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DLN: 93493045035037

OMB No 1545-0047

Department of the Treasury

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

Return of Organization Exempt From Income Tax

▶ Information about Form 990 and its instructions is at <u>www IRS gov/foim990</u>

nterna	al Rev	enue Servic	ce					
A Fo	or the	e 2015 ca	lendar year, or tax year begi	nning 07-01-2015 , and ending 06-30-20	16			
3 Che	eck if	applicable	C Name of organization YOUNG WOMEN'S CHRISTIAN A	SSOCIATION OF		D Empl	oyer id	lentification number
_		change	YORK PA			23-1	3608	89
	ame cl itial re	hange eturn	Doing business as YWCA YORK					
Eturn/	termı		Number and street (or P O box 320 EAST MARKET STREET	(If mail is not delivered to street address) Room/si	uite	E Teleph		mber -2631
		d return on pending	City or town, state or province, YORK, PA 17403	country, and ZIP or foreign postal code			-	
			,		1		· ·	s \$ 7,510,079
			F Name and address of pri JEAN M TREUTHART	ncipal officer		s this a grou		
			320 EAST MARKET STREE	ET		ubordinates? No	,	☐ Yes 🗸
			YORK,PA 17403		н(b) А	re all suborc	linates	S
[la:	x-exe	mpt status	✓ 501(c)(3)	(insert no) 4947(a)(1) or 527		ncluded?	امانت	
W	ebsit	e:▶ WW	/W YWCAYORK ORG			Group exemp		t (see instructions)
€ Form	n of o	rganization	✓ Corporation Trust As	sociation Other ►		of formation 1		M State of legal domicile PA
			T# Conportation Mast Ma	sociation Carlot I				
Pa	rt I	_	mary					
	l		-	sion or most significant activities WOMEN, AND PROMOTE PEACE, JUSTI	CE EREE	DOM AND F	JIGNI.	TY FOR ALI
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2	-							
Ě								
Governance	2	Check th	is box > If the organization	on discontinued its operations or disposed	of more th	ian 25% of it	s net a	assets
5 ×	3	Number	of voting members of the gov	erning body (Part VI, line 1a)			з	22
~ 			-	ers of the governing body (Part VI, line 1b)			4	21
Ě			•	in calendar year 2015 (Part V, line 2a)			5	206
Activities &	6	Total nur	mber of volunteers (estimate	ıf necessary)			6	301
4	7a	Total unr	elated business revenue fror	m Part VIII, column (C), line 12			7a	0
	ь №	let unrela	ated business taxable income	e from Form 990-T, line 34			7b	(
						Prior Year		Current Year
	8	8 Contributions and grants (Part VIII, line 1h)			4,150	,794	3,873,381	
ĢNL	9	Progra	am service revenue (Part VII	2,284	,065	1,793,105		
Ravenua	10	Invest	tment income (Part VIII, col	243	,167	188,849		
α	11	Other	revenue (Part VIII, column	(A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-14	,153	2,286
	12	Totalı 12)	revenue—add lines 8 through	n 11 (must equal Part VIII, column (A), lır	ne	6,663	,873	5,857,621
	13	Grants	s and sımılar amounts paıd (F	Part IX, column (A), lines 1-3)		140	,425	79,846
	14	Benefi	ts paid to or for members (Pa	art IX, column (A), line 4)			0	(
SS.	15	Saları 5–10)		oloyee benefits (Part IX, column (A), lines		4,008	,222	4,086,668
Expenses	16a	•		t IX, column (A), line 11e)			0	(
ă	ь	Total fu	ındraısıng expenses (Part IX, colum	n (D), line 25) ▶162,763				
ш	17	Other	expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		2,687	,508	2,395,794
	18	Total	expenses Add lines 13-17	(must equal Part IX, column (A), line 25)		6,836	,155	6,562,308
	19	Reven	ue less expenses Subtract l	line 18 from line 12		-172	,282	-704,687
Net Assets or Fund Balances					Beginni	ing of Current	Year	End of Year
alai	20	Total	assets (Part X, line 16) .			13,012	,849	12,658,416
Z A	21					2,567	,239	3,230,017
ŠĪ	22	Netas	ssets or fund balances Subtr	ract line 21 from line 20		10,445	,610	9,428,399
Par	t II	Sign	ature Block					
ny kr prepa Sign	nowle rer h	edge and l	belief, it is true, correct, and nowledge	examined this return, including accompai complete Declaration of preparer (other t				
Here	=		ABETH DELLINGER PRESIDENT or print name and title					
		 	rınt/Type preparer's name		Date	Charle -	PTIN	
Paid	k		OOUGLAS L BERMAN	DOUGLAS L BERMAN	2017-01-30	Check ıf self-employed		69555
Pre	par	er ⊢	Firm's name RKL LLP	OAD DO DOV 34 430		Firm's EIN ►		
امما	Δ.,	F	Firm's address 🟲 3501 CONCORD R	OAD PO BOX 21439		Phone no (71	7) 843-	3804

