1,642,608
American Janitorial Serv Ltd 2951 Marina Bay Ste 130 League City, TX 77573	Janıtonal	1,009,133
Brookstone Corporation 3715 Dacoma St Houston, TX 77092	Construction	652,594
US Lawns of North Houston 6106 Theall Rd Houston, TX 77066	Grounds maintenance	501,445
Hancock Pool Services PO Box 670345 Houston, TX 77267	Grounds maintenance/Facility Repair	475,220
2 Total number of independent contractors (including but not limited to th	ose listed above) who received more than	

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶28

Part V		Statement of Check if Sched	
	1a	Federated cam	paigns
Contributions, Giffs, Grants and Other Similar Amount	ь	Membership di	ies
, Gr	С	Fundraising ev	ents
Siffs lar /	d	Related organi	zations
ıs, (е	Government grant	ts (contributions)
ution er S	f	All other contributi similar amounts n	
를 돌	g	Noncash contribut 1a-1f \$	ions included in li
Com	h	Total. Add line	s 1 a - 1 f
veriu	2a	Membership Reve	
<u>8</u>	Ь	Childcare Revenue Infant/Toddler/Pre	
Š	C	Day Camp Reven	
32	d	Childran Payanu	
rogram Service Revenue	e f	All other progr	
Š	g	Total. Add line	s 2a-2f . .
	3	Investment ind	
	4	and other simil	
	5	Royalties .	
			(ı) Real
	6a b	Gross rents Less rental	
	c	expenses Rental income	
	d	or (loss) Net rental inco	me or (loss)
	"	ivee remedi inco	(ı) Securit
	7a	Gross amount from sales of	43,1
		assets other than inventory	
	Ь	Less cost or other basis and sales expenses	43,1
	С	Gain or (loss)	-
	d	Net gain or (lo	ss)
Φ	8a	Gross income events (not inc	
m He		\$628 of contribution	3,516 s. reported on
Other Revenue		See Part IV, III	•
her	ь	Less direct ex	penses .
ŏ	С	Net income or	(loss) from fui
	9a	Gross income See Part IV, lii	
	Ь		
	c	Less direct ex Net income or	•
	10a	Gross sales of	ınventory, les
		returns and all	owances .
	b	Less cost of g	oods sold .
	С	Net income or	
	11a	Miscellaneou Rebates/other	s Revenue
	ь	Acpates/other	
	С		
	d	All other reven	ue
	е	Total. Add line	s 11a-11d
	12	Total revenue.	See Instructi

014)						Page 9
Statement o	o f Revenue ule O contains a respor	ise or note to any li	ne in this Part V/III	_		
CHECK II SCHECH	aic o contants a respor	ise of note to any III	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Federated cam	paigns 1a	2,910,085				
Membership du	ıes 1b					
Fundraising eve		628,516				
		373,302				
Related organiz						
Government grant		<u>521,255</u>				ļ
All other contribution similar amounts no	ons, gifts, grants, and 1f ot included above	11,203,610				
Noncash contribution	ons included in lines			İ	į	į
Total. Add lines	s 1a-1f		15,636,768			
		Business Code				
Membership Revei	nue	813410	61,489,123	61,489,123		
Childcare Revenue		813410	19,024,068	19,024,068		
Infant/Toddler/Pre						
Day Camp Revenu		813410	7,137,217	7,137,217		
Resident Camp Re		813410	1,603,235	1,603,235		
All other progra	am service revenue	813410	607,042	607,042		0
			19,278,939	19,278,939	0	0
Total. Add lines		<u> ►</u>	109,139,624			
Investment inc	ome (including dividen ar amounts)	ds, interest, ►	2,152,060			2,152,060
	stment of tax-exempt bond	proceeds 🕨 🕨				
Royalties		🕨	5,474			5,474
C	(ı) Real	(II) Personal				
Gross rents Less rental						
expenses Rental income	0	0				
or (loss)	-					
Net rental inco	me or (loss)	-				
Gross amount from sales of assets other than inventory	(1) Securities 43,127,122	(II) O ther 1,347,907				
Less cost or other basis and	43,160,436	901,504				
sales expenses Gaın or (loss)	-33,314	446,403				
Net gain or (los			413,089			413,089
	from fundraising					
*	s,516 s reported on line 1c)	4 225 224				
Less directex	penses b	1,026,204 620,492				
	(loss) from fundraising	,	405,712			405,712
Gross income f See Part IV, lin	from gaming activities ne 19 a					
Less direct ex	penses b					
Net income or ((loss) from gamıng acti	vities				
Gross sales of returns and allo						
	oods sold b (loss) from sales of inv	entory				
Miscellaneous	s Revenue	Business Code				
Rebates/other		900099	92,396			92,396
A.II			2		2	
All other reven Total. Add lines			0	0	0	0
		• • • •	92,396			
lotal revenue.	See Instructions .	•	127,845,123	109,139,624	0	3,068,731
					F	orm 990 (2014)

Part IX Statement of Functional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must complete all columns Al Check if Schedule O contains a response or note to any line in this				
	ot include amounts reported on lines 6b, p, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21				
2	Grants and other assistance to domestic individuals See Part IV, line 22	4,250,567	4,250,567		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	0	0		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	2,138,187	1,838,841	256,582	42,764
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	53,025,295	46,052,806	5,764,461	1,208,028
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	3,205,830	2,746,249	382,952	76,629
9	Other employee benefits	3,205,561	2,066,050	995,012	144,499
10	Payroll taxes	4,808,948	4,175,196	532,806	100,946
11	Fees for services (non-employees)				
а	Management				
b	Legal	198,105		198,105	
c	Accounting	88,215		88,215	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	239,581		239,581	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	4,262,085	2,834,041	1,067,886	360,158
12	Advertising and promotion	1,089,680	1,043,272	41,528	4,880
13	Office expenses	7,916,536	5,899,540	1,874,680	142,316
14	Information technology	1,991,031	987,932	927,932	75,167
15	Royalties				
16	Occupancy	15,905,518	15,407,586	453,284	44,648
17	Travel	2,091,596	1,784,449	253,323	53,824
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	383,525	6,742	370,453	6,330
20	Interest	5,031,645	4,588,860	442,785	
21	Payments to affiliates	420,199	0	420,199	0
22	Depreciation, depletion, and amortization	10,044,877	9,844,805	179,982	20,090
23	Insurance				
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	Equipment rental & maintenance	1,086,435	1,024,056	62,379	
b	Refugee job placement expenses	678,895	678,895		
c	Camp and other program expense	823,931	823,931		
d	Professional development	449,646	303,528	140,982	5,136
e	All other expenses	331,881	127,487	191,328	13,066
25	Total functional expenses. Add lines 1 through 24e	123,667,769	106,484,833	14,884,455	2,298,481
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Form 990 (2014)

