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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public
▶ Information about Form 990 and its instructions is at *www.IRS.gov/form990*

OMB No 1545-0047

2015

Open to Public Inspection

A For the 2015 calendar year, or tax year beginning 01-01-2015 , and ending 12-31-2015

B Check if applicable
☑ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization
The Waterbury Young Men's Christian Association

Doing business as

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

City or town, state or province, country, and ZIP or foreign postal code
Waterbury, CT 06702

D Employer identification number
06-0646988

E Telephone number
(203) 754-9622

G Gross receipts $ 8,625,073

F Name and address of principal officer
James O'Rourke
136 West Main Street
Waterbury, CT 06702

H(a) Is this a group return for subordinates? ☐ Yes ☑ No
H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)
H(c) Group exemption number ▶

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

J Website: ▶ WWW WATERBURYYMCA ORG

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ | **L** Year of formation 1858 | **M** State of legal domicile CT

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
SEE SCHEDULE O

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

3	Number of voting members of the governing body (Part VI, line 1a)	3	21
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	21
5	Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5	398
6	Total number of volunteers (estimate if necessary)	6	202
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	3,766,971	3,641,973
	9	Program service revenue (Part VIII, line 2g)	3,463,515	3,530,124
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	34,468	82,596
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	16,786	69,206
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	7,281,740	7,323,899
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	357,612	439,596
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	3,198,989	3,210,283
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶28,417		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	2,862,439	3,569,515
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	6,419,040	7,219,394
	19	Revenue less expenses Subtract line 18 from line 12	862,700	104,505

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	15,377,956	15,650,651
	21	Total liabilities (Part X, line 26)	4,345,737	4,630,808
	22	Net assets or fund balances Subtract line 21 from line 20	11,032,219	11,019,843

Part II Signature Block

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

Sign Here

Signature of officer | Date 2016-05-13

John Zinno Jr PRESIDENT
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
DANIEL C VOLLARO CPA	DANIEL C VOLLARO CPA			P00055760
Firm's name ▶ BUDWITZ & MEYERJACK PC			Firm's EIN ▶ 06-1218594	
Firm's address ▶ 1122 Highland Avenue Cheshire, CT 06410			Phone no (203) 272-1621	

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission

THE MISSION OF THE WATERBURY YOUNG MEN'S CHRISTIAN ASSOCIATION (YMCA) IS TO ADVANCE OUR CAUSE OF STRENGTHENING COMMUNITY THROUGH YOUTH DEVELOPMENT, HEALTHY LIVING, AND SOCIAL RESPONSIBILITY THE YMCA IS A POWERFUL ASSOCIATION OF MEN, WOMEN, AND CHILDREN COMMITTED TO BRINGING ABOUT LASTING PERSONAL AND SOCIAL CHANGE WITH A FOCUS ON NURTURING THE POTENTIAL OF EVERY CHILD AND TEEN, IMPROVING THE COMMUNITIES HEALTH AND WELL-BEING, AND PROVIDING OPPORTUNITIES TO GIVE BACK AND SUPPORT NEIGHBORS, THE YMCA ENABLES YOUTH, ADULTS, FAMILIES, AND COMMUNITIES TO BE HEALTHY, CONFIDENT, CONNECTED, AND SECURE

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

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

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

If "Yes," describe these changes on Schedule O

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

4a (Code) (Expenses $ 3,777,973 including grants of $ 301,172) (Revenue $ 1,693,260)

YMCA YOUTH DEVELOPMENT THE WATERBURY YMCA IS COMMITTED TO NURTURING THE POTENTIAL OF EVERY CHILD AND TEEN WE BELIEVE THAT ALL KIDS DESERVE THE OPPORTUNITY TO DISCOVER WHO THEY ARE AND WHAT THEY CAN ACHIEVE THAT IS WHY WE HELP YOUNG PEOPLE CULTIVATE THE VALUES, SKILLS, AND RELATIONSHIPS THAT LEAD TO POSITIVE BEHAVIORS OUR YMCA PROGRAMS SUCH AS CHILD CARE, YOUTH SPORTS, CAMP PROGRAMS AND OTHER YOUTH PROGRAMMING, OFFER A RANGE OF EXPERIENCES THAT ENRICH COGNITIVE, SOCIAL, PHYSICAL AND EMOTIONAL GROWTH THE WATERBURY YMCA CHILD DEVELOPMENT CENTER SERVED 265 CHILDREN DAILY AND 763 OVERALL THROUGH OUR NAEYC ACCREDITED SCHOOL READINESS PRESCHOOL AND THE BEFORE AND AFTER SCHOOL PROGRAMS THESE PROGRAMS ARE RUN AT THE WEST MAIN STREET LOCATION AND 7 OFF-SITE LOCATIONS IN THE GREATER WATERBURY AREA THROUGH PARTNERSHIPS WITH THE LOCAL SCHOOL DISTRICTS AND BOARDS OF EDUCATION THE SCHOOL READINESS PROGRAM IS BASED ON A SLIDING FEE SCALE AND HELPS PROVIDE HIGH QUALITY PRESCHOOL PROGRAMMING TO 185 CHILDREN WITHIN THE WATERBURY COMMUNITY AS PART OF THE YMCA MISSION TO PROMOTE YOUTH DEVELOPMENT, HEALTHY LIVING, AND SOCIAL RESPONSIBILITY, THE YMCA SCHOOL READINESS PROGRAM PARTICIPATES IN THE CACFP STATE NUTRITION PROGRAM WHICH PROVIDES NUTRITIOUS MEALS AND SNACKS TO THE PRESCHOOL CENTER CHILDREN DAILY AND AT NO COST TO THE PARENTS THE YMCA FOCUSES ON THE DEVELOPMENTAL NEEDS, EDUCATION, SAFETY, AND PREPAREDNESS OF CHILDREN AND STRIVES TO BUILD POSITIVE RELATIONSHIPS BETWEEN PARENTS AND YMCA STAFF THE SCHOOL READINESS PROGRAM CURRICULUM IS BASED ON THE CONNECTICUT FRAMEWORKS BENCHMARKS AND IS ENRICHED WITH MANY OTHER ACTIVITIES SUCH AS YOGA AND PROGRESSIVE LEARN-TO-SWIM LESSONS THE YMCA CONTINUES TO ENRICH THE LIVES OF CHILDREN AND FAMILIES THROUGHOUT THE COMMUNITY THROUGH THE MANY CHILD DEVELOPMENTAL SERVICES WE OFFER SIMILARLY, THE WATERBURY YMCA SCHOOL AGE CHILDCARE PROGRAM IS COMMITTED TO PROVIDING AGE APPROPRIATE QUALITY CHILD DEVELOPMENT SERVICES TO CHILDREN AND FAMILIES LIVING AND WORKING IN THE GREATER WATERBURY AREA WE STRIVE TO DEVELOP EDUCATIONAL AND ENRICHMENT ACTIVITIES BASED ON THE 40 DEVELOPMENTAL ASSETS AND ENCOURAGE CURIOSITY, EXPLORATION, AND INITIATIVE WE RECOGNIZE AND ACCEPT THAT EACH CHILD IS AN INDIVIDUAL WITH UNIQUE NEEDS, ABILITIES, AND EXPERIENCES ACTIVITIES AND MATERIALS ARE PLANNED AND IMPLEMENTED TO PROMOTE LEADERSHIP, TEAM BUILDING, AND SELF-ESTEEM THE EDUCATION PLAN OF THE PROGRAM IS TO PROVIDE THE CHILDREN ENROLLED WITH A SAFE ENVIRONMENT AND A STRUCTURED DAILY SCHEDULE THAT MEETS AND ENHANCES THE NEEDS OF THE DIVERSE POPULATION SERVED CULTURAL, LANGUAGE, AND DEVELOPMENTAL DIFFERENCES ARE ACCEPTED AND RESPECTED THERE ARE SCHEDULED INDOOR AND OUTDOOR ACTIVITIES OFFERED DAILY WHICH ALLOW THE OPPORTUNITY FOR FINE AND GROSS MOTOR DEVELOPMENT, PROBLEM SOLVING, SPORTS AND RECREATION, AND CREATIVE EXPRESSION THE PROGRAM IS CHILD NOT TEACHER BASED AND ENCOURAGES CHILDREN TO EXPLORE AND DEVELOP THEIR OWN PERSONAL THOUGHTS AND BELIEFS AND DEVELOPS TEAM BUILDING AND LEADERSHIP SKILLS CAMP PROGRAMMING THE WATERBURY YMCA HAS OPERATED YMCA CAMP MATAUCHA OUTDOOR CENTER IN WATERTOWN FOR 89 YEARS AND HAS RUN YMCA CAMP OAKASHA IN SOUTHBURY FOR 19 YEARS CONTINUING ITS CHARITABLE MISSION OF OFFERING DAY CAMPING EXPERIENCES THAT ARE AIMED TO TEACHING POSITIVE VALUES OF CARING, HONESTY, RESPECT AND RESPONSIBILITY BOTH YMCA CAMP MATAUCHA AND YMCA CAMP OAKASHA ARE ABLE TO DO THIS THROUGH A FOCUS ON YOUTH DEVELOPMENT, HEALTHY LIVING, AND SOCIAL RESPONSIBILITY THE YMCA BELIEVES THAT THE EXPERIENCE A CHILD HAS AT CAMP GREATLY AFFECTS THE VALUES THEY LEARN AND THE PERSON THEY BECOME THE CAMP PROGRAMS SERVED 1,116 CAMPERS AGES 5 THROUGH 15 THROUGHOUT THE SEASON, AVERAGING 270 CAMPERS PER DAY OVER THE 9-WEEK CAMP SEASON CAMPERS HAD THE OPPORTUNITY TO PARTICIPATE IN ENRICHING ACTIVITIES INCLUDING ARCHERY, SWIMMING, ARTS & CRAFTS, BOATING, FIELD GAMES, NATURE, HIKING, LOW AND HIGH ROPES CHALLENGES, FAMILY NIGHTS, FAMILY OVERNIGHTS, SPORTS, ROCK CLIMBING, AND MORE THE WATERBURY YMCA WAS ABLE TO PROVIDE $26,213 IN CAMP SCHOLARSHIPS THAT WERE PROVIDED TO CHILDREN OF FINANCIALLY DISADVANTAGED FAMILIES THESE CHILDREN HAD THE OPPORTUNITY TO EXPERIENCE WHOLESOME VALUES AND MAKE NEW FRIENDS IN AN ENRICHING ENVIRONMENT WITH OUR HAND-SELECTED "PROFESSIONAL ROLE MODELS" YMCA CAMP MATAUCHA FACILITIES ARE ALSO A VALUABLE OUTDOOR RESOURCE FOR VARIOUS COMMUNITY GROUPS SUCH AS SCHOOLS, CHURCHES, AND CIVIC ORGANIZATIONS IN ADDITION TO NUMEROUS AT-RISK YOUTH AND TEEN GROUPS WHO UTILIZE THE ADVENTURE CHALLENGE COURSE THE YMCA TEAMBUILDING AND LEADERSHIP PROGRAM IS DESIGNED TO HELP GROUPS FOCUS ON TEAM BUILDING, IMPROVING COMMUNICATION, AND DEVELOPING TRUST IN ADDITION, THE LEADERSHIP PROGRAM ENCOURAGES GOAL SETTING, GROUP DECISION-MAKING, AND BUILDING SELF-CONFIDENCE YMCA CAMP MATAUCHA PROVIDED CERTIFIED STAFF TO LEAD A TOTAL OF 25 GROUPS, TOTALING OVER 1,893 PARTICIPANTS, THROUGH A VARIETY OF CHALLENGES INVOLVING HIGH AND LOW ROPES COURSE ELEMENTS