YORK, PA 17402

Use Only

. ✓Yes No

Check if Schedule Contains a response or mote to any line in this Part III. The Bridy describe the organization's mission HE PURPOSE OF YEAR OWNER IS TO WORK PROACTIVELY AND COLLABORATIVELY TO PROVIDE PROGRAMS THAT PROMOTE SACIAL JUSTICE, EMPO WER WOMEN, ELIMINATE DOMESTIC VIOLENCE, SEXUAL ASSAULT AND OTHER VIOLENT CRIMES, AND STRENGTHEN OUR COMMUNITY Did the organization undertake any significant program services during the year which were not listed on the prior form 590 or 990-E27 Did the organization undertake any significant program services during the year which were not listed on the prior form 590 or 990-E27 Did the organization undertake any significant program services during the year which were not listed on the prior form 590 or 990-E27 Did the organization classe conducting, or make significant changes in how it conducts, any program services, as measured by experience. Section 501(c)(1) and 511(c)(4) urganizations are required to report the largest program services, as measured by experience. Section 501(c)(1) and 511(c)(4) urganizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. 40 (Code) (Ferenses \$ 3,176,422 induling grants of \$ 47,703) (Rovenue \$ 1,176,688) CHIODEN AND TOURING ROWNING ON THE CHIODEN AND TOURING ROWNING CHIODEN CONTROL OF CHIODEN AND TOURING ROWNING ROWNI	Forn	n 990 (2015) Page 2
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VICTIMS SERVICES THE VICTIM SERVICES DEPARTMENT OF YWCA YORK, AS RECOGNIZED BY THE PENNSYLVANIA COALITION AGAINST DOMESTIC VIOLENCE AND THE PENNSYLVANIA COALITION AGAINST RAPE, IS THE ONLY COMPREHENSIVE VICTIM SERVICES PROVIDER IN YORK COUNTY, OFFERING 24-HOUR HOTLINE ASSISTANCE, EMERGENCY SHELTER, TRANSITIONAL HOUSING, INFORMATION AND REFERRAL, HOSPITAL RESPONSE, INDIVIDUAL AND GROUP COUNSELING FOR ADULTS AND CHILDREN, LEGAL ADVOCACY, MEDICAL ADVOCACY, ABUSE AND SEXUAL VIOLENCE PREVENTION EDUCATION AND COMMUNITY OUTREACH FISCAL YEAR 2015-2016 ACCOMPLISHMENTS * 1,819 HOTLINE CALLS WERE RECEIVED * REACHED 17,107 COMMUNITY MEMBERS THROUGH PREVENTION ACTIVITIES * PROVIDED EMERGENCY SHELTER OR TRANSITIONAL HOUSING TO 254 ADULTS AND 178 CHILDREN * PROVIDED COUNSELING SERVICES TO 1,009 CLIENTS * PROVIDED 104 INDIVIDUALS WITH ASSISTANCE AT LOCAL HOSPITALS * PROVIDED 6,582 NIGHTS OF SHELTER TO VICTIMS OF DOMESTIC VIOLENCE AND THEIR CHILDREN * LEGAL REPRESENTATION TO 82 CLIENTS * LEGAL ADVOCACY PROVIDED TO 272 CLIENTS 4C (Code) (Expenses \$ 586,853 including grants of \$ 1,116) (Revenue \$ 378,241) HEALTH & FITNESS OUR FITNESS AND AQUATICS DEPARTMENTS AIM TO IMPROVE THE QUALITY OF LIFE FOR PEOPLE OF ALL AGES THROUGH PHYSICAL FITNESS AND HEALTH EDUCATION PROGRAMS AIM TO REVENT HEALTH PROBLEMS IN ADULTS AND DEVELOP HEALTHY HABITS IN YOUTH OUR PROGRAMS STRENGTHEN BODIES AND BUILD SELF-ESTEM AND CONFIDENCE YOUNG PEOPLE LEARN THE VALUE OF TEAMWORK AND THE IMPORTANCE OF SAFETY WHILE DEVELOPING SKILLS THAT WILL LAST A LIFETIME FISCAL YEAR 2015-2016 ACCOMPLISHMENTS * 18 INDIVIDUALS RECEIVED SCHOLARSHIPS TO PARTICIPATE IN YWCA YORK FITNESS/AQUATICS PROGRAM OFFERINGS * 401 PEOPLE PARTICIPATED IN SWIM LESSONS * CONTINUED TO OFFER A VARIETY OF NEW FITNESS CLASSES INCLUDING GROUP POWER, AQUA ZUMBA, PROGRAMS FOR SILVER SNEAKERS MEMBERS, AND A SYNCHRONIZED SWIMMING CLASS FOR THOSE 70+ YEARS OF AGE SINCE 2008, YWCA YORK'S COUNCIL OF THE NATIONAL HOLD SCILLES IN THE NUT HAD SOLID AS THE RUN HAS BEEN ENCOURAGED TO FRENCH THE RUN THAT OF		WE SERVE INFANTS, TODDLERS, PRESCHOOLERS, AND SCHOOL-AGE CHILDREN OUR CLASSROOMS ARE PLACES WHERE CHILDREN DEVELOP EARLY LITERACY AND MATH SKILLS, AND LEARN TO RESPECT THE EARTH AND EACH OTHER OUR COMMITMENT TO END DISCRIMINATION AND PROMOTE PEACE, JUSTICE, FREEDOM AND DIGNITY FOR ALL PEOPLE IS REFLECTED THROUGHOUT OUR CURRICULUM, SPECIAL EVENTS AND CLASSROOMS AS CAREGIVERS TO APPROXIMATELY 500 CHILDREN, WE ARE COMMITTED TO REDUCING THE STRESS OF WORKING PARENTS WHO RELY ON US FOR AFFORDABLE AND QUALITY CHILD CARE PROGRAMS OUR YOUTH PROGRAMS (TEMPLE GUARD DRILL TEAM AND THE QUANTUM OPPORTUNITIES PROGRAM) FOCUS ON THE STRENGTHS OF YOUNG PEOPLE AND CHALLENGE THEM TO EXPECT AND CREATE GREAT THINGS IN THEIR LIVES AS SUCH, YOUTH HAVE THE OPPORTUNITY TO EXPLORE NEW WORLDS, DISCOVER THEIR FULL POTENTIAL, AND DEVELOP TOWARD HEALTHY ADULTHOOD THE TEMPLE GUARD DRILL TEAM IS A MENTORING PROGRAM BASED ON DISCIPLINE AND FOCUS THAT TRAINS YOUTH IN GRADES K-12 IN MILITARY-STYLE BOOT CAMP MARCHING AND DANCE DRILL TEAM MEMBERS PERFORM APPROXIMATELY TWICE A MONTH ACROSS THE MID-STATE REGION THE QUANTUM OPPORTUNITIES PROGRAM (QOP) IS AN AFTER-SCHOOL PROGRAM FOR YOUTH IN GRADES 9-12 THAT FOCUSES ON EDUCATION, COMMUNITY SERVICE, AND LIFE-SKILLS DEVELOPMENT PROGRAM PARTICIPANTS FULFILL DAILY REQUIREMENTS AND EARN INCENTIVE ESCROW PAYMENTS TO HELP FUND CONTINUING EDUCATION AND THE EXPENSES ASSOCIATED WITH HIGHER EDUCATION FISCAL YEAR 2015-2016 ACCOMPLISHMENTS - LEARNING CENTERS * A TOTAL OF 500 CHILDREN AND THEIR FAMILIES WERE SUPPORTED THROUGH YWCA LICENSED LEARNING PROGRAMS * PROVIDED 194 YOUTH WITH A SUMMER CAMP FULL OF EDUCATIONAL EXPERIENCES AT CAMP CANN-EDI-ON OR THROUGH THE SUMMER EXPLORERS PROGRAM * MORE THAN 78% OF OUR YWCA CHILDREN RECEIVED FINANCIAL ASSISTANCE IN FISCAL YEAR 2015-2016 (PACACOMPLISHMENTS - YOUTH PROGRAMS * OF THE 50 YOUTH SERVED IN THE QUANTUM OPPORTUNITIES PROGRAM (OR QOP) > 100% OF THE PARTICIPANTS REMAINED IN SCHOOL > 100% OF THE PARTICIPANTS ACHIEVED A GPA OF 2 0 OR HIGHER > 100% OF QOP SENIORS GRADUATE
VICTIMS SERVICES THE VICTIM SERVICES DEPARTMENT OF YWCA YORK, AS RECOGNIZED BY THE PENNSYLVANIA COALITION AGAINST DOMESTIC VIOLENCE AND THE PENNSYLVANIA COALITION AGAINST RAPE, IS THE ONLY COMPREHENSIVE VICTIM SERVICES PROVIDER IN YORK COUNTY, OFFERING 24-HOUR HOTLINE ASSISTANCE, EMERGENCY SHELTER, TRANSITIONAL HOUSING, INFORMATION AND REFERRAL, HOSPITAL RESPONSE, INDIVIDUAL AND GROUP COUNSELING FOR ADULTS AND CHILDREN, LEGAL ADVOCACY, MEDICAL ADVOCACY, ABUSE AND SEXUAL VIOLENCE PREVENTION EDUCATION AND COMMUNITY OUTREACH FISCAL YEAR 2015-2016 ACCOMPLISHMENTS * 1,819 HOTLINE CALLS WERE RECEIVED * REACHED 17,107 COMMUNITY MEMBERS THROUGH PREVENTION ACTIVITIES * PROVIDED EMERGENCY SHELTER OR TRANSITIONAL HOUSING TO 254 ADULTS AND 178 CHILDREN * PROVIDED COUNSELING SERVICES TO 1,009 CLIENTS * PROVIDED 104 INDIVIDUALS WITH ASSISTANCE AT LOCAL HOSPITALS * PROVIDED 6,582 NIGHTS OF SHELTER TO VICTIMS OF DOMESTIC VIOLENCE AND THEIR CHILDREN * LEGAL REPRESENTATION TO 82 CLIENTS * LEGAL ADVOCACY PROVIDED TO 272 CLIENTS 4C (Code) (Expenses \$ 586,853 including grants of \$ 1,116) (Revenue \$ 378,241) HEALTH & FITNESS OUR FITNESS AND AQUATICS DEPARTMENTS AIM TO IMPROVE THE QUALITY OF LIFE FOR PEOPLE OF ALL AGES THROUGH PHYSICAL FITNESS AND HEALTH EDUCATION PROGRAMS AIM TO REVENT HEALTH PROBLEMS IN ADULTS AND DEVELOP HEALTHY HABITS IN YOUTH OUR PROGRAMS STRENGTHEN BODIES AND BUILD SELF-ESTEM AND CONFIDENCE YOUNG PEOPLE LEARN THE VALUE OF TEAMWORK AND THE IMPORTANCE OF SAFETY WHILE DEVELOPING SKILLS THAT WILL LAST A LIFETIME FISCAL YEAR 2015-2016 ACCOMPLISHMENTS * 18 INDIVIDUALS RECEIVED SCHOLARSHIPS TO PARTICIPATE IN YWCA YORK FITNESS/AQUATICS PROGRAM OFFERINGS * 401 PEOPLE PARTICIPATED IN SWIM LESSONS * CONTINUED TO OFFER A VARIETY OF NEW FITNESS CLASSES INCLUDING GROUP POWER, AQUA ZUMBA, PROGRAMS FOR SILVER SNEAKERS MEMBERS, AND A SYNCHRONIZED SWIMMING CLASS FOR THOSE 70+ YEARS OF AGE SINCE 2008, YWCA YORK'S COUNCIL OF THE NATIONAL HOLD SCILLES IN THE NUT HAD SOLID AS THE RUN HAS BEEN ENCOURAGED TO FRENCH THE RUN THAT OF	4h	/Codo \/Expansos \$ 1.074.368 including grapts of \$ 31.027 \/Payania \$ 263.563 \
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See Additional Data	- *C	HEALTH & FITNESS OUR FITNESS AND AQUATICS DEPARTMENTS AIM TO IMPROVE THE QUALITY OF LIFE FOR PEOPLE OF ALL AGES THROUGH PHYSICAL FITNESS AND HEALTH EDUCATION PROGRAMS AIM TO PREVENT HEALTH PROBLEMS IN ADULTS AND DEVELOP HEALTHY HABITS IN YOUTH OUR PROGRAMS STRENGTHEN BODIES AND BUILD SELF-ESTEEM AND CONFIDENCE YOUNG PEOPLE LEARN THE VALUE OF TEAMWORK AND THE IMPORTANCE OF SAFETY WHILE DEVELOPING SKILLS THAT WILL LAST A LIFETIME FISCAL YEAR 2015-2016 ACCOMPLISHMENTS * 18 INDIVIDUALS RECEIVED SCHOLARSHIPS TO PARTICIPATE IN YWCA YORK FITNESS/AQUATICS PROGRAM OFFERINGS * 401 PEOPLE PARTICIPATED IN SWIM LESSONS * CONTINUED TO OFFER A VARIETY OF NEW FITNESS CLASSES INCLUDING GROUP POWER, AQUA ZUMBA, PROGRAMS FOR SILVER SNEAKERS MEMBERS, AND A SYNCHRONIZED SWIMMING CLASS FOR THOSE 70+ YEARS OF AGE SINCE 2008, YWCA YORK'S COUNCIL OF THE NATIONWIDE GIRLS ON THE RUN HAS BEEN ENCOURAGING THE DEVELOPMENT OF YOUNG GIRLS IN A HOLISTIC MANNER, ADDRESSING THE PHYSICAL, MENTAL, EMOTIONAL, AND SOCIAL SELF THE MISSION OF GIRLS ON THE RUN IS TO EDUCATE AND PREPARE GIRLS FOR A LIFETIME OF SELF-RESPECT AND HEALTHY LIVING THROUGH RUNNING ACTIVITIES, IMPORTANT ISSUES LIKE SELF-ESTEEM, CHARACTER, AND NUTRITION ARE TAUGHT AND CULTIVATED LAST YEAR, GIRLS ON THE RUN IN YORK COUNTY HAD 295 PARTICIPANTS AT 18 DIFFERENT ELEMENTARY AND MIDDLE SCHOOLS AT THE CONCLUSION OF THE 12-WEEK PROGRAM, THE GIRLS ARE ENCOURAGED TO RACE IN A SPECIAL SK JUST FOR THEM SYNCHRONIZED SWIMTING IS AN EXCITING AND CHALLENGING SPORT THAT COMBINES BALLET AND GYMNASTIC MOVES CURRENTLY, YWCA YORK OFFERS THE ONLY SYNCHRONIZED SWIM TEAM IN YORK COUNTY, THE SYNCHRO-ETTES THIS PAST YEAR, 39 GIRLS RANGING FROM 2ND TO 11TH GRADE PARTICIPATED IN THE SYNCHRO-ETTES THROUGH THEIR INSTRUCTION AT YWCA YORK AS WELL AS THROUGH CLINICS CONDUCTED BY USA OLYMPIC SWIMMERS, THESE GIRLS LEARNED BOTH ABOVE AND BELOW WATER PERFORMANCE SKILLS AND TECHNIQUES EACH YEAR, THE TEAM CONDUCTS ORGANIZED SHOWS FOR THE PUBLIC IN OUR FACILITY
		See Additional Data

(Expenses \$ 27,211

4e Total program service expenses ▶

4d

Other program services (Describe in Schedule O)

including grants of \$ 5,764,874

) (Revenue \$

22,613)

Par	t 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		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 2	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	Yes	
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			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11 b	Yes	
	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	11 c		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 💆	11 d		No
е	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	11 f	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		

Pai	rt IV Checklist of Required Schedules (continued)	
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part	22

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,"

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

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?

26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

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

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M .

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified

33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations

entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Pait I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV,

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.

an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

1

23

24a

24b

24c

24d

25a

25b

26

27

28a

28b

28c

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34

35a

35b

36

37

38

Yes

Form 990 (2015)

Yes

Page 4

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

to defease any tax-exempt bonds?