Part X Balance Sheet

Par	t X	Balance Sheet Check if Schedule O contains a response or note to any line i	n this l	Part X			
	_				(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			117,450	1	191,290
	2	Savings and temporary cash investments			5,371,472	2	7,421,999
	3	Pledges and grants receivable, net			4,876,055	3	4,776,985
	4	Accounts receivable, net			1,129,529	4	1,556,223
	5	Loans and other receivables from current and former officers employees, and highest compensated employees Complete Schedule L	Part II	of	0	5	0
Assets	6	Loans and other receivables from other disqualified persons $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, an and sponsoring organizations of section $501(c)(9)$ voluntary organizations (see instructions) Complete Part II of Schedul	d contr emplo	ibuting employers	0		
- 8 8 1	7	Notes and loans receivable, net				7	
4	8	Inventories for sale or use				 8	
	9	Prepaid expenses and deferred charges			946.002	9	747,524
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	341,752,060			<u>'</u>
	ь	Less accumulated depreciation	10b	107,865,549	235,734,736	10 c	233,886,511
	11	Investments—publicly traded securities			52,351,406	11	52,749,453
	12	Investments—other securities See Part IV, line 11		•	0	12	
	13	Investments—program-related See Part IV, line 11			0	13	
	14	Intangible assets		•		14	
	15	Other assets See Part IV, line 11			10,864,586	15	5,670,222
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			311,391,236	16	307,000,207
	17	Accounts payable and accrued expenses			5,495,941	17	5,724,779
	18	Grants payable				18	
	19	Deferred revenue			2,844,450	19	2,958,046
	20	Tax-exempt bond liabilities			152,309,870	20	145,068,498
S I	21	Escrow or custodial account liability Complete Part IV of Sc	hedule	D		21	
Liabilitie	22	Loans and other payables to current and former officers, dire key employees, highest compensated employees, and disqua		rustees,			
<u> </u>		persons Complete Part II of Schedule L			0	22	
	23	Secured mortgages and notes payable to unrelated third part	ies .		0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	5.		0	24	0
	25	Other liabilities (including federal income tax, payables to re and other liabilities not included on lines 17-24) Complete ID	art X		717,155	25	916,414
	26	Total liabilities. Add lines 17 through 25			161,367,416	26	154,667,737
نخ		Organizations that follow SFAS 117 (ASC 958), check here					
ا إ		lines 27 through 29, and lines 33 and 34.					
101	27	Unrestricted net assets			146,349,361	27	148,900,086
Fund Balance	28	Temporarily restricted net assets			3,674,459	28	3,432,384
	29	Permanently restricted net assets		<u> </u>		29	
or FL		Organizations that do not follow SFAS 117 (ASC 958), check complete lines 30 through 34.		-			
<u>₽</u>	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment func				31	
۲ ۲	32	Retained earnings, endowment, accumulated income, or othe	r tunds		450 000 000	32	450,000,475
Net	33	Total net assets or fund balances			150,023,820	33	152,332,470
	34	Total liabilities and net assets/fund balances			311,391,236	34	307,000,207
							Form 990 (2014)

Par	t XI Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		127,8	345,123
2	Total expenses (must equal Part IX, column (A), line 25)	2		123,6	67,769
3	Revenue less expenses Subtract line 2 from line 1	3		4,1	.77,354
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) \cdot .	4		150,0	23,820
5	Net unrealized gains (losses) on investments	5		-1,6	571,730
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		- 1	.96,974
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		152,3	332,470
Par	t XII Financial Statements and Reporting	<u> </u>			
	Check if Schedule O contains a response or note to any line in this Part XII				. \sqsubset
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revial separate basis, consolidated basis, or both	ewed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepbasis, consolidated basis, or both	arate			
	☐ Separate basis ☐ Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversign audit, review, or compilation of its financial statements and selection of an independent accountant?	ght of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	ın			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in t Single Audit Act and OMB Circular A-133?	he	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	Yes	

Software ID: 14000329 **Software Version:** 2014v1.0

EIN: 74-1109737

Name: Young Men's Christian Association of the Greater

Houston Area

(A) Name and Title	(B) A verage	Posit	tion ((D) Reportable	(E) Reportable	(F) Estimated amount
	hours per week (list	more ti perso	han o	ne b	ox, u	nless	i	compensation from the	compensation from related	of other compensation
	any hours for related	and a		ctor	/trus	tee)		organization (W- 2/1099-MISC)	organizations (W- 2/1099-MISC)	from the
	organizations	일	la s	Office	조 ()	ener Haria	Former	2/1099-M13C)	2/1099-M13C)	organization and related
	below dotted line)		1	ğ	emp		重			organizations
		Individual trustee or director	Dial I		Key employee	603				
		S S S S S S S S S S S S S S S S S S S	Institutional Trustee		Φ	pens				
			ě			Highest compensated employee				
(1) Byrd Larberg	1 00	, , , , , , , , , , , , , , , , , , ,		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		_				
Chairman		Х		Х				0	0	0
(1) Carlos Valdez	1 00	х		х				0	0	0
Chair Elect (2) Gerri D Ayers	1 00							_		
Director		Х						0	0	0
(3) Dr Ann Barnes	1 00	x						0	0	0
Director (4) John C Bass	1 00									
Director		Х						0	0	0
(5) Dan Bellow	1 00	х						0	0	0
Director (6) Alan Bergeron	1 00									
Director		X						0	0	0
(7) Theresa Chang	1 00	x						0	0	0
Director (8) Charles E Comisky	1 00								_	
Director		х						0	0	0
(9) Judy D Cox Sohn	1 00	х						0	0	0
Director (10) Greg Curran	1 00							Ů		Ů
Director		х						0	0	0
(11) Jennifer Davenport	1 00	x						0	0	0
Director (12) Matthew Pool	1.00							Ů	0	Ů
(12) Matthew Deal Director	1 00	x						0	0	0
(13) Leo DeLeon	1 00	<u> </u>								
Director		Х						0	0	0
(14) W Ashley Edens	1 00	x						0	0	0
Director (15) Larry Ellis	1 00									
Director		Х						0	0	0
(16) Steve Erickson	1 00	x						0	0	0
Director (17) Stephen R Fetterman	1 00									
Director		Х						0	0	0
(18) Elvin Franklin	1 00	Х						0	0	0
Director (19) Robert R Fretz	1 00									
Director		x						0	0	0
(20) Barnett L Gershen	1 00	х						0	0	0
Director (21) Rey Gonzales	1 00								_	_
Director		x						0	0	0
(22) Joel Harmon	1 00	x						0	0	0
Director	1.00	<u> </u>	<u> </u>					ı .		
(23) Ed Jones Director	1 00	x						0	0	0
(24) Rick Kehr	1 00	\ \ \								_
Director		X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (A) (B) (C) (D) (E) (F) Reportable Name and Title Position (do not check Average Reportable Estimated amount hours per more than one box, unless compensation compensation of other person is both an officer from the week (list from related compensation organization (Wany hours and a director/trustee) organizations (Wfrom the for related 2/1099-MISC) 2/1099-MISC) organization and Individual or dilector Former <u>9</u> Highest compensated employee organizations related Institutional below organizations employee dotted line) trustee d Trustee (26) Lee A Lehourcade 1 00 Х 0 0 0 Director (1) Mark S Leonard 1 00 Χ 0 0 Director (2) David Ley 1 00 Х 0 Director (3) Khambrel Marshall 1 00 Х 0 0 Λ Director (4) Alyse McCracken 1 00 Χ 0 0 0 (5) Robert E McFadden 1 00 0 0 0 Х Director (6) Dr Leonard Merrell 1 00 Χ 0 0 0 Director (7) Albert Myres 1 00 Χ 0 0 Director (8) Dr Rick Ngo 1 00 0 0 Х Ω Director (9) Tommy M Parker 1 00 Χ 0 Director (10) Harry J Phillips Jr 1 00 Χ 0 0 0 (11) Michael J Plank 1 00 0 0 0 Χ Director (12) Edward Randall IV 1 00 Χ Director (13) Terry W Rathert 1 00 0 0 0 Х Director (14) John Rolfe 1 00 Χ 0 0 Director (15) Cyndy Garza Roberts 1 00 Χ 0 0 0 Director (16) Joe Rothbauer 1 00 Х 0 0 0 Director (17) Jim Schier 1 00 Χ 0 0 (18) Richard Schissler III 1 00 0 0 0 Х Director 1 00 (19) Beth Shea 1 00 Χ 0 0 (20) Thomas M Simmons 1 00 Χ 0 0 Director (21) Anne Taylor 1 00 Χ 0 0 0 Director (22) Tadd Tellepsen 1 00 Χ 0 0 (23) Paul G Van Wagenen 1 00 0 Х 0 0 Director (24) Barron F Wallace 1 00 0 0 Director

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

(A) Name and Title	hours per week (list person is both an officer any hours and a director/trustee) order			(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the organization and				
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Ke, emplojee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	related organizations
(51) Dr Marına Walne Dırector	1 00	х						o	0	0
(1) Marc Watts	1 00	x						0	0	0
Director										
(2) Willoughby C Williams Jr Director	1 00	×						0	0	0
(3) George C Yang PhD	1 00	х						0	0	0
Director										
(4) Clark D Baker	40 00			Х				569,854	0	59,199
President & CEO (5) Paul E McEntire	1 00 40 00									
	40 00			Х				299,119	0	40,893
Sr VP/COO (6) Samantha A Buckner	1 00 40 00									
Sr VP/CFO				Х				204,713	0	46,628
(7) Emmanuel C Silva	40 00			Х				52,929	0	5,220
Senior VP/CFO	1 00									
(8) David L Snow Sr VP/Assn Adv	40 00				х			224,965	0	39,175
(9) Kenneth G Harris	40 00									
VP Corp Svcs					Х			182,810	0	31,743
(10) Mary M Mossing	40 00									
VP Operations					Х			170,999	0	30,304
(11) Trazanna L Moreno	40 00					х		166,219	0	20,469
VP Marketing								100,213	ů	20,103
(12) Linda Falsone-Lykos	40 00					х		167,235	0	20,569
VP Fin Develop	40.00									
(13) Jennifer S Lopez VP Hum Resouces	40 00					×		164,092	0	31,761
(14) Stuart A Duke	40 00									
VP Facilities						х		136,898	0	28,438
(15) Brian S Haines	40 00							126 702	0	30.403
VP Operations						X		136,793	0	28,403

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SCHEDULE A

(Form 990 or 990EZ)

Internal Revenue Service

Department of the

Treasury

As Filed Data -

DLN: 93493146002136

OMB No 1545-0047

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.