4b (Code) (Expenses $ 1,754,457 including grants of $ 138,424) (Revenue $ 1,903,529)

HEALTHY LIVING THE YMCA IS A LEADING VOICE ON HEALTH AND WELL-BEING WE BRING FAMILIES CLOSER TOGETHER, ENCOURAGE GOOD HEALTH AND FOSTER CONNECTIONS THROUGH FITNESS, SPORTS, FUN, AND SHARED INTERESTS AS A RESULT, PEOPLE IN OUR COMMUNITY ARE RECEIVING THE SUPPORT, GUIDANCE, AND RESOURCES THEY NEED TO ACHIEVE GREATER HEALTH IN SPIRIT, MIND, AND BODY THIS IS PARTICULARLY IMPORTANT AS OUR NATION STRUGGLES WITH AN OBESITY CRISIS, FAMILIES STRUGGLE WITH WORK/LIFE BALANCE, AND INDIVIDUALS SEARCH FOR PERSONAL FULFILLMENT MEMBER SERVICES AT THE WATERBURY YMCA INCLUDES ACCESS AND USE OF A STATE-OF -THE-ART WELLNESS CENTER, GYMNASIUM, 2 RACQUETBALL COURTS, WARM WATER THERAPY AND LAP SWIMMING POOLS, INDOOR TRACK, GROUP FITNESS STUDIO, FULLY-EQUIPPED LOCKER ROOMS AND ACCESS TO PERSONAL TRAINING AND OTHER SERVICES THE YMCA OFFERS A WELCOMING ATMOSPHERE WHERE HEALTH SEEKERS CAN FEEL COMFORTABLE AND RECEIVE THE ENCOURAGEMENT AND SUPPORT NEEDED TO CONTINUE HEALTHY LIVING THROUGH THE GUIDANCE OF TRAINED PROFESSIONALS THE YMCA PROGRAMS ARE DESIGNED TO SERVE PEOPLE OF ALL AGES, ABILITIES AND INCOMES ALL YMCA PROGRAMS FOCUS ON ADDRESSING SEVERAL PUBLIC HEALTH ISSUES INCLUDING OBESITY, DIABETES, AND HEART DISEASE BY PROVIDING ACCESSIBILITY TO THE COMMUNITY THROUGH PROGRAMS SUCH AS OUR "OPEN DOORS FINANCIAL ASSISTANCE PROGRAM", WE WERE ABLE TO OFFER ASSISTANCE TO THOSE IN NEED ON THE MOST FUNDAMENTAL OF LEVELS, AFFORDABILITY

4c (Code) (Expenses $ 296,606 including grants of $) (Revenue $ 2,240)