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

Yes

Νo

Nο

Nο

Νo

Νo

Nο

Νo

Νo

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Νo

Νo

Nο

Νo

Νo

Nο

Νo

Νo

Par	t V	Statements Regarding Other IRS Filings and Tax Compliance	е				
		Check if Schedule O contains a response or note to any line in this	Part	<u>V</u>			. 🗸
10	Entor	the number reported in Box 2 of Form 1006 Enter 10 if not applicable	1-	ا د د		Yes	No
		the number reported in Box 3 of Form 1096 Enter -0- if not applicable the number of Forms W-2G included in line 1a Enter -0- if not applicable	1a 1b	23			
		''					
С		ne organization comply with backup withholding rules for reportable payments to ng (gambling) winnings to prize winners?	veno •	ors and reportable	1c	Yes	
2a	-	the number of employees reported on Form W-3, Transmittal of Wage and					
		tatements, filed for the calendar year ending with or within the year covered s return	2a	206			
b	•	east one is reported on line 2a, did the organization file all required federal emp			2b	Yes	
_		If the sum of lines 1a and 2a is greater than 250, you may be required to e-file					
3a	Did th	ne organization have unrelated business gross income of \$1,000 or more during	the '	year [,]	3a		Νo
b	If "Yes	s," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanatio</i>	on in S	Schedule O	3b		
4a		y time during the calendar year, did the organization have an interest in, or a si a financial account in a foreign country (such as a bank account, securities acc					
		int)?	.ounc	, or other illiancial	4a		Νo
b	If"Ye	s," enter the name of the foreign country					
		nstructions for filing requirements for FinCEN Form 114, Report of Foreign Bank	and	Financial Accounts			
- -	(FBAR	•	_ 41	h2			NI -
		he organization a party to a prohibited tax shelter transaction at any time durin ny taxable party notify the organization that it was or is a party to a prohibited t			5a		No No
			u	icitei tialisactiVIIr	5b		NO
С	ır "Ye:	s," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6 a		the organization have annual gross receipts that are normally greater than \$10			6a		No
L	_	ization solicit any contributions that were not tax deductible as charitable cont s," did the organization include with every solicitation an express statement th					
U		not tax deductible?		· · · ·	6b		
7	Organ	nizations that may receive deductible contributions under section 170(c).					
а		ne organization receive a payment in excess of \$75 made partly as a contributions of the payor?	on an	d partly for goods and	7a	Yes	
b		s," did the organization notify the donor of the value of the goods or services pi	ovide	ed?	7b	Yes	
		e organization sell, exchange, or otherwise dispose of tangible personal proper					
		orm 82827	·:		7 c		No
a	IT Ye	s," indicate the number of Forms 8282 filed during the year	7d				
е	Dıd th	ne organization receive any funds, directly or indirectly, to pay premiums on a p	ersor	nal benefit contract?	7e		No
f	Did th	ne organization, during the year, pay premiums, directly or indirectly, on a perso	nal b	enefit contract?	7 f		No
g	If the require	organization received a contribution of qualified intellectual property, did the or	rganız	zation file Form 8899 as	7 g		
h	•	organization received a contribution of cars, boats, airplanes, or other vehicles	· · ·	the organization file a	, 9		
		1098-C?			7h		
8	Did a	soring organizations maintaining donor advised funds. donor advised fund maintained by the sponsoring organization have excess bus g the year?	sines:	s holdings at any time	8		
9 a	Did th	ne sponsoring organization make any taxable distributions under section 49667			9a		
b	Did th	ie sponsoring organization make a distribution to a donor, donor advisor, or rela	ted p	erson?	9b		
10	Section	on 501(c)(7) organizations. Enter					
		tion fees and capital contributions included on Part VIII, line 12	10a				
b	Gross faciliti	receipts, included on Form 990, Part VIII, line 12, for public use of club les	10b				
11		on 501(c)(12) organizations. Enter					
а	Gross	income from members or shareholders	11a				
b		nncome from other sources (Do not net amounts due or paid to other sources st amounts due or received from them)	11b				
12a	Section	on 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990	ın lıe	eu of Form 1041?	12a		
b		s," enter the amount of tax-exempt interest received or accrued during the	12b				
13	year Sectio	on 501(c)(29) qualified nonprofit health insurance issuers.	140				
	Jectio	on معمر دررها و quainted nonprofit ficaltif filadiance issuets.					
	addıtı	e organization licensed to issue qualified health plans in more than one state? N oonal information the organization must report on Schedule O	ote. S	See the instructions for	13a		
b		the amount of reserves the organization is required to maintain by the states chithe organization is licensed to issue qualified health plans	13b				
c		the amount of reserves on hand	13c				
14a	Dıd th	ے ne organization receive any payments for indoor tanning services during the tax	year	?	14a		No
b	If"Ye	s," has it filed a Form 720 to report these payments? If "No," provide an explana	tion ii	n Schedule O	14b		

orm	990 (2015)			Page
Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, describe the circumstances, processes, or changes in Schedule O. See instructions.	or 10	ob belo	w,
	Check if Schedule O contains a response or note to any line in this Part VI			🔽
Se	ction 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 22			
	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	Yes	
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ue Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10 a		No

b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing 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 Yes Were officers, directors, or trustees, and key employees required to disclose annually interests that could give 12b Yes c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe **12**c Yes Did the organization have a written whistleblower policy? 13 13 Yes Did the organization have a written document retention and destruction policy? 14 Yes 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 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 16a Νo **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

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

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) 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 State the name, address, and telephone number of the person who possesses the organization's books and records

▶REXANN RICHARDSON CFO 320 EAST MARKET STREET YORK, PA 17403 (717) 845-2631

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 no		ganıza	tion	com	pen	sated	lany	current officer, o	lirector, or truste	е
(A) Name and Title	(B) A verage hours per week (list any hours for related organizations	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					an	(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
	below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	МЗС	H13C)	and related organizations
(1) EDQUINA WASHINGTON PRESIDENT	5 00	х		x				0	0	0
(2) ELIZABETH DELLINGER PRESIDENT ELECT	2 00	х		x				0	0	0
(3) NIKKI BARDIN TREASURER	4 00	х		x				0	0	0
(4) SHERRY ROLAND-WASHINGTON SECRETARY	2 00	х		х				0	0	0
(5) KEITH SHEFFER TREASURER-ELECT	2 00	х		×				0	0	0
(6) JEAN TREUTHART CHIEF EXECUTIVE OFFICER	40 00	х		х				109,452	0	4,524
(7) ANGELA ANG-ALHADEFF DIRECTOR	1 00	х						0	0	0
(8) LAURA BANKOS-KURY DIRECTOR	1 00	х						0	0	0
(9) SARA GLINES TILL 102015 DIRECTOR	1 00	х						0	0	0
(10) CATHY GROVE DIRECTOR	1 00	х						0	0	0
(11) DI HERSHEY DIRECTOR	1 00	х						0	0	0
(12) KIM LENTZ DIRECTOR	1 00	х						0	0	0
(13) MAGGIE MEDICE DIRECTOR	1 00	х						0	0	0
(14) MICHELLE POKRIFKA DIRECTOR	1 00	х						0	0	0
	l	1	1				_			Form 990 (2015)

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	m unle	ore t ss pe	han erso cer tor/t	not one n is and rus	tee)	an	(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
	below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former		,	and related organizations
(15) MARK RHODES	1 00	х						0		0 0
DIRECTOR		_ ^						0		u u
(16) SUSAN SEIFERT	1 00	x						0		0
DIRECTOR		^						0		0
(17) JAMIE SMITH	1 00	x						0		0 0
DIRECTOR		^						0		٥
(18) KIMBERLY VIOLANTE YANAVITCH	1 00	,,								
DIRECTOR		X						0		0
(19) JENNY ZIMMERMAN	1 00							_		
DIRECTOR		X						0		0
(20) LISE-PAULINE BARNETT	1 00	.,								
DIRECTOR		X						0		0
(21) KRISTY BIXLER	1 00							_		
DIRECTOR		X						0		0
(22) JULIE LANDO	1 00	,,								0 0
DIRECTOR		X						0		0
(23) KARIN SWARTZ	1 00	,,								
JR BOARD PRESIDENT		X						0		0
(24) REXANN RICHARDSON	40 00							50 774		4.500
CHIEF FINANCIAL OFFICER				Х				68,774		0 4,522
1b Sub-Total				▶	<u> </u>				<u> </u>	1
c Total from continuation sheets to Part VII			•	▶						
d Total (add lines 1b and 1c)	•			▶			1	78,226	0	9,046
								· · · · · · · · · · · · · · · · · · ·	I	,
Total number of individuals (including but n \$100,000 of reportable compensation from			ed at	DOVE	e) W	no red	ceiv	ed more than		

Section B. Independent Contractors

L 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.

Name and business address	Description of services	Compensation

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

(A)

Form 99								Page 9
Part V	1111	Statement o			and the Doub Will			_
		Check if Schedu	ıle O contains a respor	ise or note to any lir	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
<u> </u>	1a	Federated camp	oaigns 1a	334,299				
Grants smounts	b	Membership du	es 1b					
G.	С	Fundraising eve	ents 1 c	159,433				
ifts ar/	d	d Related organizations 1d						
s, (s imil	e	Government grants	s (contributions) 1e	2,559,357				
Contributions, Giffs, Grants and Other Similar Amounts	f	All other contribution	ons, gifts, grants, and 1f	820,292				
ibu Sth	g	Noncash contribution		26,461				
ont nd (h	1a-1f \$ Total. Add lines	s 1a-1f		3,873,381			
O ē	-"	Totall / Ga Illies		Business Code	, ,			
enue	2a	CHILDREN AND YO	UTH	624200	1,124,840	1,124,840		
₹	ь	HEALTH AND FITNE	ESS	624200	378,241	378,241		
Ce F	С	VICTIM SERVICES		624200	263,563	263,563		
ž.	d	COMMUNITY INITIA	ATIVES	624200	22,613	22,613		
Program Service Revenue	e	MEMBERSHIP DUES	-	624200	3,848	3,848		
	f	All other progra	ım service revenue					
<u>~</u>	g		3 2a-2f		1,793,105			
	3		ome (including dividendar ar amounts)		169,381			169,381
	4		tment of tax-exempt bond	· · · ·				
	5	Royalties	(ı) Real	(II) Personal				
	6a	Gross rents	26,333	(ii) i cisonui				
	ь	Less rental	6,211					
	c	expenses Rental income	20,122					
	d	or (loss) Net rental incor	me or (loss)		20,122			20,122
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory	1,626,133					
	b	Less cost or other basis and sales expenses	1,606,665					
	С	Gain or (loss)	19,468					
	d	-	s)		19,468			19,468
Other Revenue	8 a	fross income fi events (not incl \$ 159, of contributions See Part IV, lin	luding ,433 reported on line 1c) e 18					
the	ь	Less directexi	a penses b	4,733 39,582				
Ó	С		loss) from fundraising		-34,849			-34,849
	9a	Gross Income fi See Part IV, lin	rom gaming activities e 19 a					
	ь	Less direct exp	penses b					
	С	Net income or (loss) from gaming acti	vities				
	10a	Gross sales of returns and allo						
			a .	3,146				
	b c	Less cost of go	oods sold b loss) from sales of inve	entory >	3,146			3,146
		Miscellaneous		Business Code	,			'
	11a	MISCELLANEC	OUSINCOME	900099	13,867			13,867
	b							
	C	A.II						
	d e	All other revenu		•				
	12		See Instructions		13,867			
		. ocal levellue.	Sec Instructions .	•	5,857,621	1,793,105	(191,135