Open to Public Inspection

Name of the organization Young Men's Christian Association of the Greater Houston Area

Employer identification number

74-1109737

Pai	rt I	Reason for Publi	c Charity S	Status (All organiza	tions must co	mplete this	part.) See instructio	ns.
The o	rganı	zation is not a private fo	oundation beca	auseıtıs (Forlines 1	through 11, ch	eck only one b	ox)	
1	\sqcap	A church, convention	of churches, o	r association of churc	hes described i	n section 170(b)(1)(A)(i).	
2	Γ	A school described in	section 170(b)(1)(A)(ii). (Attach S	chedule E)			
3	Γ	A hospital or a cooper	atıve hospıtal	service organization o	described in sec	tion 170(b)(1)(A)(iii).	
4	Γ	A medical research or	ganızatıon ope	erated in conjunction v	vith a hospital c	lescribed in se	ction 170(b)(1)(A)(iii). Enter the
		hospital's name, city,						
5	Г	An organization opera	ted for the ber	nefit of a college or uni	versity owned o	or operated by	a governmental unit d	escribed in
		section 170(b)(1)(A)((iv). (Complet	e Part II)				
6	Γ	A federal, state, or loc	al governmen	t or governmental unit	described in s e	ection 170(b)(1)(A)(v).	
7	~	An organization that n				om a governm	ental unit or from the g	eneral public
_	_	described in section 1	70(b)(1)(A)(<u>v</u>	vi). (Complete Part II)			
8	_	A community trust des						
9	ı	An organization that n						
		receipts from activitie						
		its support from gross						businesses
	_	acquired by the organi		•		•	•	
10	<u> </u>	An organization organi	•	•	•	•		
11		An organization organi						
		one or more publicly s the box in lines 11a th			•			
а	Г	Type I. A supporting o						
_	•	supported organization						
	_	organization You mus	t complete Pa	rt IV, Sections A and I	В.			
b	Г	Type II. A supporting	-	•				•
		management of the su			same persons t	hat control or	manage the supported	organization(s) You
c	\vdash	must complete Part IN Type III functionally i	•		n operated in c	onnection with	and functionally inter	arated with its
	ļ	supported organization						gracea with, its
d	\sqcap	Type III non-function						anızatıon(s) that ıs
		not functionally integra					ement and an attentiv	eness requirement
_	_	(see instructions) You					ic a Type I Type II T	una III functionally
е	'	Check this box if the o integrated, or Type III					is a Type I, Type II, T	ype III lunctionally
f		Enter the number of su						
g		Provide the following in						
_		_						
	(i)Na	ame of supported	(ii) EIN	(iii) Type of	(iv) Is the org	ganızatıon	(v) A mount of	(vi) A mount of
		organızatıon		organization	listed in your		monetary support	other support (see
				(described on lines	docume	ent?	(see instructions)	instructions)
				1-9 above or IRC section (see				
				instructions))				
				,	Yes	No		
								1
T								
Total								
						Cat No. 113	000	

instructions

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 (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do 23,064,934 22,345,282 15,397,765 13,631,547 15,636,768 90,076,296 not include any "unusual grants ") 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 23,064,934 22,345,282 15,397,765 13,631,547 15,636,768 90,076,296 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 186,919 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 89,889,377 from line 4 Section B. Total Support Calendar year (or fiscal year **(b)** 2011 (c) 2012 (d) 2013 **(e)** 2014 (a) 2010 (f) Total beginning in) 🟲 22,345,282 15,397,765 13,631,547 15,636,768 Amounts from line 4 23,064,934 90,076,296 Gross income from interest, dividends, payments received on 2,929,425 1,920,991 securities loans, rents, royalties 3,649,744 2,420,050 2,157,534 13,077,744 and income from similar sources 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 0 0 capital assets (Explain in Part VI) 11 Total support Add lines 7 103,154,040 through 10 12 Gross receipts from related activities, etc (see instructions) 477,336,567 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) 13 Section C. Computation of Public Support Percentage 14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f)) 14 87 14 % Public support percentage for 2013 Schedule A, Part II, line 14 15 85 54 % 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

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

Schedule A (Form 990 or 990-EZ) 2014 Page 3 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 (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11. and 12) 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 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) 15

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))

16 Public support percentage from 2013 Schedule A, Part III, line 15

Section D. Computation of Investment Income Percentage

17 Investment income percentage from 2014 (line 10c, column (f) divided by line 13, column (f))

18 Investment income percentage from 2013 Schedule A, Part III, line 17

18

19a 33 1/3% support tests—2014. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

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

Se	ection A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section $509(a)(1)$ or (2) ? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section $509(a)(1)$ or (2) .	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	За		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
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 $(2)^7$ If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If</i> "Yes," provide detail in Part VI .	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c		
L0a	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		
l1	Has the organization accepted a gift or contribution from any of the following persons?			
а	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

Pa	rt IV Supporting Organizations (continued)			
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.	2		
S	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
S	ection 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?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
S	ection 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 The organization satisfied the Activities Test Complete line 2 below The organization is the parent of each of its supported organizations. Complete line 3 below The organization supported a governmental entity. Describe in Part VI how you supported a government entity instructions.			
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3				
	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.	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each		1 1	

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

3b

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
ype	[]	II non-functionally integrated supporting organizations must complete Sections A through E

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

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

Section C - Distributable Amount

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

	Current Year
1	
2	
3	
4	
5	
6	

Section D - Distributions			Current Year
1 Amounts paid to supported organizations to accom	plish exempt purposes		
2 Amounts paid to perform activity that directly furthexcess of income from activity	ported organizations, in		
3 Administrative expenses paid to accomplish exemp	anızatıons		
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval rec	nured)		
6 Other distributions (describe in Part VI) See instru	JCTIONS		
7 Total annual distributions. Add lines 1 through 6			
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide	
9 Distributable amount for 2014 from Section C, line	6		
10 Line 8 amount divided by Line 9 amount			
		(::)	(:::)
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause requiredsee 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 pplied 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			

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 (Form 990 or 990-EZ) 2014

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OMB No 1545-0047

DLN: 93493146002136

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.