SOCIAL RESPONSIBILITY THE WATERBURY YMCA BELIEVES IN GIVING BACK AND SUPPORTING OUR NEIGHBORS WE HAVE BEEN LISTENING AND RESPONDING TO OUR COMMUNITY'S MOST CRITICAL SOCIAL NEEDS YMCA PROGRAMS SUCH AS WORKFORCE, DEP, LEARN TO SWIM, LIVESTRONG, AND OTHER PROGRAMMING ARE EXAMPLES OF HOW WE DELIVER TRAINING, RESOURCES, AND SUPPORT THAT EMPOWER OUR NEIGHBORS TO EFFECT CHANGE, BRIDGE GAPS, AND OVERCOME OBSTACLES WE ENGAGE YMCA MEMBERS, PARTICIPANTS, AND VOLUNTEERS IN ACTIVITIES THAT STRENGTHEN OUR COMMUNITY AND PAVE THE WAY FOR FUTURE GENERATIONS TO THRIVE IN OUR FOURTH YEAR OF THE PROGRAM, LIVESTRONG AT THE YMCA IS STILL VERY WELL ATTENDED IN 2015 A TOTAL OF 67 SURVIVORS GRADUATED FROM THE FREE PROGRAM LIVESTRONG AT THE YMCA INSTRUCTORS MEET WITH SURVIVORS TWICE A WEEK FOR AN HOUR AND A HALF CLASS THE CLASSES INCLUDE BOTH A STRUCTURED STRENGTH AND CARDIO PROGRAM WITH OPPORTUNITIES FOR MEDITATION AND SHARING THE PARTICIPANTS PLEDGE TO ATTEND 20 OUT OF THE 24 CLASSES, THUS MOTIVATING PEOPLE TO CONTINUE THROUGHOUT THE PROGRAM, AND ALLOWING THEM TO GET THE BEST RESULTS AT THE CONCLUSION OF THE PROGRAM EACH PARTICIPANT IS OFFERED A SPECIAL REDUCED MEMBERSHIP RATE, TOGETHER WITH FINANCIAL ASSISTANCE IF NEEDED, TO ENCOURAGE CONTINUED EXERCISE THERE IS A JOYOUS GRADUATION AND POTLUCK CELEBRATION AT THE CONCLUSION OF EVERY SESSION THE POSITIVE OUTCOMES OF LIVESTRONG AT THE YMCA ARE PLENTIFUL! THE BERKELEY WARNER RECREATION CENTER SERVES YOUTH AND TEENS IN THE ADJACENT BERKELEY HEIGHTS HOUSING COMPLEX AND IS WELL ATTENDED WITH STRUCTURED ACTIVITIES FOR DIFFERENT AGE GROUPS, ENSURING AN EASILY ACCESSIBLE SAFE AND SUPERVISED ENVIRONMENT FOR AT-RISK YOUTH LIVING IN THE NEIGHBORHOOD THE YMCA BRINGS A VARIETY OF ACADEMIC, ENRICHMENT, ATHLETIC AND PREVENTION PROGRAMS TO THE CENTER OTHER ACTIVITIES AND EVENTS INCLUDE THE BERKELEY WARNER KNIGHTS DRILL TEAM THE WATERBURY YMCA IS COMMITTED TO USING ITS RESOURCES IN COOPERATION WITH THE GREATER COMMUNITY AND ITS ASSOCIATED AGENCIES INCLUDING SAINT MARY'S HOSPITAL, WATERBURY HOSPITAL, THE CITY OF WATERBURY, WATERBURY YOUTH SERVICES, UNITED WAY, CONNECTICUT COMMUNITY FOUNDATION, MATTATUCK MUSEUM, BOYS' AND GIRLS' CLUB AND NUMEROUS OTHERS ADDITIONAL COMMUNITY SERVICE PROGRAMS PROVIDED BY THE WATERBURY YMCA INCLUDE AQUATIC TESTING, AED, CPR AND FIRST AID TRAINING COURSES, AND LIFE SAVING CLASSES AND CERTIFICATIONS

4d Other program services (Describe in Schedule O)
(Expenses $ including grants of $) (Revenue $)

4e **Total program service expenses** ▶ 5,829,036

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	Yes	
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		No
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI.*	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV*	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV*	16		No
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I* (see instructions)	17		No
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18	Yes	
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part IV **Checklist of Required Schedules** *(continued)*

			Yes	No
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? *If "Yes," complete Schedule J*	**23**	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a*	**24a**	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .	**24b**		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	**24c**		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .	**24d**		No
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *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)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	**28a**		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	**28b**		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV* . . .	**28c**		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M* . .	**29**	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	**30**		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I* .	**31**		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	**32**		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	**33**		No
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	**34**		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	**35a**		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2* . . .	**35b**		
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	**36**		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	**37**		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O	**38**	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	12			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	398			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			2b	Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			3a		No
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O*			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a		No
b	If "Yes," enter the name of the foreign country ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7h		
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	**Section 501(c)(7) organizations.** Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	**Section 501(c)(12) organizations.** Enter					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O			13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*			14b		

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

Section A. Governing Body and Management

					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	**1a**	21			
	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	**1b**	21			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?			**2**		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .			**3**		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			**4**		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .			**5**		No
6	Did the organization have members or stockholders?			**6**		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?			**7a**		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?			**7b**		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following					
a	The governing body?			**8a**	Yes	
b	Each committee with authority to act on behalf of the governing body?			**8b**	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*			**9**		No

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

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

Section C. Disclosure

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

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

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

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

20 State the name, address, and telephone number of the person who possesses the organization's books and records
▶BRANDI FITZGERALD 136 WEST MAIN STREET WATERBURY, CT 06702 (203)754-9622

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) Stephen Ball Vice-President	30	X		X				0	0	0
(2) Carl Cicchetti Secretary	30	X		X				0	0	0
(3) Greg Fenn Treasurer	30	X		X				0	0	0
(4) Harold Smith Vice-President	30	X		X				0	0	0
(5) John Zinno President	30	X		X				0	0	0
(6) Jonathan Albert Director	10	X						0	0	0
(7) Maureen Carleton Director	10	X						0	0	0
(8) Gregory Cimmino Director	10	X						0	0	0
(9) Melanie Felladore Director	10	X						0	0	0
(10) Vencent Graziano Director	10	X						0	0	0
(11) Alan Green Director	10	X						0	0	0
(12) Reggie Ligon Director	10	X						0	0	0
(13) Kyle Morris Director	10	X						0	0	0
(14) Michael O'Connor Director	10	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(15) Charles Oman Director	1 0	X						0	0	0
(16) Vernon Proctor Director	1 0	X						0	0	0
(17) Mike Stallings Director	1 0	X						0	0	0
(18) Joseph Summa Director	1 0	X						0	0	0
(19) William Wesson Director	1 0	X						0	0	0
(20) Joseph Yamin Director	1 0	X						0	0	0
(21) Greg Zupkus Director	1 0	X						0	0	0
(22) James O'Rourke Executive Director	40 0			X				139,905	0	14,470
(23) Brandi Fitzgerald Finance Director	40 0			X				65,321	0	2,288

		(D)	(E)	(F)
1b	**Sub-Total** ▶			
c	**Total from continuation sheets to Part VII, Section A** ▶			
d	**Total (add lines 1b and 1c)** ▶	205,226	0	16,758

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 1

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

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

Part VIII Statement of Revenue

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

Section	Line	Description			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a	130,586				
	b	Membership dues	1b	0				
	c	Fundraising events	1c	52,937				
	d	Related organizations	1d	0				
	e	Government grants (contributions)	1e	2,904,390				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	554,060				
	g	Noncash contributions included in lines 1a-1f $		27,348				
	h	**Total.** Add lines 1a-1f ▶			3,641,973			
Program Service Revenue				Business Code				
	2a	Healthy Living		900099	1,834,624	1,834,624		
	b	Youth Development		900099	1,693,260	1,693,260		
	c	Social Responsibility		900099	2,240	2,240		
	d							
	e							
	f	All other program service revenue			0	0	0	0
	g	**Total.** Add lines 2a–2f ▶			3,530,124			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) ▶			75,913			75,913
	4	Income from investment of tax-exempt bond proceeds ▶						
	5	Royalties ▶						
			(i) Real	(ii) Personal				
	6a	Gross rents						
	b	Less rental expenses						
	c	Rental income or (loss)	0	0				
	d	Net rental income or (loss) ▶						
			(i) Securities	(ii) Other				
	7a	Gross amount from sales of assets other than inventory	1,270,232					
	b	Less cost or other basis and sales expenses	1,263,549					
	c	Gain or (loss)	6,683	0				
	d	Net gain or (loss) ▶			6,683			6,683
	8a	Gross income from fundraising events (not including $ 52,937 of contributions reported on line 1c) See Part IV, line 18	a	23,264				
	b	Less direct expenses	b	23,264				
	c	Net income or (loss) from fundraising events ▶						
	9a	Gross income from gaming activities See Part IV, line 19	a	0				
	b	Less direct expenses	b	0				
	c	Net income or (loss) from gaming activities ▶						
	10a	Gross sales of inventory, less returns and allowances	a	14,662				
	b	Less cost of goods sold	b	14,361				
	c	Net income or (loss) from sales of inventory ▶			301			301
		Miscellaneous Revenue		Business Code				
	11a	REVENUE FROM PARKING		900099	15,206	15,206		
	b	INSURANCE PROCEEDS		900099	650	650		
	c	FACILITY USAGE FEES		900099	53,049	53,049		
	d	All other revenue			0	0	0	0
	e	**Total.** Add lines 11a–11d ▶			68,905			
	12	**Total revenue.** See Instructions ▶			7,323,899	3,599,029	0	82,897