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)

	Г				
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21				
2	Grants and other assistance to domestic individuals See Part IV, line 22	79,846	79,846		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	206,326	182,611	20,208	3,507
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	3,160,935	2,793,626	313,557	53,752
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	84,380	79,760	4,620	
9	Other employee benefits	388,601	349,059	30,794	8,748
10	Payroll taxes	246 426	240.002	24 472	2.052
4.4	Fore for corrupts (non-employees)	246,426	218,002	24,472	3,952
11 a	Fees for services (non-employees) Management				
b	Legal	3,300		3,300	
c	Accounting	24,500	21,952	2,548	
d	Lobbying	24,300	21,332	2,540	-
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	14,501		14,501	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	130,718	89,346	14,895	26,477
12	Advertising and promotion	1,719	,	1,246	473
13	Office expenses	186,206	126,281	52,233	7,692
14	Information technology	83,523	65,064	13,661	4,798
15	Royalties				
16	Occupancy	361,693	351,893	9,792	8
17	Travel	187,699	182,331	5,288	80
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	28,470	27,797	673	
20	Interest	91,907	4,075	87,832	
21	Payments to affiliates	38,442	34,444	1,999	1,999
22	Depreciation, depletion, and amortization	392,152	351,282	20,435	20,435
23	Insurance	57,018	53,876	2,723	419
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	PROGRAM COSTS	452,409	452,359		50
Ь	F00D	207,375	207,246	111	18
С	DUES	39,798	37,404	2,394	
d	PRINTING AND PUBLICATIO	24,073	14,092	5,449	4,532
е	All other expenses	70,291	42,528	1,940	25,823
25	Total functional expenses. Add lines 1 through 24e	6,562,308	5,764,874	634,671	162,763
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Form	990 (2	2015)					Page 11
Par	rt X	Balance Sheet					
		Check if Schedule O contains a response or note to any li	ne ın tl	nis Part X			
	_				(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			600	1	700
	2	Savings and temporary cash investments			92,800	2	34,224
	3	Pledges and grants receivable, net			688,117	3	898,028
	4	Accounts receivable, net			127,576	4	137,380
Assets	5	Loans and other receivables from current and former offi key employees, and highest compensated employees C Schedule L	omplet	te Part II of		5	
	6	Loans and other receivables from other disqualified pers section 4958(f)(1)), persons described in section 4958 contributing employers and sponsoring organizations of voluntary employees' beneficiary organizations (see ins II of Schedule L	B), and n 501(c)(9)		6		
\ss	7	Notes and loans receivable, net			7		
Q	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			29,560	9	45,087
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	12,636,096	,		1
	Ь	Less accumulated depreciation	10b	4,865,352	8,087,884	10c	7,770,744
	11	Investments—publicly traded securities	· · ·		2,857,193	11	2,723,520
	12	Investments—other securities See Part IV, line 11 .			1,114,719	12	1,033,133
	13	Investments—program-related See Part IV, line 11 .		13			
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			14,400	15	15,600
	16	Total assets.Add lines 1 through 15 (must equal line 34) .		13,012,849	16	12,658,416
	17	Accounts payable and accrued expenses			533,700	17	642,027
	18	Grants payable				18	
	19	Deferred revenue			33,270	19	104,027
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability Complete Part IV	of Sche	edule D	3,406	21	28,987
lities	22	Loans and other payables to current and former officers, key employees, highest compensated employees, and d					
Liabi		persons Complete Part II of Schedule L				22	
Ë	23	Secured mortgages and notes payable to unrelated third	partie	s	1,996,863	23	2,454,976
	24	Unsecured notes and loans payable to unrelated third pa	arties			24	
	25	Other liabilities (including federal income tax, payables and other liabilities not included on lines 17-24) Complete Part X of Schedule D	to rela	ted third parties,		25	
	26	Total liabilities. Add lines 17 through 25			2,567,239	26	3,230,017
	+	Organizations that follow SFAS 117 (ASC 958), check he			, ,		, ,
S		lines 27 through 29, and lines 33 and 34.		A and complete			
100		-					
ala	27	Unrestricted net assets			9,218,941	27	8,255,901
Fund Balances	28	Temporarily restricted net assets			480,228	28	474,140
Ĕ	29	Permanently restricted net assets			746,441	29	698,358
		Organizations that do not follow SFAS 117 (ASC 958), c complete lines 30 through 34.	heck h	ere ►			
ets	30	Capital stock or trust principal, or current funds				30	
1881	31	Paid-in or capital surplus, or land, building or equipment	fund			31	
Net Assets or	32	Retained earnings, endowment, accumulated income, or	other f	unds		32	
Š	33	Total net assets or fund balances			10,445,610	33	9,428,399
	34	Total liabilities and net assets/fund balances			13,012,849	34	12,658,416

If the organization changed its method of accounting from a prior year or checked "Other," explain in

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate

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?

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

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

If the organization changed either its oversight process or selection process during the tax year, explain in

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

Consolidated basis

b Were the organization's financial statements audited by an independent accountant?

Consolidated basis

Cash ✓ Accrual COther

Both consolidated and separate basis

Both consolidated and separate basis

2a

2b

2c

3a

3b

Yes

Yes

Yes

Yes | Form **990** (2015)

Νo

1 Accounting method used to prepare the Form 990

a separate basis, consolidated basis, or both

Single Audit Act and OMB Circular A-133?

Schedule O

Schedule O

Separate basis

Separate basis

basis, consolidated basis, or both

Additional Data

Software ID:

Software Version:

EIN: 23-1360889

Name: YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF YORK PA

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

(Code) (Expenses \$ 27,211 Including grants of \$) (Revenue \$ 22,613)
COMMUNITY INITIATIVES ANNUAL RACE AGAINST RACISM 5K RUN HAD 1,002 PARTICIPANTS THIS PAST YEAR WE HAVE
PARTNERED WITH ROYAL SQUARE DEVELOPMENT, YORK CITY, AND FIVE LOCAL CORPORATE SPONSORS TO SECURE A GRANT
FROM THE STATE OF PA DEPT OF COMMUNITY AND ECONOMIC DEVELOPMENT TO IMPROVE THE ROYAL SQUARE AREA IN
YORK CITY THIS YEAR WITH THE HELP OF THE CORPORATE SPONSORS WE WERE ABLE TO INSTALL NEW SIDEWALKS, ADD NEW
AND IMPROVED LIGHTING AND PLANT TREES AND FLOWERS ALONG THE STREET

efile GRAPHIC print - DO NOT PROCESS SCHEDULE A

hospital's name, city, and state

170(b)(1)(A)(iv). (Complete Part II)

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

As Filed Data -DLN: 93493045035037 OMB No 1545-0047

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Department of the Treasury Internal Revenue Service

990EZ)

YORK PA

1

2 3

Part I

(Form 990 or

Name of the organization

www.irs.gov/form990.

A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section

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

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

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

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

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

► Attach to Form 990 or Form 990-EZ. Open to Public ▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at Inspection **Employer identification number** YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF 23-1360889

		A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).							
	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) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)								
l l	'			•	•				
re fr o	An organization that normally receives (1) more than 331/3% 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 331/3% 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 Seesection 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety See section 509(a)(4).								
l l	5	•	•	•	•				
or th a 	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. 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								
	5	•	rt IV, Sections A and I						
						orted organization(s), b			
	lanagement of the sup l ust complete Part IV			same persons t	hat control or i	manage the supported	organization(s) You		
	•	•		n operated in c	onnection with	, and functionally inted	arated with its		
			uctions) You must co i				gracea with, its		
	11	. , .	,	•	•	with its supported org	anızatıon(s) that ıs		
n n	ot functionally integra	ated The orga	nızatıon generally mu:	st satisf y a dist	rıbutıon requir	ement and an attentiv	eness requirement		
			te Part IV, Sections A						
						s a Type I, Type II, T	ype III functionally		
			ally integrated suppor						
			ns			· · · · · · ·			
g Pi	rovide the following ii	nformation abo	out the supported orga	inization(s)					
(i) Name of supported organizatio		(ii)EIN	(iii) Type of organization (described on lines 1-9 above (see instructions))	(iv) Is the organization Iisted in your governing document?		(v) A mount of monetary support (see instructions)	(vi) A mount of other support (see instructions)		
				Yes	No				
Total									

Cat No 11285F

Schedule A (Form 990 or 990-EZ) 2015

	edule A (Form 990 of 990-EZ) 2013						Page Z
Pa	Support Schedule fo						
	(Complete only if you of Part III. If the organization						
Se	ection A. Public Support	reion runs to qu	dilly dilder die	tests listed bei	iow, picase con	inpicte i die iii.	,
	Calendar year	I		T	T		T
(or	fiscal year beginning in)	(a)2011	(b) 2012	(c)2013	(d) 2014	(e) 2015	(f) Total
•	Gifts, grants, contributions, and						
	membership fees received (Do						
	not include any unusual grants)						
2	Tax revenues levied for the						
	organization's benefit and either						
3	paid to or expended on its behalf The value of services or facilities						
3	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						
Se	ection B. Total Support		T	Т	T	1	1
(or	Calendar year fiscal year beginning in)	(a) 2011	(b) 2012	(c)2013	(d)2014	(e) 2015	(f) ⊤otal
•	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						
12	through 10 Cross receipts from related activiti	es etr (see inst	ructions)			12	
13	First five years. If the Form 990 is f		•	third fourth or:	fifth tay year ac a		3) organization
	check this box and stop here	3	•		•	<u>`</u>	5) organization,
Se	ection C. Computation of Pub	olic Support F	Percentage				
14	Public support percentage for 2015	• •		11. column (f))		14	
15	Public support percentage for 2014	•	• •	, , , , , , , , , , , , , , , , , , , ,		15	
	33 1/3% support test—2015. If the	ŕ	•	c on line 13. and	line 14 is 33 1/3%		this box
	and stop here. The organization qua	-		•	,	,	▶ □
b	33 1/3% support test—2014. If the	•			, and line 15 is 33	3 1/3% or more,	check this
	box and stop here. The organization						▶□
17a	10%-facts-and-circumstances test-	_				•	
	is 10% or more, and if the organiza in Part VI how the organization mee						
	•	.ca the Tacts-dfl	u circumstances	cest The Olyan	izacion qualilles d	a publicity supp	. —
h	organization 10%-facts-and-circumstances test-	_2014 If the ora:	anization did not a	check a boy on lir	ne 13 16a 16b	or 17a and line	▶
D	15 is 10% or more, and if the organ						
	Explain in Part VI how the organiza				•	•	cly
	supported organization						` ▶ ┌
L8	Private foundation. If the organization	ion did not check	a box on line 13	, 16a, 16b, 17a,	or 17b, check this	s box and see	•
	instructions						▶┌
							•

Section A. Public Support Calendar year

(or fiscal year beginning in) ▶

(f)Total

(e)2015

(d)2014

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(a)2011

art

(c)2013

(Complete only if you checked the	box on line 9 of Part I	[or if the organization fail	led to qualify under P
II. If the organization fails to qualif	y under the tests liste	d below, please complete	Part II.)