Open to Public Inspection

	of the organization		Employer identification number
oung P	Men's Christian Association of the Greater Houston Area		74-1109737
art			
	organization answered "Yes" to Form 990		(h) Finds and ather accounts
т.	the Laurence and of the same	(a) Donor advised funds	(b) Funds and other accounts
	otal number at end of year		
_	ggregate value of contributions to (during year)		
	ggregate value of grants from (during year) ggregate value at end of year		
fu	id the organization inform all donors and donor advisor nds are the organization's property, subject to the or	ganızatıon's exclusive legal control?	☐ Yes ☐ No
us c c	id the organization inform all grantees, donors, and do sed only for charitable purposes and not for the benef onferring impermissible private benefit?	it of the donor or donor advisor, or for an	y other purpose Yes No
rt I	Conservation Easements. Complete if	the organization answered "Yes" to	Form 990, Part IV, line 7.
P:	urpose(s) of conservation easements held by the organiser. Preservation of land for public use (e g , recreation Protection of natural habitat Preservation of open space	or education) Preservation of an	historically important land area ertified historic structure
	omplete lines 2a through 2d if the organization held a asement on the last day of the tax year	qualified conservation contribution in th	ne form of a conservation
		Γ	Held at the End of the Year
Т	otal number of conservation easements		2a
Т	otal acreage restricted by conservation easements		2b
N	umber of conservation easements on a certified histo	rıc structure ıncluded ın (a)	2c
	umber of conservation easements included in (c) acq storic structure listed in the National Register	uired after 8/17/06, and not on a	2d
N	umber of conservation easements modified, transferr	ed, released, extinguished, or terminated	d by the organization during
th	e tax year 🛌		
N	umber of states where property subject to conservati	on easement is located 🕨	
D	oes the organization have a written policy regarding to oforcement of the conservation easements it holds?		 ling of violations, and Yes No
St ►	taff and volunteer hours devoted to monitoring, insper	cting, and enforcing conservation easem	ents during the year
A : ► -	mount of expenses incurred in monitoring, inspecting \$, and enforcing conservation easements	during the year
D	oes each conservation easement reported on line 2(ond section 170(h)(4)(B)(ii)?	d) above satisfy the requirements of sect	tion 170(h)(4)(B)(i)
ba	n Part XIII, describe how the organization reports con alance sheet, and include, if applicable, the text of the se organization's accounting for conservation easeme	e footnote to the organization's financial	
rt I	Organizations Maintaining Collection Complete if the organization answered "Y		or Other Similar Assets.
W	the organization elected, as permitted under SFAS 1 orks of art, historical treasures, or other similar asseervice, provide, in Part XIII, the text of the footnote t	ts held for public exhibition, education, o	or research in furtherance of public
I f	the organization elected, as permitted under SFAS 1 orks of art, historical treasures, or other similar asseervice, provide the following amounts relating to these	16 (ASC 958), to report in its revenue s ts held for public exhibition, education, c	statement and balance sheet
(i	Revenue included in Form 990, Part VIII, line 1		► \$
(i	i) Assets included in Form 990, Part X		▶- \$
Ιf	the organization received or held works of art, histori llowing amounts required to be reported under SFAS		r financial gain, provide the
	evenue included in Form 990, Part VIII, line 1		► \$
Α:	ssets included in Form 990, Part X		► \$

Part	•••• Organizations Maintaining Co	llections of Art	<u>, His</u>	torical T	reas	<u>ures, or Ot</u>	<u>:her S</u>	<u>Similar As</u>	sets (co	ontinued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other recor	ds, ch	neck any of	the fo	llowing that a	re a sıç	nıfıcant use	of its	
а	Public exhibition		d	Loar	orex	change progra	ams			
b	Scholarly research		e	┌ Othe	er					
c	Preservation for future generations									
4	Provide a description of the organization's c Part XIII	ollections and expla	ın hov	w they furth	er the	organızatıon'	s exem	npt purpose (ın	
5	During the year, did the organization solicit	or receive donations	ofar	t, historica	l treas	ures or other	sımılaı	r		
	assets to be sold to raise funds rather than								☐ Yes	<u> </u>
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an ar					n answered	l "Yes'	to Form 9	990,	
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?	dian or other interme	diary	for contrib	utions	or other asse	ets not		┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XI $$	II and complete the	follov	ving table		_				
								An	nount	
C	Beginning balance						1c			
d	Additions during the year					<u> :</u>	1d			
e	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on F	orm 990, Part X, line	e 21,	for escrow	orcus	todial accoun	t lıabılı	ıty?	┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	II Check here if the	expla	anation has	been	provided in P	art XII	I		Γ
Pai	rt V Endowment Funds. Complete					•				
	·	(a)Current year		Prior year	b (c)	wo years back		e years back	(e) Four y	ears back
1a	Beginning of year balance	9,411,603		7,387,793		6,563,205		6,326,285		5,172,490
b	Contributions	38,307		1,050,093	3	131,748		28,030		679,715
C	Net investment earnings, gains, and losses	27,561		1,055,968	3	775,044		265,161		531,859
d	Grants or scholarships									
e	Other expenditures for facilities and programs	373,302		67,79		79,136		56,271		57,779
f	Administrative expenses	3,645		14,45	1	3,068				
g	End of year balance	9,100,524		9,411,603	3	7,387,793		6,563,205		6,326,285
2	Provide the estimated percentage of the cur	rent year end baland	e (lın	ie 1g, colur	mn (a))	held as				
а	Board designated or quasi-endowment 🕨	73 77 %								
b	Permanent endowment ► 15 07 %									
c	Temporarily restricted endowment ► 11 The percentages in lines 2a, 2b, and 2c sho	16 % uld equal 100%								
3a	Are there endowment funds not in the posse	ssion of the organiza	ation	that are he	ld and	admınıstered	for the	<u>:</u>		
	organization by								Yes	No
	(i) unrelated organizations							3a(<u> </u>
b	(ii) related organizations If "Yes" to $3a(II)$, are the related organization							3a(-	<u> </u>
4	Describe in Part XIII the intended uses of the	· · · · · · · · · · · · · · · · · · ·			•			31	1162	<u> </u>
	t VI Land, Buildings, and Equipme				n ans	wered 'Yes'	to Fo	rm 990. Pa	rt IV. lı	ne
	11a. See Form 990, Part X, line									
	Description of property			(a) Cost o basis (inves		(b) Cost or oth basis (other)) Accumulated depreciation	(d) Bo	ok value
1a	Land				0	26,328,	875		2	6,328,875
Ь	Buildings				0	192,681,	378	44,313,588	3 14	8,367,790
c I	Leasehold improvements				0	77,151,	992	32,569,429	<u> </u>	4,582,563
	Equipment				0	45,181,	745	30,982,532	2 1	4,199,213
e (Other				0	408,		()	408,070
	I. Add lines 1a through 1e <i>(Column (d) must e</i>		K, colu	ımn (B), lınd	e 10(c).	.)			23	3,886,511
	,	,	,	V 7/	1-7	•	<u> </u>	Schedule [•	

Part VII Investments—Other Securities. Com	plete if the organization	answered 'Yes' to Forn	n 990, Part IV, line 11b.
See Form 990, Part X, line 12. (a) Description of security or category (including name of security)	(b)Book value	(c) Method of va Cost or end-of-year r	
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	·		
Part VIII Investments—Program Related. Col	mplete if the organizatio	n answered 'Yes' to Fo	rm 990, Part IV, line 11c.
See Form 990, Part X, line 13. (a) Description of investment	(b) Book value	(c) Method of va	luation
	(2) 2001. Turus	Cost or end-of-year r	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. Complete if the organization	answered 'Yes' to Form 990	┛),Part IV,line 11d See F	orm 990, Part X, line 15
(a) Descrip			(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15	.)		
Part X Other Liabilities. Complete if the organ			ne 11e or 11f. See
Form 990, Part X, line 25.			
1 (a) Description of liability	(b) Book value		
Federal income taxes			
Derivative agreements	394,585		
Due to Endowment Foundation	500,150		
Funds held in trust	21,679		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶	916,414		

