efile GRAPHIC print - DO NOT PROCESS As Filed Data -Form **990**

For Paperwork Reduction Act Notice, see the separate instructions.

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047 2016

Open to Public

Department of the Treasury

foundations)

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

DLN: 93493132036517

| mem | ii icc ci | nic service | | | | | | Inspection |
|---|-----------|---|--|--|----------------|------------------------|------------------|----------------------|
| | | | | ning 01-01-2016 , and ending | 12-31-2016 | | | |
| | | oplicable | C Name of organization The Waterbury Young Men's Christian | n Association | | D Employ | er identif | fication number |
| | dress o | - | | | | 06-064 | 6988 | |
| ☐ Ini | tıal ret | - | Doing business as | | | | | |
| Fir ⊡detui | | ninated | Novel and advert (and D.O. have for | ol or mak delivered to short a discovery I De | | E Telepho | ne number | |
| | | return | Number and street (or PO box if ma 136 West Main Street | all is not delivered to street address) Roo | om/suite | | 754-9622 | |
| □ Ар | plicatio | n pending | City or town, state or province, coun | try, and ZIP or foreign postal code | | (203) / | 34-9022 | |
| | | | Waterbury, CT 06702 | | | G Gross re | eceipts \$ 8 | ,726,321 |
| | | | F Name and address of principal | officer | H(a) Is th | nis a group re | turn for | |
| | | | James O'Rourke 136 West Main Street | | subo | ordinates? | | □Yes ☑ No |
| | | | Waterbury, CT 06702 | | H(b) Are | all subordina ided? | tes | ☐ Yes ☐No |
| I Ta | x-exem | npt status | ☑ 501(c)(3) □ 501(c)() ◄ (1 | nsert no) | | | list (see | instructions) |
| J W | ebsite | e:▶ WW | W WATERBURYYMCA ORG | | | up exemption | number | • |
| | | | | | | | | |
| K Form | n of or | ganızatıon | Corporation Trust Assoc | ciation D Other > | L Year of form | nation 1858 | M State | of legal domicile CT |
| Pa | rt T | Sumi | mary | | | | | |
| | | | cribe the organization's mission or | most significant activities | | | | |
| ey. | <u> </u> | EE SCHE | DULE O | | | | | |
| anc | - | | | | | | | |
| E | - | | | | | | | |
| Governance | | | | continued its operations or disposed | | | | 1 |
| | | | • | g body (Part VI, line 1a) | | | 3 | 22 |
| Š | | | - | the governing body (Part VI, line 1 | | | 4 | 22 |
| ¥ | | | , , | endar year 2016 (Part V, line 2a) | | | 5 | 386 |
| Activities & | | | · | essary) | | | 7a | 222 |
| | 1 | | | Form 990-T, line 34 | | • | 7a 7b | 0 |
| | - | ivet uillei | ated business taxable income from | 1101111 990-1, IIIIe 34 | | rior Year | 175 | Current Year |
| | 8 | Contribut | ions and grants (Part VIII, line 1h) | | <u> </u> | 3,641, | 973 | 3,035,508 |
| Rəvenue | | | - , , , , , |) | | 3,530, | | 3,645,452 |
| ōΛċ | 1 | 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) | | | | | .596 | 36,195 |
| <u></u> | 11 | Other rev | enue (Part VIII, column (A), lines | 5, 6d, 8c, 9c, 10c, and 11e) | | 69, | 206 | 78,110 |
| | 12 | Total reve | enue—add lines 8 through 11 (mus | st equal Part VIII, column (A), line : | 12) | 7,323, | 899 | 6,795,265 |
| | 13 | Grants ar | nd sımılar amounts paıd (Part IX, c | olumn (A), lines 1–3) | | 439, | 596 | 547,246 |
| | 14 | Benefits p | oald to or for members (Part IX, co | olumn (A), line 4) | | | | (|
| \mathfrak{L} | 15 | Salaries, | other compensation, employee ber | 3,210, | 283 | 3,397,095 | | |
| Expenses | 16a | Professio | nal fundraising fees (Part IX, colun | nn (A), line 11e) | | | | |
| Ř | 1 | | aising expenses (Part IX, column (D), lir | | | | \perp | |
| ш | 1 | | penses (Part IX, column (A), lines : | • | | 3,569, | | 2,850,954 |
| | | • | enses Add lines 13–17 (must equa | | <u> </u> | 7,219, | | 6,795,295 |
| <u>, , , , , , , , , , , , , , , , , , , </u> | 19 | Revenue | less expenses Subtract line 18 fro | m line 12 | Paginnin | 104, g of Current \ | | -30 End of Year |
| Net Assets or Fund Balances | | | | | Beginnin | g of current | rear | End of Year |
| 386 386 | 20 | Total asse | ets (Part X, line 16) | | | 15,650, | 651 | 15,735,206 |
| ŽŽ | 21 | Total liab | ılıtıes (Part X, lıne 26) | | | 4,630, | 808 | 4,581,965 |
| žZ | 22 | Net asset | s or fund balances Subtract line 2 | 1 from line 20 | | 11,019, | 843 | 11,153,24 |
| | rt II | | ature Block | | | | | |
| | | | | ned this return, including accompar Declaration of preparer (other that | | | | |
| | nowle | | · · · · · · · · · · · · · · · · · · · | | | | | |
| | | I k | | | 20 | 017-05-12 | | |
| Sign | ı | Signati | ure of officer | | | ate | | |
| Here | | Stephe | n Ball PRESIDENT | | | | | |
| | | | r print name and title | | | | | |
| | | | rint/Type preparer's name ANIEL C VOLLARO CPA | Preparer's signature DANIEL C VOLLARO CPA | Date Ch | | PTIN P0005576 | 0 |
| Paid | b | <u> </u> | | | se | elf-employed | | |
| | pare | ;ı - | irm's name BUDWITZ & MEYERJACH | 〈 PC | | rm's EIN ► 06 | | |
| Use | On | ly F | rm's address ► 1122 Highland Avenue | | Pt | none no (203) | 2/2-1621 | |
| | | | Cheshire, CT 06410 | | | | | |
| May t | he IR | S discuss | this return with the preparer show | n above? (see instructions) | | | . ⊻` | Yes 🗌 No |