(b)2012

1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	4,811,847	4,137,595	3,514,975	4,150,794	3,873,:	381 20,488,592
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	2,603,196	1,988,005	2,126,630	2,284,065	1,793,	10,795,001
3	purpose Gross receipts from activities that are not an unrelated trade or business under section 513	14,773	18,728	250,492	7,621	21,	746 313,360
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	7,429,816	6,144,328	5,892,097	6,442,480	5,688,	31,596,953
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons	36,500	84,744	33,628	46,412	31,	232,609
b	A mounts 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	38,789	86,056	101,579	101,077	107,.	262 434,763
c	Add lines 7a and 7b	75,289	170,800	135,207	147,489	138,	587 667,372
8	Public support. (Subtract line 7c						30,929,581
Se	rom line 6) ction B. Total Support						
	Calendar year	(-) 2011	(b) 2012	(-)2012	(d) 2014	(e) 2015	/ 5 \Total
•	iscal year beginning in) ▶	(a)2011	(b) 2012	(c)2013			(f)Total
9 10a	A mounts from line 6 Gross income from interest,	7,429,816	6,144,328	5,892,097	6,442,480	5,688,	232 31,596,953
10a	dividends, payments received on securities loans, rents, royalties	151,476	192,862	174,948	186,829	195,	714 901,829
	and income from similar sources						
b	and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	151,476	192,862	174,948	186,829	195,	714 901,829
c 11	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	151,476	192,862	174,948	186,829	195,	714 901,829
c	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part	151,476 1,784	192,862 8,113	174,948	186,829	195,	901,829
c 11	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c,			174,948 6,067,045	186,829 6,629,309	195, 5,883,	9,897
c 11	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	1,784 7,583,076	8,113 6,345,303	6,067,045	6,629,309	5,883,	9,897
11 12 13 14	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here	1,784 7,583,076 for the organization	8,113 6,345,303 on's first, second	6,067,045	6,629,309	5,883,	9,897
11 12 13 14 Se	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here Ction C. Computation of Put	1,784 7,583,076 for the organization	8,113 6,345,303 on's first, second ercentage	6,067,045 , third, fourth, or f	6,629,309	5,883, section 501(9,897 946 32,508,679 c)(3) organization,
11 12 13 14 Se 15	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here Ction C. Computation of Put	1,784 7,583,076 for the organization of the Support Post (line 8, column)	8,113 6,345,303 on's first, second ercentage (f) divided by line	6,067,045 , third, fourth, or f	6,629,309	5,883, section 501(9,897 946 32,508,679 c)(3) organization, 95 140 %
11 12 13 14 Se 15 16	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here Ction C. Computation of Put Public support percentage for 2019	1,784 7,583,076 for the organization lic Support P 5 (line 8, column 14 Schedule A, P	8,113 6,345,303 on's first, second ercentage (f) divided by line art III, line 15	6,067,045 , third, fourth, or f 13, column (f))	6,629,309	5,883, section 501(9,897 946 32,508,679 c)(3) organization,
11 12 13 14 Se 15 16 Se	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here Ction C. Computation of Put Public support percentage from 20 ction D. Computation of Inventor I	1,784 7,583,076 for the organization plic Support P 5 (line 8, column 14 Schedule A, P	8,113 6,345,303 on's first, second ercentage (f) divided by line art III, line 15 ome Percenta	6,067,045 , third, fourth, or f 13, column (f)) ge	6,629,309 ifth tax year as a	5,883, section 501(9,897 946 32,508,679 c)(3) organization, 95 140 % 94 710 %
12 13 14 Se 15 16 Se 17	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here ction C. Computation of Put Public support percentage from 20 ction D. Computation of Inv	1,784 7,583,076 for the organization for the organi	8,113 6,345,303 on's first, second ercentage (f) divided by line art III, line 15 ime Percenta olumn (f) divided	6,067,045 , third, fourth, or f 13, column (f)) ge by line 13, colum	6,629,309 ifth tax year as a	5,883, section 501(15 16	9,897 946 32,508,679 c)(3) organization, 95 140 % 94 710 % 2 770 %
12 13 14 Se 15 16 Se 17 18	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here Ction C. Computation of Put Public support percentage for 201: Public support percentage from 20 ction D. Computation of Investment income percentage from Investment Income Investm	1,784 7,583,076 for the organization for the organization (Inc. Support P. 5 (line 8, column 14 Schedule A, P. 14 Schedule A, P. 15 (line 10c, com. 2014 Schedule	8,113 6,345,303 on's first, second ercentage (f) divided by line art III, line 15 one Percenta olumn (f) divided A, Part III, line 1	6,067,045 , third, fourth, or f 13, column (f)) ge by line 13, colum	6,629,309 ifth tax year as a	5,883, section 501(15 16 17 18	9,897 946 32,508,679 c)(3) organization, 95 140 % 94 710 % 2 770 % 2 560 %
12 13 14 Se 15 16 Se 17 18	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here ction C. Computation of Put Public support percentage from 20 ction D. Computation of Inv	1,784 7,583,076 for the organization for the organization for the organization for the organization 7,583,076 For the organization did	8,113 6,345,303 on's first, second ercentage (f) divided by line art III, line 15 me Percenta olumn (f) divided A, Part III, line 1 not check the bo	6,067,045, third, fourth, or fourth, or fourth, or fourth, or fourth, or fourth, and fourt	6,629,309 ifth tax year as a in (f)) line 15 is more t	5,883, section 501(15	9,897 946 32,508,679 c)(3) organization, 95 140 % 94 710 % 2 770 % 2 560 %

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

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

	I, complete Sections A and D, and complete Part V)			
Se	ction 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	2		
3a	509(a)(1) or (2) 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	3 c		
4 a	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?	4b		
_	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 Did the organization support any foreign supported organization that does not have an IRS determination under	15		
C	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		
9 a	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 .	9 c		
0a	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	10 a		
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)	10 b		
1	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
_	A 3.5% controlled entity of a person described in (a) or (b) above 2.16 "Vee" to a bioric provide detail in Part VI	110		1

Part IV	Supporting	Organizations	(continued

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Section	n R	Tyne	T Si	innorting	Orga	nization	_

			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 Organization	Section	C.	Type	II	Supporting	Organization	s
--	---------	----	------	----	------------	--------------	---

			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 contiol or management of the supporting organization was vested in the same persons			
	that controlled or managed the supported organization(s)	1		

			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 satis	v the Integral Part Test during the year (see instructions)

- The organization satisfied the Activities Test Complete line 2 below
- The organization is the parent of each of its supported organizations. Complete line 3 below

С		i ne orga instructi	nization supported a governmental entity. Describe in Part VI now you supported a government entity (see ons)	эe
2	<u>A ctivit</u>	ies Test	_Answer (a) and (b) below.	Y
а			all of the organization's activities during the tax year directly further the exempt purposes of the	

	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	
	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 3a each of the supported organizations? Provide details in Part VI
- **b** Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard

3b

	Check here if the organization satisfied the Integral Part Test as a qualifying tr Type III non-functionally integrated supporting organizations must complete S			ructions. All other
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
	Net short-term capital gain	1		
	Recoveries of prior-year distributions	2		
	Other gross income (see instructions)	3		
	Add lines 1 through 3	4		
	Depreciation and depletion	5		
i	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		
,	Other expenses (see instructions)	7		
;	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)
	Aggregate fair market value of all non-exempt-use assets (see	1		
_	instructions for short tax year or assets held for part of year)	—		
a L	A verage monthly value of securities	1a 1b		
b	A verage monthly cash balances			
C	Fair market value of other non-exempt-use assets	1c 1d		+
d	Total (add lines 1a, 1b, and 1c) Discount claimed for blockage or other factors	La		
e	(explain in detail in Part VI)			
	Acquisition indebtedness applicable to non-exempt use assets	2		
	Subtract line 2 from line 1d	3		
	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
	Multiply line 5 by 035	6		
	Recoveries of prior-year distributions	7		
	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
	Enter 85% of line 1	2		
	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
	Enter greater of line 2 or line 3	4		
	Income tax imposed in prior year	5		
	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
	Check here if the current year is the organization's first as a non-functionally-instructions)	ntegrate	d Type III supporting	organization (see

Part V Type III Non-Functionally Integra	ated 509(a)(3) Suppo	rting Organizations (c	ontinued)
Section D - Distributions			Current Year
1 Amounts paid to supported organizations to accomp	olish exempt purposes		
2 Amounts paid to perform activity that directly furthe excess of income from activity	ers exempt purposes of supp	oorted organizations, in	
3 Administrative expenses paid to accomplish exemp	ot purposes of supported org	anızatıons	
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval rec	uured)		
6 Other distributions (describe in Part VI) See instru			
·	ic tions		
7 Total annual distributions. Add lines 1 through 6			
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide	
9 Distributable amount for 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 requiredsee instructions)			
3 Excess distributions carryover, if any, to 2015			
a .			
b c			
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 31 and 4c			
8 Breakdown of line 7			
a			
b			
c Excess from 2013			
d From 2014			
e From 2015			
		Schodulo A	/Form 990 or 990-F7) /2015

DLN: 93493045035037

Employer identification number

23-1360889

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue

Name of the organization

Political expenditures

Volunteer hours

YORK PA

1

2

3

Part I-A

YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF

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 Open to Public Inspection

Service If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-区, 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