financial statements

Par	EXI		evenue per Audited Financial Sta rered 'Yes' to Form 990, Part IV, line			ts with Revenue	per ĸ	leturn Complete if
1	Tota		r support per audited financial statements				1	125,626,378
2	A mo	unts included on line 1 but	t not on Form 990, Part VIII, line 12					
а	Netι	unrealized gains (losses) d	on investments	2a	,	-1,671,730		
ь	Dona	ated services and use of fa	cilities	2b	,			
c	Reco	veries of prior year grants		20	:		1	
d	Othe	er (Describe in Part XIII)		2d	1	65,868	1	
e	Add	lines 2a through 2d .		. —			2e	-1,605,862
3	Subt	ract line 2e from line 1 .					3	127,232,240
4	A mo	unts included on Form 990), Part VIII, line 12, but not on line 1					
а	Inve	stment expenses not inclu	ided on Form 990, Part VIII, line 7b .	4a	,	239,581		
b	Othe	er (Describe in Part XIII)		4b	,	373,302		
c	Add	lines 4a and 4b		-			4c	612,883
5	Tota	l revenue Add lines 3 and	4c. (This must equal Form 990, Part I, line	e 12]) .		5	127,845,123
Part	XII		kpenses per Audited Financial St swered 'Yes' to Form 990, Part IV, lin			nts With Expense	s per	Return. Complete
1	Tota	l expenses and losses per	audited financial statements				1	123,431,833
2	A mo	unts included on line 1 but	not on Form 990, Part IX, line 25					
а	Dona	ated services and use of fa	cilities	. 2	2a		1	
b	Prior	year adjustments		2	2b		1	
С	Othe	rlosses		2	2c		1	
d	Othe	r (Describe in Part XIII)		2	2d	376,947	1	
e		-					2e	376,947
3	Subt	ract line 2e from line 1 .			•		3	123,054,886
4	A mo	unts included on Form 990), Part IX, line 25, but not on line 1:					
а		·	ided on Form 990, Part VIII, line 7b .	. 🔼	la	239,581	-	
b	Othe	r (Describe in Part XIII)		4	lb	373,302	1	
C		lines 4a and 4b					4c	612,883
5			d 4c. (This must equal Form 990, Part I, li	ne 18	3)		5	123,667,769
		Supplemental Inf						
Part		4, Part X, line 2, Part XI,	Part II, lines 3, 5, and 9, Part III, lines 1a lines 2d and 4b, and Part XII, lines 2d and					de any additional
	R	eturn Reference	Explanation					
		Part V , Line 4 Intended wment funds	THE ENDOWMENT FUNDS ARE HELD FOR SUPPORT TO THE CHARITABLE AND E GREATER HOUSTON AREA					
Schedule D, Part XI, Line 2(d) Other revenues in audited financial statements not in form 990		audited financial	Revenue - YMCA Endowment - 65868					
Schedule D, Part XI, Line 4(b) Other revenues in form 990 not in audited financial statements		Part XI, Line 4(b) O ther form 990 not in audited	Grant from Endowment - 373302					
			Expenses - YMCA Endowment - 376947					
Sched	ule D,	Part XII, Line 4(b) Other form 990 not in audited	Grant from Endowment - 373302					

Jenedale 2 (1 31111 33 3) 23 13		r age 3		
Part XIII Supplemental Information	on (continued)			
Return Reference	Explanation			
l				
-				

Schedule D (Form 990) 2014

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DLN: 93493146002136

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

SCHEDULE G

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.

Open to Public Inspection

ame of the organization oung Men's Christian Association of the Greater Houston Area						Employer identification number			
dung Men's Christian Associat	ion of the Greater At	Juston Are	:a		74-1109737				
art I Fundraising Activ			janızatıo	n answered "Yes" to	Form 990, Part IV,	line 17. Form 990-EZ			
Indicate whether the organ	ızatıon raısed funds	through a	ny of the 1	following activities Che	eck all that apply				
a Mail solicitations			e	Solicitation of non	-government grants				
b Γ Internet and email soli	cıtatıons		f	Solicitation of gov	ernment grants				
c Phone solicitations			g	☐ Special fundraisin	g events				
d In-person solicitations	;								
a Did the organization have a or key employees listed in						Γ Yes Γ No			
b If "Yes," list the ten highes to be compensated at least			fundraıse	rs) pursuant to agreem	ents under which the fu	ndraiser is			
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundrai cust cont	Did ser have ody or rol of outions?	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization			
		Yes	No						
1									
2									
-									
3									
4									
'									
5									
6									
7									
8									
0									
9									
0									
otal			<u>▶</u>						
List all states in which the registration or licensing	organization is regis	tered or lı	censed to	solicit contributions o	r has been notified it is	exempt from			

		G (Form 990 or 990-EZ) 2014				Page 2		
Pa	rt II	Fundraising Events. Commore than \$15,000 of fundrevents with gross receipts g	aising event contribut					
		evente mai gross receipte g	(a) Event #1	(b) Event #2	(c) O ther events	(d) Total events (add col (a) through		
			Turkey Dashh (event type)	Run Thru Woods (event type)	(total number)	col (c))		
₽	1	Gross receipts	305,249	270,892	1,078,579	1,654,720		
Revenue	2	Less Contributions	204,014	149,415	275,087	628,516		
<u>~</u>	3	Gross income (line 1 minus line 2)	101,235	121,477	803,492	1,026,204		
	4	Cash prizes		450	775	1,225		
(0	5	Noncash prizes		1,687	1,725	3,412		
Expenses	6	Rent/facility costs			48,695	48,695		
ă ă	7	Food and beverages .	377	,	31,449	31,826		
Direct -	8	Entertainment		2,100	9,772	11,872		
Δ	9	Other direct expenses .	96,927	116,763	309,772	523,462		
	10	Direct expense summary Add lir	nes 4 through 9 ın column	(d)		(620,492)		
	11	Net income summary Subtract li			•	405,712		
Par	t II			"Yes" to Form 990, Pa	art IV, line 19, or repo			
Revenue		\$15,000 on Form 990-EZ, li	ne 6a. (a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))		
Rey	1	Gross revenue				(-7)		
- ses	2	Cash prizes						
sesued	3	Non-cash prizes						
Direct B	4	Rent/facility costs						
ے	5	Other direct expenses						
	6	Volunteer labor	┌ Yes	☐ Yes	Г Yes			
	7	Direct expense summary Add line	s 2 through 5 ın column (d)				
	8	Net gaming income summary Subt	tract line 7 from line 1, co	olumn (d)	🛌			
9 a b	Enter the state(s) in which the organization conducts gaming activities Is the organization licensed to conduct gaming activities in each of these states?							
10a b	Wei	re any of the organization's gaming Yes," explain	licenses revoked, susper	nded or terminated during	; the tax year?			

Sche	edule G (Form 990 or 990-EZ) 2014				Page 3			
11	Does the organization conduct gaming	activities with nonn	members?	┌ Yes 「	No No			
12	Is the organization a grantor, beneficia	ry or trustee of a tru	ust or a member of a partnership or other entity					
	formed to administer charitable gaming	۱۶		Г _{Yes} Г	— No			
13	Indicate the percentage of gaming acti		1 1	,				
а	The organization's facility		13a		%			
b	An outside facility				%			
14	Enter the name and address of the pers	on who prepares th	ne organization's gaming/special events books and records					
	Name ▶							
	Address ►							
15a	Does the organization have a contract	with a third party fro	om whom the organization receives gaming					
				┌ Yes 「	— _{No}			
b	If "Yes," enter the amount of gaming re amount of gaming revenue retained by	· ·	the organization > \$ and the					
c	If "Yes," enter name and address of the third party							
	Name 🟲							
	Address 🏲							
16	Gaming manager information							
	Name 🟲							
	Gaming manager compensation 🕨 \$							
	Description of services provided							
	Director/officer	_ Employee	☐ Independent contractor					
17	Mandatory distributions							
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to							
	retain the state gaming license?							
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent							
	ın the organızatıon's own exempt actıvı		·					
Pa			explanations required by Part I, line 2b, columns (iii) 17b, as applicable. Also provide any additional inforr					
	Return Reference		Explanation					

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493146002136 OMB No 1545-0047 Schedule I Grants and Other Assistance to Organizations, (Form 990) 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. Open to Public Department of the Treasury **Inspection** Internal Revenue Service Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization Employer identification number Young Men's Christian Association of the Greater Houston Area 74-1109737 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and √ Yes Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States 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. (c) IRC section (a) Name and address of **(b)** EIN (d) Amount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization ıf applıcable valuation non-cash assistance or assistance grant cash or government assistance (book, FMV, appraisal, other)

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

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) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) REFUGEE ASSISTANCE	17944	4,250,567			