Part IX Statement of Functional Expenses

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

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

	Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	0	0		
2	Grants and other assistance to domestic individuals See Part IV, line 22	439,596	439,596		
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	0	0		
5	Compensation of current officers, directors, trustees, and key employees	205,226		205,226	
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	2,537,195	2,329,377	189,164	18,654
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	139,569	107,139	30,570	1,860
9	Other employee benefits	108,192	95,384	12,436	372
10	Payroll taxes	220,101	187,557	30,984	1,560
11	Fees for services (non-employees)				
a	Management				
b	Legal	7,030		7,030	
c	Accounting	20,500		20,500	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	7,023		7,023	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	338,654	254,617	83,833	204
12	Advertising and promotion	32,360	26,660	2,313	3,387
13	Office expenses	24,173		23,928	245
14	Information technology				
15	Royalties				
16	Occupancy	1,106,345	1,084,744	19,860	1,741
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	16,562	12,841	3,721	
20	Interest	184,426	153,100	31,326	
21	Payments to affiliates	74,516	74,516	0	0
22	Depreciation, depletion, and amortization	600,407	587,594	12,813	
23	Insurance	36,151	36,151		
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a	PROGRAM SUPPLIES / EXPENSES	336,460	336,460		
b	EQUIP MAINT/RENTAL	59,968	46,716	13,252	
c	TELEPHONE	21,962	10,695	11,267	
d	VEHICLE AND EMPLOYEE EXPENSE	25,765	15,090	10,675	
e	All other expenses	677,213	30,799	646,020	394
25	**Total functional expenses.** Add lines 1 through 24e	7,219,394	5,829,036	1,361,941	28,417
26	**Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

Section	Line	Description			(A) Beginning of year		(B) End of year
Assets	1	Cash–non-interest-bearing			228,669	1	666,139
	2	Savings and temporary cash investments			0	2	0
	3	Pledges and grants receivable, net			324,482	3	240,227
	4	Accounts receivable, net			96,346	4	37,697
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			0	5	0
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L			0	6	
	7	Notes and loans receivable, net			0	7	0
	8	Inventories for sale or use			0	8	0
	9	Prepaid expenses and deferred charges			164,638	9	148,232
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	19,946,981			
	b	Less accumulated depreciation	10b	8,942,798	11,498,773	10c	11,004,183
	11	Investments—publicly traded securities			2,515,359	11	2,721,135
	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			0	14	0
	15	Other assets See Part IV, line 11			549,689	15	833,038
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)			15,377,956	16	15,650,651
Liabilities	17	Accounts payable and accrued expenses			101,307	17	132,566
	18	Grants payable			0	18	0
	19	Deferred revenue			94,054	19	48,906
	20	Tax-exempt bond liabilities			3,290,000	20	3,700,187
	21	Escrow or custodial account liability Complete Part IV of Schedule D			0	21	0
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L			0	22	
	23	Secured mortgages and notes payable to unrelated third parties			860,376	23	749,149
	24	Unsecured notes and loans payable to unrelated third parties			0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D			0	25	0
	26	**Total liabilities.** Add lines 17 through 25			4,345,737	26	4,630,808
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**					
	27	Unrestricted net assets			9,803,363	27	9,590,679
	28	Temporarily restricted net assets			211,289	28	181,676
	29	Permanently restricted net assets			1,017,567	29	1,247,488
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds			0	30	0
	31	Paid-in or capital surplus, or land, building or equipment fund			0	31	0
	32	Retained earnings, endowment, accumulated income, or other funds			0	32	0
	33	Total net assets or fund balances			11,032,219	33	11,019,843
	34	Total liabilities and net assets/fund balances			15,377,956	34	15,650,651

Part XI Reconcilliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	7,323,899
2	Total expenses (must equal Part IX, column (A), line 25)	2	7,219,394
3	Revenue less expenses Subtract line 2 from line 1	3	104,505
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	11,032,219
5	Net unrealized gains (losses) on investments	5	-116,881
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	11,019,843

Part XII Financial Statements and Reporting

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

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ Other ______ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

OMB No 1545-0047
2015
Open to Public Inspection

Name of the organization
The Waterbury Young Men's Christian Association

Employer identification number
06-0646988

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

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

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

2 ☐ A school described in **section 170(b)(1)(A)(ii).**(Attach Schedule E (Form 990 or 990-EZ))

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

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

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

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

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

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

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

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

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

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

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

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

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

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

f Enter the number of supported organizations . . . . ______

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

(i) Name of supported organization	(ii)EIN	(iii) Type of organization (described on lines 1- 9 above (see instructions))	(iv) Is the organization listed in your governing document? Yes	No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
Total						

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990EZ. Cat No 11285F

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any unusual grants)						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public support.** Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11 **Total support.** Add lines 7 through 10						

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

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f)) | 14 |

15 Public support percentage for 2014 Schedule A, Part II, line 14 | 15 |

16a **33 1/3% support test—2015.** 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—2014.** 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—2015.** 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—2014.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ ☐

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	2,524,046	2,470,390	2,932,154	3,766,971	3,629,453	15,323,014
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	3,061,901	3,169,767	3,242,160	3,478,223	3,610,106	16,562,157
3 Gross receipts from activities that are not an unrelated trade or business under section 513	74,672	58,446	56,899	37,488	37,926	265,431
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
5 The value of services or facilities furnished by a governmental unit to the organization without charge						0
6 **Total.** Add lines 1 through 5	5,660,619	5,698,603	6,231,213	7,282,682	7,277,485	32,150,602
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	0	0	0	0	0	0
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year	0	0	0	0	0	0
c Add lines 7a and 7b	0	0	0	0	0	0
8 **Public support.** (Subtract line 7c from line 6)						32,150,602

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9 Amounts from line 6	5,660,619	5,698,603	6,231,213	7,282,682	7,277,485	32,150,602
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	19,039	28,138	43,429	56,097	75,913	222,616
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0
c Add lines 10a and 10b	19,039	28,138	43,429	56,097	75,913	222,616
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	0	0	0	0	0	0
13 **Total support.** (Add lines 9, 10c, 11, and 12)	5,679,658	5,726,741	6,274,642	7,338,779	7,353,398	32,373,218

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

Section C. Computation of Public Support Percentage

15	Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f))	15	99 31 %
16	Public support percentage from 2014 Schedule A, Part III, line 15	16	99 50 %

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2015** (line 10c, column (f) divided by line 13, column (f))	17	0 69 %
18	Investment income percentage from **2014** Schedule A, Part III, line 17	18	0 50 %