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

Section 527 organizations Complete Part I-A only

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

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

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

Do.	t I-B Complete if the or	ganization is exempt under	coction FO1/c	11/21	
	<u> </u>	e tax incurred by the organization uni		,)(3). 	<u>.</u>
1	,	e tax incurred by the organization manag		4055	\$
2	•	, ,		4955	\$
3	J	ection 4955 tax, did it file Form 472	o for this year?		☐ Yes ☐ No
4 a	Was a correction made?				☐ Yes ☐ No
b	If "Yes," describe in Part IV			·	1/0)/2)
	· · · · · ·	ganization is exempt under	-		
1	, ,	ended by the filing organization for se	·		\$
2	Enter the amount of the filing of exempt function activities	organization's funds contributed to ot	her organizations	for section 527 ►	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here	and on Form 1120	O-POL, line 17b ►	\$
4	Did the filing organization file F	orm 1120-POL for this year?			Yes No
5	organization made payments if amount of political contribution	nd employer identification number (E For each organization listed, enter th ns received that were promptly and d political action committee (PAC) If	e amount paid froi irectly delivered t	m the filing organization's fi to a separate political organ	unds Also enter the nızatıon, such as a
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
2					
3					
4					
5					
6					
For F	aperwork Reduction Act Notice, se	ee the instructions for Form 990 or 990	-EZ. C	at No 50084S Schedule C (F	orm 990 or 990-EZ) 2015

Subtract line 1g from line 1a $\,$ If zero or less, enter -0-Subtract line 1f from line 1c If zero or less, enter -0-

10	nedule (- (F	orm 990 or 990-E2) 2015			Page 2
P	art II-	Α	Complete if the organization is exempt under section $501(c)(3)$ and under section $501(h)$.	file	ed Form 5768	(election
١.	Check	>	If the filing organization belongs to an affiliated group (and list in Part IV each affiliated expenses, and share of excess lobbying expenditures)	l gro	up member's nar	ne, address, EIN
3	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	lobby	ıng)	oying expenditures to influence public opinion (grass roots			

		oying Expenditures means amounts paid or incurred.)	organization's totals	group totals
a	Total lobbying expenditures to influence public lobbying)	opinion (grass roots		•
b	Total lobbying expenditures to influence a legi	slative 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 amoun	t 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		

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?

(Some organizations that made a s columns below. See th	ection 501(h) ele	nder section ection do not uctions for li	have to com	plete all of th gh 2f.)	ne five
Lobbying Expe	nditures During	4-Year Avera	ging Period		
Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total
Lobbying nontaxable amount					
Lobbying ceiling amount (150% of line 2a, column(e))					
Total lobbying expenditures					
Grassroots nontaxable amount					
Grassroots ceiling amount (150% of line 2d, column (e))					
Grassroots lobbying expenditures					
	Calendar year (or fiscal year beginning in) Lobbying nontaxable amount Lobbying ceiling amount (150% of line 2a, column(e)) Total lobbying expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of line 2d, column (e))	Calendar year (or fiscal year beginning in) Lobbying nontaxable amount Lobbying ceiling amount (150% of line 2a, column(e)) Total lobbying expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of line 2d, column (e))	Calendar year (or fiscal year beginning in) Lobbying nontaxable amount Lobbying ceiling amount (150% of line 2a, column(e)) Total lobbying expenditures Grassroots nontaxable amount (150% of line 2d, column (e))	Lobbying nontaxable amount Lobbying ceiling amount (150% of line 2a, column(e)) Total lobbying expenditures Grassroots nontaxable amount (150% of line 2d, column (e)) Grassroots lobbying expenditures	Calendar year (or fiscal year beginning in) (a)2012 (b)2013 (c)2014 (d)2015 Lobbying nontaxable amount Lobbying ceiling amount (150% of line 2a, column(e)) Total lobbying expenditures Grassroots nontaxable amount (150% of line 2d, column (e))

Return Reference

PART II-B, LINE 1

В-	edule C (Form 990 or 990-EZ) 2015 rt II-B Complete if the organization is exempt under section 501(c)(3) and has I	NOT			Pi	age 3
c	filed Form 5768 (election under section 501(h)).	NOI				
- ·		(a)		(b)	
	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying vity		No		A moun	t
		Yes		' <u></u>		
L	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					
а	Volunteers?	Yes				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		No			
c	Media advertisements?		No			
d	Mailings to members, legislators, or the public?		No			
е	Publications, or published or broadcast statements?		No			
f	Grants to other organizations for lobbying purposes?		Νo			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		No			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Νo			
i	Other activities?		No			
j	Total Add lines 1c through 1i					
а	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Νo	_		
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?					
a	t III-A Complete if the organization is exempt under section 501(c)(4), section !	5 01 (c)(5),	or s	ectio	n
	501(c)(6).				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		ſ	1	163	110
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		ŀ			
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?		ŀ	3		
	rt III-B Complete if the organization is exempt under section 501(c)(4), section !	501 <i>(</i> c	1(5).	or s	ectio	n
_	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "					
	line 3, is answered "Yes."					
L	Dues, assessments and similar amounts from members	1				
•	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
		2a	<u> </u>			
2 a	Current year		l .			
a b	Carryover from last year	2b				
a b c	Carryover from last year Total	2c				
2 a b c	Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues					
2 a b c	Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess	2c				
2 a b c	Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	2c				
2 a	Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 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	2c 3				

Explanation

WERE NO DIRECT EXPENSES RELATING TO THESE ACTIVITIES

THE ORGANIZATION OCCASSIONALLY ATTEMPTS TO INFLUENCE LEGISLATION BY WRITING TO AND VISITING STATE AND LOCAL REPRESENTATIVES IN FISCAL YEAR 2016 THERE

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

SCHEDULE D (Form 990)

Department of the

Treasury

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

DLN: 93493045035037

Open to Public **Inspection**

Na YO	mal Revenue Service ame of the organization DUNG WOMEN'S CHRISTIAN ASSOCIATION OF DRK PA			oyer identification number
		Advised Funds or Other Similar F		or Accounts.
	Complete if the organization answere	(a) Donor advised funds	(b)	Funds and other accounts
1	Total number at end of year		(-/	Tanas and construction
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 a funds are the organization's property, subject to t		nor advis	sed Yes No
6	Did the organization inform all grantees, donors, a used only for charitable purposes and not for the conferring impermissible private benefit?			r purpose Yes No
Pa	rt III Conservation Easements. Comple	ete if the organization answered "Yes" o	on Forn	n 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by th	e organization (check all that apply)		
	Preservation of land for public use (e g , recreeducation)		ın hıstor	ically important land area
	Protection of natural habitat			d historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization leasement on the last day of the tax year	held a qualified conservation contribution in	the form	of a conservation
				Held at the End of the Year
а			2a	
b	, ,		2b	
C		, ,	2c	
d	historic structure listed in the National Register		2d	
3	Number of conservation easements modified, tran	nsferred, released, extinguished, or terminate	ed by the	e organization during the
	tax year ▶			
4	Number of states where property subject to cons	ervation easement is located >		
5	Does the organization have a written policy regar violations, and enforcement of the conservation e		dling of	┌ Yes
6	Staff and volunteer hours devoted to monitoring, year	inspecting, handling of violations, and enforc	ing cons	servation easements during the
	>			
7	A mount of expenses incurred in monitoring, inspe ▶ \$	ecting, handling of violations, and enforcing c	onserva	ition easements during the year
8	Does each conservation easement reported on Iii (B)(i) and section $170(h)(4)(B)(ii)$?	ne 2(d) above satisfy the requirements of sec	ction 17	0(h)(4)
9	In Part XIII, describe how the organization report balance sheet, and include, if applicable, the text the organization's accounting for conservation ea	of the footnote to the organization's financia		
Pa	3	tions of Art, Historical Treasures,	or Oth	ner Similar Assets.
1 a	If the organization elected, as permitted under SF works of art, historical treasures, or other similar	FAS 116 (ASC 958), not to report in its reve assets held for public exhibition, education,	or resea	arch in furtherance of public
	service, provide, in Part XIII, the text of the footi			
b	If the organization elected, as permitted under SF works of art, historical treasures, or other similar service, provide the following amounts relating to	assets held for public exhibition, education,		
	(i) Revenue included on Form 990, Part VIII, line 1	L	> \$	
((ii) Assets included in Form 990, Part X		▶ \$	

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

Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Par	t III	Organizations Maintaining	Collections of A	rt, Historical	Treasures, or	Other Similar As	sets
	Usin	<i>(continued)</i> g the organization's acquisition, acc	ession and other rec	ords check any	of the following that	are a significant use	ofits
_		ction items (check all that apply)	ession, and other rec	ords, effect diff	or the following that	are a significant ase	01103
а	Г	Public exhibition		d L	oan or exchange pro	grams	
b		Scholarly research		e	ther		
c		Preservation for future generations					
4	Provi Part	de a description of the organization' XIII	s collections and exp	plain how they fui	ther the organizatio	n's exempt purpose i	n
5		ng the year, did the organization soli ts to be sold to raise funds rather th					☐ No
Pa	rt IV	Escrow and Custodial Arra Complete if the organization a Part X, line 21.		n Form 990, Pa	rt IV, line 9, or re	ported an amount	on Form 990,
1 a		e organızatıon an agent, trustee, cus ded on Form 990, Part X?	todian or other inter	mediary for conti	ubutions or other as	sets not	√ No
b	If	"Yes," explain the arrangement in P	art XIII and complet	e the following ta	ble	A mo	unt
c	Ве	ginning balance			10	С	
d	A d	lditions during the year			10	1	
е	Dis	stributions during the year			10	e	
f	En	ding balance			11	F	
2 a	Did t	he organization include an amount o	n Form 990, Part X,	line 21, for escro	w or custodial acco	unt liability? 🗸 Yes	No
b		es," explain the arrangement in Part					🗹
Pa	rt V	Endowment Funds. Comple			T		
			(a)Current year 667,768	(b) Pnor year 711,784	b (c) Two years back 504,253	(d)Three years back 464,886	(e)Four years back 499,674
1a 	_	nning of year balance	007,700	/11,/6-	150,000	·	499,674
b	. Cont	ributions			130,000	3,493	
c		nvestment earnings, gains, and	-23,159	-9,469	84,427	59,901	-7,322
	losse		23,133	5,40.	04,427	33,301	7,322
d		ts or scholarships					
e		er expenditures for facilities programs	29,466	28,711	. 21,845	19,497	24,764
f	A dm	inistrative expenses	5,286	5,836	5,051	4,530	2,702
g	End	of year balance	609,857	667,768	711,784	504,253	464,886
_	• Draw	· · · · · ·	aurrent waar and hali		ump (a)) hald as		
2		de the estimated percentage of the	77 450 %	ance (inte 19, coi	ullili (a)) lielu as		
a		d designated or quasi-endowment > 22 550 %	77 130 70				
b		iditette ettabilitette p	0.0/				
С		oorarily restricted endowment > oercentages on lines 2a, 2b, and 2c	0 % should equal 100%				
3a		here endowment funds not in the pos nization by	ssession of the orgar	nization that are I	neld and administer	ed for the	Yes No
	_	rrelated organizations				3a(
		elated organizations				3a(
b		es" on 3a(II), are the related organiz	·			3l)
4		ribe in Part XIII the intended uses		endowment funds	i		
Pa	rt VI	Land, Buildings, and Equip Complete if the organization a	ment. answered 'Yes' to	Form 990 Part	· IV line 11a See	Form 990 Part X	line 10
		Description of property	1113WCTCG 1C3 C3	(a) Cost or other	basis Cost or other b	Accumulated	(d)Book value
12	Land			(ınvestme	nt) (other) 238	832	238,832
	Buildir	nas		•	230		250,032
-		í			11,161	.061 3,944,595	7,216,466
c	Lease	hold improvements					
		ment			1,178	.514 863,068	315,446
е	Other			I	1	1	1