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 Description Of Procedure For Monitoring Use Of Grant Funds	Monitoring of Refugee Assistance Direct assistance to International Refugees takes two forms, direct payments to vendors, primarily expenses related to housing, and cash assistance which is meant for all other living expenses. Clients are counseled on the use of these funds and agree not to access public cash assistance during the program period. Governmental agencies awarding these grants conduct periodic program and financial audits of the YMCA to ensure funds are being used according to the terms of the grant. Monitoring of Fee Reductions. Because the demand for financial assistance is great, the YMCA must follow eligibility guidelines. Scholarships are awarded on a first come, first served basis, subject to available resources. Applicants are asked to pay some portion of the fees. If acceptable, a volunteer work program will be arranged. Applicants must complete a Financial Assistance Information form and are required to provide proof of income. Subsidies will be granted to the extent that funds are available. Financial assistance is reviewed for eligibility annually for YMCA programs. The YMCA monitors the use of subsidies by tracking the applicant's attendance in the program and their participation in bearing a portion of the cost. Additionally, the Senior Compliance Auditor conducts periodic audits to ensure compliance with YMCA policy in the distribution and monitoring of scholarships.				
Schedule I, Part I	Part III, Line 1 - Additional Assistance to Individuals The YMCA also provides assistance to individuals in the form of reductions in the amount of fees charged to participate in programs. Please see below for information regarding such assistance grouped by program. Healthy Living. 106,713 recipients, \$3,735,025 in assistance Youth Development. 66,577 recipients, \$2,995,974 in assistance Social Responsibility. 125,421 recipients, \$3,905,889 in assistance.				
Schedule I, Part I, Line 2 Procedures for monitoring use of grant funds	Monitoring of Refugee Assistance Direct assistance to International Refugees takes two forms, direct payments to vendors, primarily expenses related to housing, and cash assistance which is meant for all other living expenses. Clients are counseled on the use of these funds and agree not to access public cash assistance during the program period. Governmental agencies awarding these grants conduct periodic program and financial audits of the YMCA to ensure funds are being used according to the terms of the grant. Monitoring of Fee Reductions. Because the demand for financial assistance is great, the YMCA must follow eligibility guidelines. Scholarships are awarded on a first come, first served basis, subject to available resources. Applicants are asked to pay some portion of the fees. If acceptable, a volunteer work program will be arranged. Applicants must complete a Financial Assistance Information form and are required to provide proof of income. Subsidies will be granted to the extent that funds are available. Financial assistance is reviewed for eligibility annually for YMCA programs. The YMCA monitors the use of subsidies by tracking the applicant's attendance in the program and their participation in bearing a portion of the cost. Additionally, the Senior Compliance Auditor conducts periodic audits to ensure compliance with YMCA policy in the distribution and monitoring of scholarships.				

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DLN: 93493146002136

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

Compensation Information

► 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.

Open to Public Inspection

Internal Revenue Service Name of the organization **Employer identification number** Young Men's Christian Association of the Greater Houston Area 74-1109737 Part I Ouestions Regarding Compensation

	Questions Regarding compensation		Yes	No No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	□ Travel for companions □ Payments for business use of personal residence			
	Tax idemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
	Compensation committee Written employment contract			
	✓ Independent compensation consultant ✓ Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
а	Receive a severance payment or change-of-control payment?			
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?			
c	Participate in, or receive payment from, an equity-based compensation arrangement?			No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	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			
а	The organization?	5a		No
b	Any related organization?	5b		No
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line $1a$, did the organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a		Νo
b	Any related organization?	6b		Νο
	If "Yes," to line 6a or 6b, describe in Part III			
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		Νo
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		
Ear D	Panerwork Peduction Act Notice see the Instructions for Form 990 Cat No. 50053T Schedule	1 /For	n 990)	2014

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

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

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

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

Schedule J (Form 990) 2014

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

T

Return Reference Explanation

Schedule J (Form 990) 2014

Additional Data

Software ID: 14000329

Software Version: 2014v1.0

EIN: 74-1109737

Name: Young Men's Christian Association of the Greater Houston Area

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

(A) Name and Title	(B) Breakdown o (i) Base Compensation	of W-2 and/or 1099-MIS (ii) Bonus & Incentive compensation	SC compensation (iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation in column (B) reported as deferred in prior Form 990
Clark D Baker President & CEO	(I) 523,792 (II) 0	0 0	46,062	31,200 0	27,999 0	629,053	0
Paul E McEntire Sr VP/COO	(I) 289,969 (II) 0	5,000 0	4,150 0	31,200 0	9,693 0	340,012	0
Samantha A Buckner Sr VP/CFO	(I) 204,713 (II) 0	0 0	0	25,587 0	21,041 0	251,341 0	0
David L Snow Sr VP/Assn Adv	(I) 224,965 (II) 0	0 0	0	25,962 0	13,213	264,140 0	0
Kenneth G Harris VP Corp Svcs	(I) 182,810 (II) 0	0 0	0	21,914 0	9,829 0	214,553 0	0
Mary M Mossing VP Operations	(I) 165,999 (II) 0	5,000 0	0	20,498 0	9,806 0	201,303	0
Trazanna L Moreno VP Marketing	(I) 166,219 (II) 0	0 0	0	19,926 0	543 0	186,688 0	0
Linda Falsone-Lykos VP Fin Develop	(I) 163,735 (II) 0	3,500 0	0	20,049	520 0	187,804 0	0
Jennifer S Lopez VP Hum Resouces	(I) 160,092 (II) 0	2 0 4,000 0	0	19,671 0	12,090 0	195,853 0	0
Stuart A Duke VP Facilities	(I) 133,398 (II) 0	3,500 0	0	16,411 0	12,027	165,336 0	0
Brian S Haines VP Operations	(I) 132,793 (II) 0	4,000 0	0	16,401 0	12,002	165,196 0	0

DLN: 93493146002136

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OMB No 1545-0047

Schedule K (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information on Tax Exempt Bonds

► Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI. ► Attach to Form 990.

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

Inspection

	ne of the organization	City Constantianal	A						Emp	ployer id	entifica	tion nu	mber	
You	ung Men's Christian Association of	f the Greater Houst	on Area						74	-11097	37			ļ
Р	art I Bond Issues		1											
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue p	price	(f) Descript	ion of purpose	(g) De	efeased	beha	On alf of uer		Pool ncing
Ì	1		1	'		ļ			Yes	No	Yes	No	Yes	No
A	HARRIS CTY CULTURAL EDU F	52-1284201	414009ES5	02-28-2013	70,89		REFUND BOND 6/25/08	S ISSUED		Х		Х		Х
В	HARRIS CTY CULTURAL EDU F	52-1284201	414009FD7	02-28-2013	42,60		REFUND BOND 6/25/08	S ISSUED	+	х		Х		Х
c ⁻	HARRIS CTY CULTURAL EDU F	52-1284201	00000000	02-28-2013	21,69		REFUND BOND 6/25/08)S ISSUED	+	Х		Х		Х
D_	HARRIS CTY CULTURAL EDU F	52-1284201	00000000	02-28-2013	21,69		REFUND BOND 6/25/08	S ISSUED	†	Х		X		Х
P	art III Proceeds						<u> </u>							
					А			В		С			D	
1_								2,520,000		1,665	5,000		1	,665,000
		sed			<u> </u>						\longrightarrow			
3	Total proceeds of issue				7	0,893,3	372	42,600,000	21,695,000		5,000		21	,695,000
4	Gross proceeds in reserve fund				<u> </u>	5,670,0	000				\longrightarrow			
5					<u> </u>						\longrightarrow			
6	Proceeds in refunding escrows				<u> </u>						\longrightarrow			
7	Issuance costs from proceeds				<u> </u>	573,4	573,474 339,87		173,089		3,089			173,089
8	Credit enhancement from proce				<u> </u>						\longrightarrow			
9	Working capital expenditures fi				<u> </u>						\longrightarrow			
10		ceeds			<u> </u>						\longrightarrow			
11					6	4,649,8	898	42,260,125		21,52	1,911		21	,521,911
12					<u> </u>						\longrightarrow			
13	Year of substantial completion	1			201			010		010	\longrightarrow		2010	
ı —					Yes	No		No	Yes	N	<u>•</u>	Yes	<u>;</u>	No
14					X		X		Х	\bot	\longrightarrow	Х		
15	Were the bonds issued as part	: of an advance refur	nding issue?			Х		Х		×	`	Х		
16	Has the final allocation of proc	eeds been made?			Х		×		Х			Х		
17	allocation of proceeds?		nd records to supp	ort the final	Х		Х		Х			Х		
Pa	rt IIII Private Business U	se												
l					Yes	No	Yes	B No	Yes	C N	lo	Yes	D s	No
4														