19a **33 1/3% support tests—2015.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☑

b **33 1/3% support tests—2014.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

		Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	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		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year **(see instructions)**

a ☐ The organization satisfied the Activities Test Complete **line 2** below

b ☐ The organization is the parent of each of its supported organizations Complete **line 3** below

c ☐ The organization supported a governmental entity Describe in Part VI how you supported a government entity (see instructions)

		Yes	No
2 Activities Test **Answer (a) and (b) below.**			
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*	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 Parent of Supported Organizations **Answer (a) and (b) below.**			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in Part VI.*	3a		
b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.*	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 Type III non-functionally integrated supporting organizations must complete Sections A through E ☐

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

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

	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	**Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		

7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions) ☐

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 **Total annual distributions.** Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2015 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-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause required--see instructions)			
3 Excess distributions carryover, if any, to 2015			
[redacted]			
d From 2013. . . . . ____________			
e From 2014. . . . . ____________			
f **Total** of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2015 from Section D, line 7 $ ____________________			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 **Excess distributions carryover to 2016.** Add lines 3j and 4c			
8 Breakdown of line 7			
[redacted]			
c Excess from 2013. . . . . ____________			
d From 2014. . . . . ____________			
e From 2015. . . . . ____________			

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

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493134062006

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527
▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.
▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2015

Open to Public Inspection

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then
- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then
- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then
- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization	Employer identification number
The Waterbury Young Men's Christian Association	06-0646988

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

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV

2 Political expenditures ▶ $ ____________

3 Volunteer hours ____________

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

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ $ ____________

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ $ ____________

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ **Yes** ☐ **No**

4a Was a correction made? ☐ **Yes** ☐ **No**

b If "Yes," describe in Part IV

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

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ $ ____________

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ $ ____________

3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ $ ____________

4 Did the filing organization file **Form 1120-POL** for this year? ☐ **Yes** ☐ **No**

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

	(a) Name	**(b)** Address	**(c)** EIN	**(d)** Amount paid from filing organization's funds If none, enter -0-	**(e)** Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
2					
3					
4					
5					
6					

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

A Check ▶ ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)

B Check ▶ ☐ if the filing organization checked box A and "limited control" provisions apply

	Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	**(a) Filing organization's totals**	**(b) Affiliated group totals**
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)		
b	Total lobbying expenditures to influence a legislative body (direct lobbying)		
c	Total lobbying expenditures (add lines 1a and 1b)		
d	Other exempt purpose expenditures		
e	Total exempt purpose expenditures (add lines 1c and 1d)		
f	Lobbying nontaxable amount Enter the amount from the following table in both columns		

If the amount on line 1e, column (a) or (b) is:	**The lobbying nontaxable amount is:**
Not over $500,000	20% of the amount on line 1e
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000
Over $17,000,000	$1,000,000

g	Grassroots nontaxable amount (enter 25% of line 1f)		
h	Subtract line 1g from line 1a If zero or less, enter -0-		
i	Subtract line 1f from line 1c If zero or less, enter -0-		
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		

☐ **Yes** ☐ **No**

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

Lobbying Expenditures During 4-Year Averaging Period

	Calendar year (or fiscal year beginning in)	**(a)** 2012	**(b)** 2013	**(c)** 2014	**(d)** 2015	**(e)** Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontaxable amount					
e	Grassroots ceiling amount (150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					

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

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a) Yes	(a) No	(b) Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a Volunteers?		No	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		
c Media advertisements?		No	
d Mailings to members, legislators, or the public?		No	
e Publications, or published or broadcast statements?		No	
f Grants to other organizations for lobbying purposes?		No	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		3,958
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
i Other activities?		No	
j Total Add lines 1c through 1i			3,958
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A **Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

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

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

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

Part IV **Supplemental Information**

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

Return Reference	Explanation
Schedule C, Part II-B, Line 1 DETAILED DESCRIPTION OF THE LOBBYING ACTIVITY	DURING 2015, THE WATERBURY YMCA ENGAGED IN THE FOLLOWING ACTIVITIES TO EDUCATE LEGISLATORS AND ELECTED OFFICIALS ABOUT ITS PROGRAMS AND SERVICES IN THE GREATER WATERBURY, CT AREA - THE EXECUTIVE DIRECTOR SPOKE WITH LEGISLATORS, THEIR STAFF, AND GOVERNMENT OFFICIALS REGARDING FUNDING FOR SPECIFIC PROGRAMS AND OTHER ISSUES RELATING TO THE ORGANIZATION - THE ORGANIZATION PAYS ANNUAL DUES TO THE CT ALLIANCE OF YMCA'S THE CT ALLIANCE MONITORS LEGISLATIVE ACTIVITIES AS THEY RELATE TO YMCA'S IN CT AND ADVOCATES FOR THE BENEFIT OF THESE ORGANIZATIONS BY ATTENDING MEETINGS, CONFERENCES, LEGISLATIVE SESSIONS, ETC
Schedule C, Part II-B, Line 1 DETAILED DESCRIPTION OF THE LOBBYING ACTIVITY	DURING 2015, THE WATERBURY YMCA ENGAGED IN THE FOLLOWING ACTIVITIES TO EDUCATE LEGISLATORS AND ELECTED OFFICIALS ABOUT ITS PROGRAMS AND SERVICES IN THE GREATER WATERBURY, CT AREA - THE EXECUTIVE DIRECTOR SPOKE WITH LEGISLATORS, THEIR STAFF, AND GOVERNMENT OFFICIALS REGARDING FUNDING FOR SPECIFIC PROGRAMS AND OTHER ISSUES RELATING TO THE ORGANIZATION - THE ORGANIZATION PAYS ANNUAL DUES TO THE CT ALLIANCE OF YMCA'S THE CT ALLIANCE MONITORS LEGISLATIVE ACTIVITIES AS THEY RELATE TO YMCA'S IN CT AND ADVOCATES FOR THE BENEFIT OF THESE ORGANIZATIONS BY ATTENDING MEETINGS, CONFERENCES, LEGISLATIVE SESSIONS, ETC

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
The Waterbury Young Men's Christian Association

Employer identification number
06-0646988

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

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

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

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

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

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

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

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

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

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

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

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

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year

▶ ____________

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year

▶ $ ____________

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

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

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

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

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

(i) Revenue included on Form 990, Part VIII, line 1 ▶ $ ____________

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

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

a Revenue included on Form 990, Part VIII, line 1 ▶ $ ____________

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

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

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

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other

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

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

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

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

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

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

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

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

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

		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance	1,038,031	10,810	4,423	0	
b	Contributions	230,521	1,003,700	5,300	4,350	
c	Net investment earnings, gains, and losses	-18,556	23,521	1,087	73	
d	Grants or scholarships					
e	Other expenditures for facilities and programs	0	0	0	0	0
f	Administrative expenses					
g	End of year balance	1,249,996	1,038,031	10,810	4,423	0

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

a Board designated or quasi-endowment ▶ 0 %

b Permanent endowment ▶ 99 51 %

c Temporarily restricted endowment ▶ 0 49 %

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

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

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

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

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		1,351,648		1,351,648
b Buildings		15,101,720	6,776,139	8,325,581
c Leasehold improvements		5,500	828	4,672
d Equipment		2,017,863	1,398,616	619,247
e Other		1,470,250	767,215	703,035
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				11,004,183

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

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

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

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. *(Column (b) must equal Form 990, Part X, col (B) line 13)* ▶		

Part IX **Other Assets.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
(1) RESTRICTED AND DESIGNATED CASH BALANCES	261,533
(2) FINANCING COSTS, NET OF AMORTIZATION	7,217
(3) CONSTRUCTION IN PROGRESS	564,288
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 15.)* . . . . ▶	833,038