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

7,770,744

See Form 990, Part X, line 12. (a) Description of security or category.			
	gory	(b)Book value	(c)Method of valuation
(including name of security) (1)Financial derivatives			Cost or end-of-year market value
(2)Closely-held equity interests (3)O ther			
(A) BENEFICIAL INTEREST IN PERPETUAL TRUST	S	560,817	F
(B) NET ASSETS OF A COMMUNITY FOUNDATION		472,316	F
Total. (Column (b) must equal Form 990, Part X, col (B) line 12 Part VIII Investments—Program Related		1,033,133	
Complete if the organization answer	ered 'Yes' on Form 9	90, Part IV, line 11c. _{See}	Form 990, Part X, line 13. (c) Method of valuation Cost or end-of-year market value
	escription	mronn 990, Pare IV, inte 1.	(b) Book value
(a) D		11 (11) 330, Faic (1), iiie 1.	
(a) D		11 (11) 390, Faic 1V, iiie 1.	
(a) D		11 (11) 390, Fait 1V, IIIIe 1	
(a) D		11 (11) 390, Farciv, me 1.	
(a) D		11 (11) 330, Fait 1V, IIIIe 1	
	escription		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) I Part X Other Liabilities. Complete If the	line 15)		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) I	line 15)	ed 'Yes' on Form 990, Pa	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) I Part X Other Liabilities. Complete If the See Form 990, Part X, line 25. 1. (a) Description of liability	ine 15) organization answer	ed 'Yes' on Form 990, Pa	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) I Part X Other Liabilities. Complete if the See Form 990, Part X, line 25.	ine 15) organization answer	ed 'Yes' on Form 990, Pa	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) I Part X Other Liabilities. Complete If the See Form 990, Part X, line 25. 1. (a) Description of liability	ine 15) organization answer	ed 'Yes' on Form 990, Pa	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) I Part X Other Liabilities. Complete If the See Form 990, Part X, line 25. 1. (a) Description of liability	ine 15) organization answer	ed 'Yes' on Form 990, Pa	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) I Part X Other Liabilities. Complete If the See Form 990, Part X, line 25. 1. (a) Description of liability	ine 15) organization answer	ed 'Yes' on Form 990, Pa	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) I Part X Other Liabilities. Complete If the See Form 990, Part X, line 25. 1. (a) Description of liability	ine 15) organization answer	ed 'Yes' on Form 990, Pa	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) I Part X Other Liabilities. Complete If the See Form 990, Part X, line 25. 1. (a) Description of liability	ine 15) organization answer	ed 'Yes' on Form 990, Pa	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) I Part X Other Liabilities. Complete If the See Form 990, Part X, line 25. 1. (a) Description of liability	ine 15) organization answer	ed 'Yes' on Form 990, Pa	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) I Part X Other Liabilities. Complete If the See Form 990, Part X, line 25. 1. (a) Description of liability	ine 15) organization answer	ed 'Yes' on Form 990, Pa	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) I Part X Other Liabilities. Complete If the See Form 990, Part X, line 25. 1. (a) Description of liability	ine 15) organization answer	ed 'Yes' on Form 990, Pa	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) I Part X Other Liabilities. Complete If the See Form 990, Part X, line 25. 1. (a) Description of liability	ine 15) organization answer	ed 'Yes' on Form 990, Pa	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) I Part X Other Liabilities. Complete If the See Form 990, Part X, line 25. 1. (a) Description of liability	(b) Book valu	ed 'Yes' on Form 990, Pa	(b) Book value

1

2

b

5

1

2

b

d

b

c

Part XIII

information

PART IV. LINE 2B

Part XII

Schedule D (Form 990) 2015

5,568,631

5,857,621

6,585,842

23,534

6,562,308

6,562,308

Schedule D (Form 990) 2015

4c

1

2e

3

4c

17,323

6,211

а	Net unrealized gains (losses) on investments	2a	-127,899		
b	Donated services and use of facilities	2b	17,323		
c	Recoveries of prior year grants	2 c			
d	Other (Describe in Part XIII)..................................	2d	-178,414		
e	Add lines 2a through 2d			2e	-288,990
3	Subtract line 2e from line 1			3	5,857,621

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

4b

2a

2b 2c

2d

AFTER-SCHOOL PROGRAM WHERE PARTICIPANTS IN GRADES 9-12 FULFILL DAILY REQUIREMENTS AND EARN FINANCIAL INCENTIVES TO HELP FUND CONTINUING EDUCATION AND THE EXPENSES ASSOCIATED WITH HIGHER EDUCATION AMOUNTS

Subtract line 2e from line 1 . Amounts included on Form 990, Part VIII, line 12, but not on line 1 Investment expenses not included on Form 990, Part VIII, line 7b. 4a

Total revenue Add lines 3 and 4c.(This must equal Form 990, Part I, line 12)

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

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

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

EARNED ARE MAINTAINED IN A SEPARATE ACCOUNT

Explanation

Total revenue, gains, and other support per audited financial statements . . .

Amounts included on line 1 but not on Form 990, Part VIII, line 12

Other (Describe in Part XIII)

Donated services and use of facilities .

Other (Describe in Part XIII)

Supplemental Information

Prior year adjustments . .

Other (Describe in Part XIII) .

Subtract line 2e from line 1 .

Add lines 2a through 2d .

Add lines 4a and 4b . .

Return Reference

Other losses . .

Total expenses and losses per audited financial statements .

Amounts included on line 1 but not on Form 990, Part IX, line 25

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b.

Add lines 4a and 4b . .

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DLN: 93493045035037

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

ame of the organization OUNG WOMEN'S CHRISTIA ORK PA	N ASSOCIATION	OF				Employer ide 23-1360889	ntification number
			_	ation answered "Yes" his part.	on Form		
1 Indicate whether the orga	ınızatıon raısed fun	ds through	n any of th	e following activities C	heck all t	hat apply	
a Mail solicitations e Solicitation of non-government grants							
Internet and email solicitations f Solicitation of governme					overnmen	nt grants	
c Phone solicitations				g Special fundrais	ing event	S	
d In-person solicitation	าร						
Did the organization have or key employees listed is services?							es No
b If "Yes," list the ten high to be compensated at lea				isers) pursuant to agree	ements un	ider which the f	undrais er is
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundrais custo cont	Did ser have ody or rol of outions?	(iv) Gross receipts from activity	(or re fundra	nount paid to etained by) iser listed in col (i)	(vi) A mount paid to (or retained by) organization
•		Yes	No				
1							
2							
3							
4							
5							
6							
7							
/							
8							
9							
9							
10							
otal	ı	1	•				
3 List all states in which the registration or licensing	organization is regi	stered or	licensed t	o solicit contributions o	r has bee	n notified it is o	I exempt from

Part II	Fundraising	Events
Part II	Funaraising	Events

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	(b) Event #2	(c)O ther events	(d)
		WALK-A-MILE (event type)	RACE AGAINST RACISM (event type)	(total number)	Total events (add col (a) through col (c))
Reversie	1 Gross receipts	92,876		46,122	
	2 Less Contributions	92,876	22,582	42,389 3,733	
	4 Cash prizes	76	339	1,168	1,583
ses	6 Rent/facility costs	6,662		2,555	
Expenses	7 Food and beverages	671		3,734	4,405
Direct Direct	9 Other direct expenses	5,224	·	5,856	19,481 34,887
_	11 Net income summary Subtract line 1	-			-31,154
Par	t III Gaming. Complete if the organization Form 990-EZ, line 6a.	answered "Yes" on I	Form 990, Part IV, line	e 19, or reported mor	e than \$15,000 on
Revenue	1 Gross revenue	(a)Bingo	(b)Pull tabs/Instant bingo/progressive bingo	(c)O ther gaming	(d) Total gaming (add col (a) through col (c))
Expenses	2 Cash prizes				
	3 Noncash prizes				
Direct	5 Other direct expenses				
	6 Volunteer labor	☐ Yes%_ ☐ No	├ Yes <u>%</u>	│ Yes % %	
	7 Direct expense summary Add lines 2				
	8 Net gaming income summary Subtra	ct line 7 from line 1, col	umn (d)	<u> ▶</u>	
9 a	Enter the state(s) in which the organiza Is the organization licensed to conduct				Yes No
b	If "No," explain				
L0a	Were any of the organization's gaming li		nded or terminated during	the tax year?	Yes No
b	If "Yes," explain				

efile GRAPHIC print - DO NOT PROCESS | As Filed Data Schedule I
(Form 990) | Grants and C
Governments
Complete if the organize

Department of the
Treasury | Information about Schedule

YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF

Internal Revenue Service

Name of the organization

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 <u>www.irs.gov/form990</u>.