		4	Α		<u>, B</u>		<u>C</u>)
		Yes	No	Yes	No	Yes	No	Yes	No	
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		×		×		×		×	
2	Are there any lease arrangements that may result in private business use of bond-financed property?		X		X		X		X	
						•				

Page 2 Part Private Business Use (Continued) C D В Α Yes No Yes No Yes No Yes No Are there any management or service contracts that may result in private business use За Χ Х Χ Χ of bond-financed property? If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property? Are there any research agreements that may result in private business use of bondc Χ Χ Χ Χ financed property? If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property? Enter the percentage of financed property used in a private business use by entities 4 other than a section 501(c)(3) organization or a state or local government Enter the percentage of financed property used in a private business use as a result of 5 unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government Total of lines 4 and 5 6 0 % 0 % 0 % 0 % Does the bond issue meet the private security or payment test? 7 Χ Χ Χ Χ Has there been a sale or disposition of any of the bond-financed property to a 8a nongovernmental person other than a 501(c)(3) organization since the bonds were Χ Χ Χ Χ issued? If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of b If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections c 1 141-12 and 1 145-2? Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Χ Χ Χ Χ Regulations sections 1 141-12 and 1 145-2? Part IV Arbitrage Α В C Yes No Yes No Yes No Yes No Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield 1 Х Χ Χ Χ Reduction and Penalty in Lieu of Arbitrage Rebate? If "No" to line 1, did the following apply? 2 Rebate not due vet? а Exception to rebate? b No rebate due? c If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed Is the bond issue a variable rate issue? 3 Χ Χ Χ Χ Has the organization or the governmental issuer entered 4a Х Χ Χ Χ into a qualified hedge with respect to the bond issue? Name of provider Term of hedge C Was the hedge superintegrated? d Was the hedge terminated?

6

period?

Χ

Pal	t IV Arbitrage (Continuea)								
		Α		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		×		X		×		X
Ь	Name of provider								
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								

the requirements of section 148? Part V Procedures To Undertake Corrective Action

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor

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

Χ

Χ

Χ

Χ

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

Schedule K (Form 990) 2014

Χ

Χ

Χ

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DLN: 93493146002136

OMB No 1545-0047

2014

Open to Public Inspection

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

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

Name of the organization Young Men's Christian Association of the Greater Houston Area	Employer identification number
	74-1109737

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

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

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

Return Reference	Explanation
	See above for process followed for individuals described in question 15b

Return Reference	Explanation
Form 990, Part VI, Line 19 Required documents available to the public	These documents are available to the public upon request

Return Reference	Explanation
Form 990, Part VIII, Line 2f Other Program Service Revenue	Other Program Revenue - Total Revenue 18867900, Related or Exempt Function Revenue 18867900, Unrelated Business Revenue , Revenue Excluded from Tax Under Sections 512, 513, or 514, Residence Revenue - Total Revenue 411039, Related or Exempt Function Revenue 411039, Unrelated Business Revenue , Revenue Excluded from Tax Under Sections 512, 513, or 514,

Return Reference	Explanation
Form 990, Part XI, Line 9 Other changes in net assets or fund balances	Change in fair market value of derivative196974,

Return Reference	Explanation
Part III, Line 1 - Mission Continuation of Mission	The Young Men's Christian Association of the Greater Houston Area is a Christian fellow ship dedicated to improving the quality of life through programs and services which promote healthy living, youth development and social responsibility throughout the community. It is the mission of the YMCA of Greater Houston to put Judeo-Christian principles into practice through programs that build a healthy spirit, mind and body for all. The YMCA will partially implement this mission through teaching five core values in all of its programs. Respect, Responsibility, Caring, Honesty and Faith. The YMCA seeks to promote our mission and core values by focusing on youth development, healthy living and social responsibility. We believe that lasting personal and social change can only come about when we all work together to invest in our children, our health and our neighbors. Our goal is to ensure everyone, regardless of age, income or background, has the opportunity to learn, grow and thrive. We are an association of men, women and children joined together by a shared commitment to nurture the potential of children, promote healthy living and foster a sense of social responsibility. Our dedication to these goals is only realized through the philanthropic giving of Houstonians, partnerships and community leaders. These gifts have enabled YMCA staff and volunteers to further the YMCA's vision of building healthy, confident, connected and secure children, adults, families and communities. Youth Development Community Impact Children empowered through youth sports 47,827 Children mentored through day camping 67,999 Members enlightened through aquatics 31,651 Children nurtured in child care programs 89,207 Family relationships enriched at Camp Cullen 4,281 Healthy Living YMCA Facility Members 388,831 Percentage of Family memberships 65% Percentage of Members Benefited by Membership for All 35% Social Responsibility. Partnerships with agencies, schools, businesses and Churches 340 Refugees given hope through resettlement 2,322 from

Return Reference	Explanation
Part III, Line 4a Healthy Living Program	Line 4a (Expenses \$66,595,568) (Revenue \$64,495,941) HEALTHY LIVING Participants Facility Members 388,831 Healthy lifestyles are achieved through nurturing mind, body and spirit. At the Y, well-being and fitness includes more than just working out Our 37 YMCA Centers in the Greater Houston area offer workout facilities and group exercise classes for every age and fitness level. Additionally, the Y provides educational programs to promote healthier decisions, and offer a variety of programs that support physical, intellectual and spiritual strength. Being healthy means more than simply being physically active. It includes balancing body, mind and spirit. The Y is a place where you can work toward that balance by challenging yourself to learn a new skill or hobby, fostering connections with friends through our lifelong learning programs, or bringing your loved ones closer together through our many family-centered activities. At the Y, it's not about the activity you choose as much as it is about the benefits of living healthier on the inside as well as the outside. The YMCA of Greater Houston reflects the rich diversity of our Greater Houston community in our membership base at our 35 facilities. Because we believe a healthier lifestyle should be available to all, the YMCA of Greater Houston offers a Membership For All plan. Under this plan, the membership rate is adjusted based on annual household income. In our quest to make YMCA membership available: "for all", last year approximately one-third of our members qualified and benefited from participation in the Membership for All program. Financial assistance offered through this program totaled \$3,735,025 YMCA Membership has never been more relevant in our community. The YMCA provides healthy solutions to problems such as the rise in childhood obesity, increased stress and chronic illnesses related to unhealthy diets and lifestyles. YMCA exercise programs are geared for every age group and all levels of physical fitness. Programs include strength training, aerob

Return Reference	Explanation
Part III, Line 4b Youth Development Program	Line 4b (Expenses \$28,592,238) (Revenue \$34,179,337) YOUTH DEVELOPMENT Participants - 206,523 At the YMCA, we believe the values and skills learned early on are vital building blocks for life. YMCA Youth Development programs result in more young people taking a greater interest in learning and making smarter life choices. At the Y, children and teens learn values and positive behaviors, and can explore their unique talents and interests, helping them realize their potential. This makes for confident children today and contributing and engaged adults formorrow. YMCA Youth Development Programs include 1) YMCA Child Care - The central focus of all YMCA Child Care programs is to foster growth and development not only in children but also in their parents and families. These educational programs help kids develop moral and ethical behavior, self-esteem and leadership. Parents play an important role in policy and program decisions. In many instances, Y Child Care allows parents of the children in our programs to remain gainfully employed, knowing that their children are thriving in a safe, supportive environment. For parents who cannot afford the full fee, waver or reduction of tution is available. YMCA Child Care nurtures the development of children by providing a safe place to learn foundational skills, develop healthy, trusting relationships and build self-reliance through the Y values of caring, faith, honesty, respect and responsibility. AfterSchool Once children reach school age, multiple influences enter their lives. YMCA AfterSchool ensures that the time after school is occupied creatively and constructively. YMCA AfterSchool programs are offered in partnership with 29 area school districts and various other organizations, offering care after school in over 200 locations. Early Childhood The YMCA believes that a quality program should provide enriching experiences which facilitate a child's cognitive, social, physical and emotional growth. We strive to meet the development because this is a critical time in a