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

1. (a) Description of liability	(b) Book value
Federal income taxes	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	0

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	6,798,690
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains (losses) on investments	2a	-116,881		
b	Donated services and use of facilities	2b	486		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d	37,805		
e	Add lines **2a** through **2d**			2e	-78,590
3	Subtract line **2e** from line **1**			3	6,877,280
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	7,023		
b	Other (Describe in Part XIII)	4b	439,596		
c	Add lines **4a** and **4b**			4c	446,619
5	Total revenue Add lines **3** and **4c.**(This must equal Form 990, Part I, line 12)			5	7,323,899

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	6,811,066
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a	486		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII)	2d	37,805		
e	Add lines **2a** through **2d**			2e	38,291
3	Subtract line **2e** from line **1**			3	6,772,775
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	7,023		
b	Other (Describe in Part XIII)	4b	439,596		
c	Add lines **4a** and **4b**			4c	446,619
5	Total expenses Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18)			5	7,219,394

Part XIII Supplemental Information

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

Return Reference	Explanation
Schedule D, Part V, Line 4 Intended uses of endowment funds	THE ORGANIZATION'S ENDOWMENT CONSISTS OF INDIVIDUAL DONOR-RESTRICTED FUNDS ESTABLISHED FOR A VARIETY OF PURPOSES AS REQUIRED BY GENERALLY ACCEPTED ACCOUNTING PRINCIPLES, NET ASSETS ASSOCIATED WITH ENDOWMENT FUNDS ARE CLASSIFIED AND REPORTED BASED ON THE EXISTENCE OR ABSENCE OF DONOR-IMPOSED RESTRICTIONS
Schedule D, Part X, Line 2 FIN 48 (ASC 740) footnote	THE ORGANIZATION BELIEVES THAT IT HAS APPROPRIATE SUPPORT FOR ANY TAX POSITIONS TAKEN, AND AS SUCH, DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS THAT ARE MATERIAL TO THE FINANCIAL STATEMENTS THE ORGANIZATION'S RETURN OF ORGANIZATIONS EXEMPT FROM INCOME TAX (FORM 990) FOR THE YEARS ENDED DECEMBER 31, 2012, 2013, AND 2014 ARE SUBJECT TO EXAMINATION BY THE IRS, GENERALLY FOR THREE YEARS AFTER THEY WERE FILED
Schedule D, Part XI, Line 2(d) Other revenues in audited financial statements not in form 990	SPECIAL EVENT EXPENSES DEDUCTED ON FORM 990 PART VIII LINE 8B - 23264 COST OF GOODS SOLD DEDUCTED ON FORM 990 PART VIII LINE 10B - 14361 REIMBURSEMENT INCLUDED ON FORM 990 PART IX LINE 13 - 180
Schedule D, Part XI, Line 4(b) Other revenues in form 990 not in audited financial statements	PROGRAM FINANCIAL ASSISTANCE BASED ON NEED - IN KIND - 439596
Schedule D, Part XII, Line 2(d) Other expenses in audited financial statements not in form 990	SPECIAL EVENTS EXPENSES DEDUCTED ON FORM 990 PART VIII LINE 8B - 23264 COST OF GOODS SOLD DEDUCTED ON FORM 990 PART VIII LINE 10B - 14361 REIMBURSEMENT INCLUDED ON FORM 990 PART IX LINE 13 - 180
Schedule D, Part XII, Line 4(b) Other expenses in form 990 not in audited financial statements	PROGRAM FINANCIAL ASSISTANCE BASED ON NEED - IN KIND - 439596

Part XIII Supplemental Information ***(continued)***

Return Reference	Explanation

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

OMB No 1545-0047
2015
Open to Public Inspection

Name of the organization
The Waterbury Young Men's Christian Association

Employer identification number
06-0646988

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

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

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

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

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

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

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

Part II **Fundraising Events.**

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

		(a) Event #1 GOLF TOURNAMENT (event type)	**(b)** Event #2 CICCHETTI RACE (event type)	**(c)** Other events 1 (total number)	**(d)** Total events (add col **(a)** through col **(c)**)
Revenue	1 Gross receipts	53,170	15,136	7,895	76,201
	2 Less Contributions	45,042		7,895	52,937
	3 Gross income (line 1 minus line 2)	8,128	15,136	0	23,264
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	12,577			12,577
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	1,606	9,081		10,687
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				23,264
	11 Net income summary Subtract line 10 from line 3, column (d) ▶				0

Part III **Gaming.**

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

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

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

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

b If "No," explain ____________

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

b If "Yes," explain ____________

11 Does the organization conduct gaming activities with nonmembers? ☐ **Yes** ☐ **No**

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

13 Indicate the percentage of gaming activity conducted in

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

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

Name ▶

Address ▶

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

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

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

Name ▶

Address ▶

16 Gaming manager information

Name ▶

Gaming manager compensation ▶ $

Description of services provided ▶

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions

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

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

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

Return Reference	Explanation

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
The Waterbury Young Men's Christian Association

Employer identification number
06-0646988

Part I General Information on Grants and Assistance

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

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

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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

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

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

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

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

(a) Type of grant or assistance	**(b)** Number of recipients	**(c)** Amount of cash grant	**(d)** Amount of non-cash assistance	**(e)** Method of valuation (book, FMV, appraisal, other)	**(f)** Description of non-cash assistance
(1) CHILD CARE ASSIST	214		273,720	Fee Schedule	Program Fees
(2) HEALTH/WELLNESS ASSIST	306		139,663	Fee Schedule	Program Fees
(3) CAMP PROGRAMMING ASSIST	322		26,213	Fee Schedule	Program Fees

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

Return Reference	**Explanation**
Schedule I, Part I, Line 2 Procedures for monitoring use of grant funds	IT IS THE GOAL OF THE WATERBURY YMCA TO PROVIDE SERVICES TO ANY PERSON WHO DESIRES TO PARTICIPATE IN THE ACTIVITIES AND PROGRAMS OF THE YMCA, REGARDLESS OF THEIR ABILITY TO PAY THE STANDARD MEMBERSHIP OR PROGRAM FEE THOSE NOT ABLE TO PAY THE FULL FEE MAY BE AWARDED ASSISTANCE BASED UPON A SLIDING SCALE AND DEMONSTRATED NEED THE WATERBURY YMCA BELIEVES A STRONG SENSE OF OWNERSHIP AND PRIDE IS DEVELOPED IF THE FINANCIAL AID RECIPIENT CONTRIBUTES TO THE COST OF THEIR INVOLVEMENT THEREFORE, APPLICANTS WILL BE ASKED TO PAY A PORTION OF THE FEE ELIGIBILITY IS REVIEWED PRIOR TO THE BEGINNING OF THE NEXT PROGRAM OR MEMBERSHIP PERIOD

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Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
The Waterbury Young Men's Christian Association

Employer identification number
06-0646988

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed on 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 on Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
a	Receive a severance payment or change-of-control payment?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**		No
c	Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	**4c**		No
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	**5a**		No
b	Any related organization? If "Yes," on line 5a or 5b, describe in Part III	**5b**		No
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	**6a**		No
b	Any related organization? If "Yes," on line 6a or 6b, describe in Part III	**6b**		No
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**		No
8	Were any amounts reported on 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" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	**9**		

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation (i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column(B) reported as deferred on prior Form 990
1 James O'Rourke Executive Director	(i)	139,905	0	0	14,470	0	154,375	0
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

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

Return Reference	Explanation

Schedule K (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax Exempt Bonds

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

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
The Waterbury Young Men's Christian Association