OMB No 1545-0047

2015

Employer identification number

23-1360889

DLN: 93493045035037

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TORK PA							
Part I General Information	on on Grants an	d Assistance					
 Does the organization maintain the selection criteria used to av Describe in Part IV the organiz 	ward the grants or a	ssistance?				stance, and	√ Yes
Part II Grants and Other Assists	ance to Domestic O	rganizations and Dome	estic Governments. Con	plete if the organization	answered "Yes" on F	orm 990, Part IV, line 2:	1, for any recipient
that received more than	\$5,000 Part II car	be duplicated if addit	ional space is needed	<u></u>	1		1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
	1						
2 Enter total number of section 5 3 Enter total number of other orga	anızatıons lısted ın t	he line 1 table				<u> ▶ _</u>	
For Paperwork Reduction Act Notice, se	e the Instructions foi	· Form 990.		Cat No 50055P		Schedu	le I (Form 990) 2015

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

PARTIES AND NOT DIRECTLY TO RECIPIENTS

(a)Type of grant or assistance	(b)Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) REDUCED FEES FOR FITNESS CENT AQUATIC PROGRAMS BASED UPON INCOME GUIDELINES		1,116		BASED ON 50% FEE REDUCTION	
(2) FUNDS SPENT TO RELOCATE CLIEN WHO ARE VICTIMS OF DOMESTIC VIOLENCE AND ARE NOT SAFE IN T YORK AREA		22,000		FMV	
EXPENSES NEEDED TO ASSIST TO DOMESTIC VIOLENCE CLIENT THAS LEFT THEIR HOME IN AN EMERGENCY (IE CLOTHING, TOILETRIES, MEDICATIONS, ESSENTIALLY ANYTHING THEY (3) THAT HAD TO BE LEFT BEHIND)	NEED	9,027		FMV	
(4) COLLEGE ASSISTANCE TO STUDEN PARTICIPATING IN OUR QUANTUM OPPORTUNITIES PROGRAM WHO H EARNED INCENTIVE CREDITS BASE ON THEIR LEVEL OF PARTICIPATIC THE PROGRAM	M HAVE ED	22,519		FM V	
REDUCED FEES FOR CHILD CAR PROGRAMS BASED UPON INCOM (5) GUIDELINES		25,184		FMV	
l <u></u>					
Part IV Supplemental Info	rmation. Provide the info	rmation required in Pa	art I, line 2, Part III,	, column (b), and any other	additional information.
Return Reference Exp	olanation				
PART I, LINE 2 * GR		-	QUATICS ARE IN THE F		D NOT PAID TO THE RECIPIENTS

DIRECTLY * PAYMENTS FOR RELOCATION OF CLIENTS AND FOR OTHER PAYMENTS TO VICTIMS OF DOMESTIC VIOLENCE ARE MADE DIRECTLY TO THIRD PARTIES AND NOT DIRECTLY TO RECIPIENTS * COLLEGE ASSISTANCE GRANTS ARE PAID DIRECTLY TO THIRD

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SCHEDULE M (Form 990)

Department of the

Noncash Contributions

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

▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

Internal Revenue Service

OMB No 1545-0047 2015

Open to Public Inspection

Treasury **Employer identification number** Name of the organization YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF YORK PA 23-1360889 **Types of Property** Part I (a) (b) (c) (d) Check Number of contributions Noncash contribution Method of determining ١f or items contributed amounts reported on noncash contribution amounts applicable Form 990, Part VIII, line 1 g **1** Art—Works of art . . Art—Historical treasures **3** Art—Fractional interests Books and publications Clothing and household goods Cars and other vehicles Boats and planes . . . Intellectual property . . . Securities-Publicly traded . **10** Securities—Closely held stock 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 . Real estate—Other . . 18 Collectibles **19** Food inventory . . . Х 1 1,081 20 Drugs and medical supplies . **21** Taxidermy 22 Historical artifacts . . . Scientific specimens . . 24 Archeological artifacts . . **25** Other ▶ (25,380 DONOR PROVIDED Х 1 FIXED ASSETS) **26** Other ▶ (**27** Other ▶ (**28** Other ▶ (_ Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement No Yes 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 Νo b If "Yes," describe the arrangement in Part II 31 Yes Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash

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

b If "Yes," describe in Part II

describe in Part II

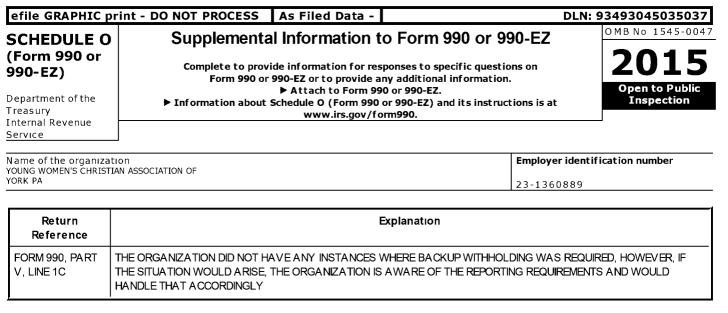
32a

Νo

Page 2

Schedule M (Form 990) (2015)

Return Reference Explanation



Return Reference	Explanation	
FORM 990, PART VI.	- THE POSITIONS OF OFFICERS OF THE BOARD OF THE ASSOCIATION HAS CHANGED TO INCLUDE A PRESIDENT, PRESIDENT-ELECT, IMMEDIATE PAST PRESIDENT, SECRETARY, TREASURER, AND TREASURER-ELECT - THE CEO DUTIES	
SECTION A, LINE 4	SHALL BE CONTROL OF THE BOARD OF DIRECTORS, SUPERVISE AND CONTROL ALL BUSINESS AND AFFAIRS THE CEO MAY APPOINT AGENTS AND EMPLOYEES IN GENERAL, THE CEO SHALL PERFORM ALL DUTIES AS MAY BE PRESENTED BY THE BOARD OF DIRECTORS FROM TIME TO TIME - TREASURER-ELECT SHALL HAVE ALL THE POWERS. AS	
	DESIGNATED, AND PERFORM ALL DUTIES OF THE TREASURER IN HER/HIS ABSENCE	l

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	PERSONS AT LEAST TWELVE (12) YEARS OF AGE MAY JOIN THE ASSOCIATION MEMBERSHIP SHALL BE AS FOLLOWS * REGULAR MEMBERS PEOPLE EIGHTEEN (18) YEARS OF AGE AND OVER * TEENAGE MEMBERS PEOPLE TWELVE (12) YEARS THROUGH SEVENTEEN (17) YEARS OF AGE * CHILDREN UNDER TWELVE CHILDREN UNDER TWELVE (12) YEARS MAY PARTICIPATE UNDER A PARENT'S MEMBERSHIP IN ANY PROCEEDING IN WHICH VOTING BY MEMBERS IS CALLED FOR, EACH MEMBER FIFTEEN (15) YEARS OF AGE OR OLDER, IN GOOD STANDING, SHALL BE ENTITLED TO CAST ONE (1) VOTE THE VOTING MEMBERS SHALL BE RESPONSIBLE FOR * VOTING ON ANY CHANGES TO YWCA YORK BYLAWS AS RECOMMENDED BY THE YWCA YORK BOARD OF DIRECTORS * ELECTING THREE MEMBERS FROM THE OVERALL MEMBERSHIP ROSTER OF THE YWCA YORK BOARD OF DIRECTORS

Return Reference	Explanation
FORM 990, PART VI.	A DRAFT OF THE FORM 990 IS REVIEWED BY THE TREASURER AND THE CFO AND COMMENTS FORWARDED TO AUDITORS FOR REVIEW A REVISED DRAFT IS PRESENTED FOR DISCUSSION TO THE FINANCE COMMITTEE AND ANY
SECTION B,	CORRECTIONS/ADDITIONS ARE NOTED AND THE FINANCE COMMITTEE APPROVES THE 990 FOR THE TREASURER TO
LINE 11	FORWARD TO THE BOARD OF DIRECTORS A COPY OF THE FORM 990 IS PROVIDED TO EVERY BOARD MEMBER VIA EMAIL WITH A COMMENT PERIOD PROVIDED FOR BOARD MEMBER QUESTIONS ALL FEEDBACK IS CONSIDERED AND
	ADDRESSED PRIOR TO THE APPROVAL OF THE BOARD AFTER BOARD APPROVAL, THE FINAL FORM 990 IS COMPLETED AND SUBITTED TO THE IRS

Return Reference	Explanation
FORM 990,	THE ORGANIZATION'S EMPLOYEE HANDBOOK OUTLINES A CONFLICT OF INTEREST POLICY FOR BOTH EMPLOYEES AND
PART VI,	BOARD MEMBERS IN THE EVENT AN EMPLOYEE FEELS THAT A CONFLICT OF INTEREST MAY EXIST, THE EMPLOYEE
SECTION B,	HANDBOOK REQUIRES FULL DISCLOSURE OF THE CONFLICT TO THE CEO OR HIS/HER DESIGNEE. IF A CONFLICT OF
LINE 12C	INTEREST IS FOUND TO EXIST, THE SITUATION WILL BE DISCUSSED AND CORRECTIVE ACTION TO ELIMINATE THE CONFLICT
	OF INTEREST WILL BE TAKEN BY EITHER THE EMPLOYEE OR THE YWCA BOARD MEMBERS ARE REQUIRED TO REVIEW THE
	CONFLICT OF INTEREST POLICY AND SIGN THE CONFLICT OF INTEREST DISCLOSURE STATEMENT ANNUALLY SHOULD A
	CONFLICT OF INTEREST EXIST WITH A BOARD MEMBER, THEY WOULD BE PROHIBITED FROM VOTING ON SUCH MATTERS
	RELATED TO THE CONFLICT BOARD MEMBERS MUST ALSO DISCLOSE FULLY THE NATURE OF ANY POTENTIAL CONFLICT
	OF INTEREST, AND FAILURE TO DO SO WILL BE CAUSE FOR IMMEDIATE REMOVAL FROM THE BOARD OF DIRECTORS

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THE YWCA PERSONNEL COMMITTEE AND THE DIRECTOR OF HUMAN RESOURCES MAINTAIN A PAY GRADE SCALE FOR THE ORGANIZATION WHICH INCLUDES COMPENSATION FOR THE CEO AND TOP MANAGEMENT POSITIONS VARIOUS SOURCES AND PARTNERS ARE USED TO DETERMINE AND ASSESS THE SALARY SCALE ANNUALLY INCLUDING PANO, PCADV, PCAR THE CEO IS FORMALLY REVIEWED ANNUALLY BY THE ORGANIZATION'S EXECUTIVE COMMITTEE WHICH INCLUDES A FULL BOARD SURVEY PROCESS THE PROCESS IS DOCUMENTED IN EXECUTIVE COMMITTEE MINUTES RECOMMENDATIONS FOR CEO SALARY ADJUSTMENTS ARE FORWARDED TO THE FULL BOARD FOR APPROVAL PRIOR TO IMPLEMENTATION

Return Reference	Explanation
FORM 990, PART VI, SECTION C,	THE FINANCIAL STATEMENTS, CONFLICT OF INTEREST POLICY AND GOVERNING DOCUMENTS ARE MADE
LINE 19	AVAILABLE UPON REQUEST

Return Reference	Explanation	١
FORM 990, PART XI,	CHANGE IN VALUE OF PERPETUAL TRUSTS -35,879 CHANGE IN INTEREST OF A COMMUNITY FOUNDATION -45,707	l
LINE 9	BOOK/TAX DIFFERENCE ON SALE OF INVESTMENTS - 103,039	ı

Return Reference	Explanation
FORM 990.	EVERY THREE YEARS FORMAL REQUESTS FOR PROPOSAL LETTERS ARE SUBMITTED TO INTERESTED ACCOUNTING
,	FIRMS PROPOSALS ARE RECEIVED AND REVIEWED BY THE FINANCE COMMITTEE. A DECISION IS MADE BASED UPON THE
2C	SCOPE OF WORK, THE AMOUNT OF FEES, AND THE QUALIFICATIONS OF THE FIRM THE AUDIT COMMITTEE HAS
	RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT. THIS PROCESS HAS NOT CHANGED FROM PRIOR YEAR