Return Reference	Explanation
Part III, Line 4b Youth Development Program, Continued	3) YMCA Swim, Sports & Play - The Y is the starting point for many youth to learn about being active, and developing healthy habits they'll carry with them throughout their lives. The benefits are far greater than just physical health Whether it's gaining the confidence that comes from learning to swim or building the positive relationships that lead to ods sportsmanship and teamwork, participating in programs at the Y is about building the whole child, from the inside out. *Aquatics The YMCA offers a wide range of swimming options for the whole family. Swimming builds self-confidence and develops the whole person - spirit, mind and body. Classes are divided into ability groups and trained instructors emphasize personal safety, swimming skills, endurance and social skills while guilding students with prase and encouragement. The YMCA is committed to offering a quality, year-round swim team with emphasis on teaching the value of competition through teamwork, sportsmanship and doing one's best. The programstrives to offer a well-rounded, values-centered program for every member, from the youngest and new est members to our veteran senior swimmers. YMCA Water Wise is a nullificacted awareness program designed to educate the community about how to prevent drow ning. Water Wise includes a website with water safety tips, CPR and first adi information as well as swim lesson schedules. The initiative also offers a school district lifequard training program, a bureau of speakers that provides water safety presentations to the community in English and Spanish, swimming lessons at elementary and middle schools and water safety classes taught at local apartment complexes. "Youth Sports The YMCA believes that youth sports programs encourage and promote healthy and strong children, framiles and communities by placing a priority on family involvement, healthy competition and the value of participation over winning. Teambuilding as well as individual development, a positive self-image and a sense of fair play and mutual respec

Return Reference	Explanation	
	Part III, Line 4c Social Responsibility Program	Line 4c (Expenses \$11,297,027) (Revenue \$1,889,512) SOCIAL RESPONSIBILITY Participants 14 3,003 The YMCA is committed to moving people and communities forward To bring about mean ingful change, individuals need ongoing encouragement and tools. For the last 127 years, the "YMCA of Greater Houston has actively provided the resources our communities need to addr ess the most pressing social issues child welfare, education, employment, housing and sub stance abuse. We work to make sure every child, family and community has what they need to achieve their best 1) YMCA caring Community Centers - The YMCA Caring Community Centers vision is to transform apartment complexes into "communities of caring" in which children thrive and feet a sense of belonging and where all children, in these programs, believe that they "belong" to the YMCA located within their apartment complex. This model is based u pon building a YMCA program presence within an individual partment community and providin g a standardized set of programs for the residents. The Y serves in 21 caring Community Centers in Houston and offers programs such as "Afferschool Program with Emichment Activities. The YMCA offers an after-school "drop-in" programs such as "Afferschool Program with Emichment Activities. The YMCA offers an after-school wide in the Schools, art, etc. "Summer Programs The YMCA offers a partial (four hour) day program chrough a social some such as "Afferschool Programs in the YMCA offers and participate in traditional core programs of the YMCA which may include swim lessons, youth sport s, day camp, older youth programs, and resident camping. "Social Service Programs The YMCA affers a partial (four hour) day program for affect which the programs, and resident camping. "Social Service Programs Chrosic social service programs provised at Caring Community Centers may include adult continuing education, health care services, tutorial programs, provision of basic necessities, counsel ing, and other needed services/programs. 2) YMCA residences -

Return Reference	Explanation	
	Part III, Line 4c Social Responsibility Program	team One of the main barriers for these children is the natural grass field used in conventional youth leagues. The Miracle League plays on a custom-designed, rubberized turf field that accommodates wheelchairs and other devices while helping to prevent injuries. But the Miracle League is about more than playing a game. It is about making new friends, building self-esteem and being treated just like other kids. To help the athletes, the Miracle League uses a "buddy" system - pairing each player with an able-bodied peer. The result is a bond that cannot be described and an impact not only on the player, but their buddy as well. We cannot change or cure the medical issues facing these children. What we can do is provide them with an opportunity to experience the joy and benefits that come from playing as a part of the team. 6) YMCA Employment. Development and Training - The YMCA offers em ployment training for income eligible young people and immigrants in collaboration with other agencies and the business community. 7) YMCA Operation Backpack - YMCA Operation Backpack, Houston's largest school supply drive, collects and distributes over \$1.5 million in backpacks and school supplies for children. The YMCA partners with various local churches, community organizations and multiple media partners providing over 75,000 Houston children with needed supplies for the first day of school.

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DLN: 93493146002136

2014

OMB No 1545-0047

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SCHEDULE R (Form 990)

Department of the Treasury

Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

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

Name of the organization **Employer identification number** Young Men's Christian Association of the Greater Houston Area 74-1109737

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.										
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity					
						-				

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512 (13) contro entity?	
						Yes	No
(1) YOUNG MEN'S CHRISTIAN ASSOC ENDOWMENT 2600 N LOOP WEST STE 300 HOUSTON, TX 77092 76-0555562	ENDOWMENT	TX	501(c)(3		YOUNG MEN'S CHRISTIAN ASSOC OF GR HOU AR	Yes	

Part III	Identification of Related Organizations Taxable a	as a Partne	ership	Complete i	f the organiz	atıon ansv	ered "Ye	s" on Form	990, Part 1	[V, line 3	4
	because it had one or more related organizations treate	ed as a part	nership	during the	tax year.						
											$^{-}$

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h))	(i)	Ü)	(k)
Name, address, and EIN of	Primary activity	Legal	Direct	Predominant	Share of	Share of	Dispropr	rtionate	Code V-UBI	Gener	al or	Percentage
related organization		domicile	controlling	ıncome(related,	total income	lend-of-year	allocati	ions?	amount in box	mana	iging	ownership
-		(state or	entity	unrelated,		assets			20 of	partr	ner?	
		foreign		excluded from		1			Schedule K-1			
		country)		tax under		1			(Form 1065)			
				sections 512-		1						
		1 1		514)		1	L			L		
				,		1	Yes	No		Yes	No	
									ı			

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

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

chedule R (Form 990) 2014					
Part	Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 30	6.			
r	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No	
1 Dur	ring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?				
a l	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		No	
Ь	Gıft, grant, or capıtal contribution to related organization(s)	1b		No	
c (Gift, grant, or capital contribution from related organization(s)	1c	Yes		
d I	Loans or loan guarantees to or for related organization(s)	1d		No	
e I	Loans or loan guarantees by related organization(s)	1e		No	
f [Dividends from related organization(s)	1f		No	
g S	Sale of assets to related organization(s)	1 g		No	
h I	Purchase of assets from related organization(s)	1h		No	
i E	i Exchange of assets with related organization(s)			No	
j L	Lease of facilities, equipment, or other assets to related organization(s)	1 j		No	
k I	Lease of facilities, equipment, or other assets from related organization(s)	1k		No	
I P	Performance of services or membership or fundraising solicitations for related organization(s)	11	Yes		
m P	Performance of services or membership or fundraising solicitations by related organization(s)	1m		No	
n S	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes		
o :	Sharing of paid employees with related organization(s)	10	Yes		

n	Reimbursement haid to	related	organization(s) for expenses

- Reimbursement paid by related organization(s) for expenses
- r Other transfer of cash or property to related organization(s)
- **s** Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction	on thresholds
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(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) Young Men's Christian Assoc Endowment Fd	С	373,302	Cash

No

No

No No Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(k)
Name, address, and EIN of entity	Primary activity	/ Legal	Predominant	Are all partners	Share of	Share of	Disproprtionate	e Code V-UBI	General or	Percentage
1	1	domicile	ıncome	section	total	end-of-year	allocations?	amount in	managing	ownership
1	1	(state or	(related,	501(c)(3)	ıncome	assets	1	box 20	partner?	, , , , , , , , , , , , , , , , , , ,
1	1	foreign	unrelated,	organizations?		1	1	of Schedule	1	, , , , , , , , , , , , , , , , , , ,
1	1	country)	excluded from	1		1	1	K-1	1	·
1	1	1 "	tax under	1		1	1	(Form 1065)	1	1
1	1	1	sections 512-	1		1	1	' ' '	1	
1	1	1	514)	$\overline{}$	\neg	,		⊣ '		+
	1	1	1 ' '	Yes No		'	Yes N	No	Yes No	7
1	<u> </u>		1	$\overline{}$	+	 				_
1			<u> </u>			'				

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Part VII Supplemental Information

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

Return Reference Explanation

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