Employer identification number
06-0646988

Part I Bond Issues

	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased Yes	(g) Defeased No	(h) On behalf of issuer Yes	(h) On behalf of issuer No	(i) Pool financing Yes	(i) Pool financing No
A	CT HEALTH&ED FACILITIES AUTH CHILD CARE REV BONDS 2015	06-0806186	20774YUS4	04-01-2015	3,808,144	THE 2015 BOND ISSUE WAS AN ADV REFUNDING OF THE 10-23-08 CHEFA BOND ISSUE		X		X	X	

Part II Proceeds

		A	B	C	D
1	Amount of bonds retired				
2	Amount of bonds legally defeased				
3	Total proceeds of issue	3,808,144			
4	Gross proceeds in reserve funds				
5	Capitalized interest from proceeds				
6	Proceeds in refunding escrows	3,808,144			
7	Issuance costs from proceeds				
8	Credit enhancement from proceeds				
9	Working capital expenditures from proceeds				
10	Capital expenditures from proceeds				
11	Other spent proceeds	3,808,144			
12	Other unspent proceeds				
13	Year of substantial completion	2011			

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No
14	Were the bonds issued as part of a current refunding issue?		X						
15	Were the bonds issued as part of an advance refunding issue?	X							
16	Has the final allocation of proceeds been made?	X							
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X							

Part III Private Business Use

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

Part III Private Business Use *(Continued)*

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?		X						
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c	Are there any research agreements that may result in private business use of bond-financed property?		X						
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶								
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶								
6	Total of lines 4 and 5	0 %							
7	Does the bond issue meet the private security or payment test?		X						
8a	Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X						
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of								
c	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12 and 1 145-2?								
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1 141-12 and 1 145-2?	X							

Part IV Arbitrage

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

Part IV Arbitrage *(Continued)*

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

Part V Procedures To Undertake Corrective Action

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

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

Return Reference	Explanation
Schedule K, Part VI	THE ORGANIZATION IS A CONDUIT BORROWER IN A POOLED FINANCING ISSUE TOTAL ISSUE PRICE PER FORM 8038 LINE 18 WAS $35,708,992 THE ORGANIZATION'S ALLOCATED PORTION OF THAT ISSUE PRICE WAS $3,808,144

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SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
The Waterbury Young Men's Christian Association

Employer identification number
06-0646988

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded				
10 Securities—Closely held stock	X	1	27,348	Market value
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (____________)				
26 Other ▶ (____________)				
27 Other ▶ (____________)				
28 Other ▶ (____________)				

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

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

Part II **Supplemental Information.**

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

Return Reference	Explanation
Schedule M, Part I Explanations of reporting method for number of contributions	Securities - Closely held stock THE ORGANIZATION IS REPORTING THE NUMBER OF NONCASH CONTRIBUTIONS

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SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization	Employer identification number
The Waterbury Young Men's Christian Association	06-0646988

Return Reference	Explanation
Form 990, Part I, Line 1 CONTINUED MISISON	THE BY-LAWS OF THE WATERBURY YOUNG MEN'S CHRISTIAN ASSOCIATION STATE THAT THE MISSION OF THE WATERBURY YOUNG MEN'S CHRISTIAN ASSOCIATION IS "TO PUT CHRISTIAN PRINCIPLES INTO PRACTICE THROUGH PROGRAMS THAT DEVELOP HEALTHY SPIRIT, MIND, AND BODY FOR ALL " THE MISSION SUPPORTS ITS CHARITABLE WORK AND PROVIDES THE FOUNDATION OF THE PROGRAMS AND SERVICES FOR THE CONSTITUENTS IN THE COMMUNITY THAT PROMOTES YOUTH DEVELOPMENT, HEALTHY LIVING, AND SOCIAL RESPONSIBILITY ESTABLISHED 158 YEARS AGO, THE WATERBURY YMCA HAS BEEN ABLE TO OFFER A SUPPORTIVE NETWORK FOR COMMUNITY MEMBERS AND PROGRAM PARTICIPANTS THROUGHOUT ITS HISTORY THE WATERBURY YMCA IS A CHARITABLE, COMMUNITY AND SOCIAL SERVICE ORGANIZATION THAT CONSISTS OF MEN, WOMEN AND CHILDREN OF ALL AGES, ABILITIES, INCOMES, ETHNICITY, AND RELIGIONS IT IS DEDICATED TO YOUTH DEVELOPMENT, HEALTHY LIVING, AND SOCIAL RESPONSIBILITY, AND ACCOMPLISHES THESE GOALS BY OFFERING PROGRAMS THAT ADDRESS THE NEEDS OF THE GREATER WATERBURY COMMUNITY IN 2015, THE WATERBURY YMCA WAS ABLE TO OFFER FINANCIAL ASSISTANCE TO INDIVIDUALS AND FAMILIES TOTALING MORE THAN $440,000, THEREBY GRANTING ACCESS TO MEMBER SERVICES AND PROGRAMS THESE FUNDS WERE MADE AVAILABLE AS A DIRECT RESULT OF THE GENEROSITY OF YMCA SUPPORTERS WHO CONTRIBUTED OVER $173,000 TO THE YMCA COMMUNITY SUPPORT CAMPAIGN FACILITIES THE FACILITIES CURRENTLY OWNED BY THE WATERBURY YMCA ALLOW US TO DO OUR CHARITABLE WORK AND PROVIDE PROGRAM SERVICES TO THE COMMUNITY THESE FACILITIES INCLUDES A 60,000 SQUARE FOOT HANDICAPPED ACCESSIBLE BUILDING IN WATERBURY, CT, AN 80-ACRE OUTDOOR CENTER/CAMP FACILITY IN WATERTOWN, CT, A DAY CAMP PROGRAM ON THE SOUTHBURY TRAINING SCHOOL PROPERTY IN SOUTHBURY, CT AS WELL AS 7 OFF-SITE CHILDCARE PROGRAMS IN THE GREATER WATERBURY AREA

Return Reference	Explanation
Form 990, Part I, Line 6	THE YMCA HAD 21 POLICY MAKING VOLUNTEERS AND MORE THAN 181 PROGRAM VOLUNTEERS WHO MADE SIGNIFICANT CONTRIBUTIONS OF THEIR TIME IN THE FURTHERANCE OF YMCA ACTIVITIES BY ACTING AS MENTORS, COACHES, PROGRAM LEADERS, INSTRUCTORS AND MORE. THESE SERVICES DO NOT MEET THE CRITERIA FOR RECOGNITION AS CONTRIBUTIONS, THEREFORE, THEIR VALUE IS NOT REFLECTED IN THIS FORM 990

Return Reference	Explanation
Form 990, Part VI, Line 11b Review of form 990 by governing body	THE ORGANIZATION'S BOARD OF DIRECTORS HAS ASSIGNED THE DUTY OF REVIEWING THE ANNUAL 990 TO ITS STANDING FINANCE COMMITTEE THE ANNUAL 990 IS PREPARED BY THE ORGANIZATION'S ACCOUNTING FIRM WORKING CLOSELY WITH THE FINANCE DIRECTOR AND EXECUTIVE DIRECTOR COPIES OF THE COMPLETED RETURN ARE PROVIDED TO ALL MEMBERS OF THE FINANCE COMMITTEE FOR REVIEW UPON REVIEW BY THE FINANCE COMMITTEE, COPIES OF THE 990 FORM ARE PROVIDED TO ALL BOARD OF DIRECTOR MEMBERS

Return Reference	Explanation
Form 990, Part VI, Line 12c Conflict of interest policy	ALL BOARD OF DIRECTOR MEMBERS, OFFICERS AND KEY EMPLOYEES OF THE ORGANIZATION ARE REQUIRED TO COMPLETE A CONFLICT OF INTEREST STATEMENT OF DISCLOSURE ANNUALLY THIS DISCLOSURE STATEMENT REQUIRES THE INDIVIDUAL TO ANSWER A SERIES OF QUESTIONS REGARDING TRANSACTIONS, EVENTS AND CIRCUMSTANCES WHICH COULD LEAD TO CONFLICTS OF INTEREST THE DISCLOSURE STATEMENT ALSO REQUIRES THE INDIVIDUAL TO SIGN THAT THEY HAVE READ AND UNDERSTAND THE ORGANIZATION'S CONFLICT OF INTEREST POLICY AND THAT THEIR RESPONSES TO THE QUESTIONS ARE COMPLETE AND ACCURATE THE COMPLETED ANNUAL CONFLICT OF INTEREST DISCLOSURE STATEMENTS ARE REVIEWED BY THE EXECUTIVE DIRECTOR AND FINANCE DIRECTOR OF THE ORGANIZATION THE EXECUTIVE DIRECTOR AND FINANCE DIRECTOR CONTACT ANY INDIVIDUAL IF THERE ARE QUESTIONS OR ANSWERS TO QUESTIONS ON THE DISCLOSURE STATEMENT THAT NEED CLARIFICATION OR FURTHER RESEARCH IF IT IS DETERMINED THAT A CONFLICT DOES EXIST WITH RESPECT TO A MATTER, THE ORGANIZATION ENFORCES THE POLICY BY MAKING SURE THAT THE PERSON WITH THE CONFLICT DOES NOT PARTICIPATE IN THE DECISION-MAKING PROCESS CONTEMPORANEOUS DOCUMENTATION IS MAINTAINED OF HOW ALL CONFLICT MATTERS ARE RESOLVED THE FINANCE DIRECTOR MAINTAINS RECORDS OF INDIVIDUAL BUSINESS TRANSACTIONS AND RELATIONSHIPS REPORTED ON THE DISCLOSURE STATEMENTS AS WELL AS KNOWN TRANSACTIONS FROM ACCOUNTS PAYABLE AND GENERAL LEDGER RECORDS THESE TRANSACTIONS AND OTHER CONFLICT MATTERS ARE COMPILED AND PROVIDED TO THE ORGANIZATION'S ACCOUNTING FIRM FOR INCLUSION IN THE ANNUAL 990 RETURN AS NECESSARY

Return Reference	Explanation
Form 990, Part VI, Line 15a Process to establish compensation of top management official	THE EXECUTIVE COMPENSATION COMMITTEE, COMPRISED OF THE CURRENT WATERBURY YMCA BOARD OF DIRECTORS EXECUTIVE COMMITTEE, ALLOWS THE ORGANIZATION TO TAKE A SYSTEMATIC APPROACH TO MANAGING ITS EXECUTIVE COMPENSATION PLAN THIS IS A BODY OF VOLUNTEERS WITH KNOWLEDGE OF THE KEY EMPLOYEES' CONTRIBUTIONS TO THE ORGANIZATION WHO HAVE NO PROFESSIONAL ASSOCIATIONS/BUSINESS RELATIONSHIP WITH THE PERSONS UNDER REVIEW THE EXECUTIVE COMPENSATION COMMITTEE HAS THE AUTHORITY TO DETERMINE THE TOTAL COMPENSATION PACKAGES OF ITS EXECUTIVES AND COMPLY WITH INTERNAL SANCTIONS ALSO, THIS COMMITTEE COMPLETES THE EXECUTIVE DIRECTOR'S PERFORMANCE REVIEW THE ROLE OF THE EXECUTIVE COMPENSATION COMMITTEE IS TO PROVIDE THE NECESSARY DIRECTION TO THE OVERSIGHT OF THE ORGANIZATION'S EXECUTIVE COMPENSATION PROGRAM AND TO *DEVELOP THE TOTAL COMPENSATION AND BENEFITS PACKAGE OF THE EXECUTIVE DIRECTOR *REVIEW THE RECOMMENDATIONS OF THE EXECUTIVE DIRECTOR REGARDING COMPENSATION FOR THE FINANCE DIRECTOR AND ASSOCIATE EXECUTIVE DIRECTOR *PROVIDE AN ANNUAL REPORT TO THE BOARD OF DIRECTORS SOURCE OF COMPARABLE DATA THE OBJECTIVE IS TO SEEK TOTAL COMPENSATION DATA OBTAINED FROM AN INDEPENDENT SOURCE, IF POSSIBLE IN OUR CASE THE COMMITTEE CHAIR UTILIZED YUSA DATA AND BENCHMARKED AMONG A NUMBER OF OTHER YMCAS REPORT ESTABLISHED BY THE COMPENSATION COMMITTEE THE REPORT STATES THE ESTABLISHED COMPENSATION FOR THE EXECUTIVE DIRECTOR, FINANCE DIRECTOR, AND THE ASSOCIATE EXECUTIVE DIRECTOR THE COMMITTEE HAS THE OPPORTUNITY TO REVIEW THE EXECUTIVE COMPENSATION REPORT, SUCH SAID REPORT NOTED IN THE ASSOCIATION'S MINUTES

Return Reference	Explanation
Form 990, Part VI, Line 15b Process to establish compensation of other employees	THE PROCESS FOR DETERMINING COMPENSATION AMOUNTS FOR THE ORGANIZATION'S FINANCE DIRECTOR AND ASSOCIATE EXECUTIVE DIRECTOR ARE INCLUDED IN THE EXECUTIVE COMPENSATION COMMITTEE PROCESS AND PROCEDURES AS OUTLINED ABOVE FOR THE ORGANIZATION'S EXECUTIVE DIRECTOR

Return Reference	Explanation
Form 990, Part VI, Line 19 Required documents available to the public	THE ORGANIZATION'S ANNUAL 990 FILING IS AVAILABLE FOR INSPECTION ON THE PUBLICLY AVAILABLE WEBSITE GUIDE STAR THE ORGANIZATION'S ANNUAL 990 FILING AND ANNUAL CERTIFIED AUDIT ARE AVAILABLE FOR PUBLIC INSPECTION AT THE CONNECTICUT PUBLIC CHARITIES UNIT OF THE CONNECTICUT ATTORNEY GENERAL'S OFFICE IN HARTFORD CT THE ORGANIZATION REGISTERS ANNUALLY UNDER THE CT SOLICITATION OF CHARITABLE FUNDS ACT AND SUBMITS THESE DOCUMENTS ANNUALLY AS REQUIRED THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, ANNUAL AUDITED FINANCIAL STATEMENTS AND ANNUAL 990 FILING ARE AVAILABLE FOR INSPECTION BY MEMBERS OF THE PUBLIC AT THE ORGANIZATION'S PLACE OF BUSINESS DURING NORMAL BUSINESS HOURS APPOINTMENTS FOR REVIEW OF THESE DOCUMENTS MUST BE MADE WITH THE ORGANIZATION'S FINANCE DIRECTOR IN ADVANCE

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

Return Reference	Explanation
Form 990 Additional Information	OTHER INFORMATION RELATED TO PROGRAM AND COMMUNITY SERVICES THE WATERBURY YMCA STRIVES TO SERVE A BROAD CROSS SECTION OF ITS COMMUNITY ENSURING SERVICES ARE ACCESSIBLE AND AFFORDABLE TO THE COMMUNITY AT LARGE FINANCIAL ASSISTANCE IS MADE AVAILABLE TO THOSE WHO CAN'T AFFORD THE FULL FEE THIS IS MADE POSSIBLE BY THE SUPPORT RECEIVED FROM THE GREATER WATERBURY UNITED WAY, YMCA COMMUNITY SUPPORT CAMPAIGN, AND THROUGH THE GENEROSITY OF OTHER FOUNDATIONS AND DONORS