Cat No 11282Y

Form **990** (2016)

Section 501(c)(3) organizations.

or X as applicable

Page 3

No

Nο

No

Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates

Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right

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

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

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

Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

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

the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🕏

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X

Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX,

Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?

5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,

Did the organization maintain collections of works of art, historical treasures, or other similar assets?

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII

b Was the organization included in consolidated, independent audited financial statements for the tax year?

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

Did the organization receive or hold a conservation easement, including easements to preserve open space,

the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II

to provide advice on the distribution or investment of amounts in such funds or accounts?

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

12a Did the organization obtain separate, independent audited financial statements for the tax year?

13 Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E

foreign organization? If "Yes," complete Schedule F, Parts II and IV

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV

assessments, or similar amounts as defined in Revenue Procedure 98-19?

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11a

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11c

11d

11e

11f

12a

12b

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14a

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Yes

4 Yes 5

Nο Nο Nο Nο Yes

Yes

Yes

Yes

Nο

Nο

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Form **990** (2016)

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No

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Yes

Yes

Yes

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28b

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35h

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Yes

Form **990** (2016)

| 101111 330 (2 | .010) | | Page 4 |
|---------------|---|-----|--------|
| Part IV | Checklist of Required Schedules (continued) | | |
| | | Yes | No |

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 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 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX. 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,"

24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and

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

24a 24b

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member

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, Part

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

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

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

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

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

instructions for applicable filing thresholds, conditions, and exceptions)

24c 24d 25a

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? 25b Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? 26

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I . 31

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 33

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

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

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

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

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . .

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

|)IIII | 990 (2016) | | | Page 5 |
|-------|--|-----|-----|---------------|
| Par | t V Statements Regarding Other IRS Filings and Tax Compliance | | | |
| | Check if Schedule O contains a response or note to any line in this Part V | | | |
| | | | Yes | No |
| | Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 9 | | | |
| | Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0 | | | |
| | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | 1c | Yes | |
| | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by | | | |
| | this return | 2ь | Yes | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) | 20 | 165 | |
| 3a | Did the organization have unrelated business gross income of \$1,000 or more during the year? | 3a | | No |
| b | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O | 3b | | |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? | 4a | | No |
| b | If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) | | | 140 |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | | No |
| | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | No |
| | If "Yes," to line 5a or 5b, did the organization file Form 8886-T? | | | |
| · | If it is, to line so or sp, and the organization me rount cood in the initial initialini initial initial initial initial initial initial initial initi | 5с | | |
| 6a | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? | 6а | | No |
| | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? | 6b | | |
| | Organizations that may receive deductible contributions under section 170(c). | | | |
| а | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? | 7a | Yes | |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | Yes | |
| С | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? | 7c | | No |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | | | |
| e | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e | | No |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f | | No |
| g | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | 7g | | |
| h | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | 7h | | |
| 8 | Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? | 8 | | |
| 9a | Did the sponsoring organization make any taxable distributions under section 4966? | 9a | | |
| | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | 9b | | |
| | Section 501(c)(7) organizations. Enter | | | |
| а | Initiation fees and capital contributions included on Part VIII, line 12 10a | | | |
| Ь | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b | | | |
| .1 | Section 501(c)(12) organizations. Enter |] | | |
| а | Gross income from members or shareholders | | | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) | | | |
| .2a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12a | | |
| b | If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b | | | |
| .3 | Section 501(c)(29) qualified nonprofit health insurance issuers. | | | |
| а | Is the organization licensed to issue qualified health plans in more than one state Note. See the instructions for additional information the organization must report on Schedule O | 13a | | |
| | Enter the amount of reserves the organization is required to maintain by the states in | | | |
| b | which the organization is licensed to issue qualified health plans |] | | |
| | | | | |
| С | which the organization is licensed to issue qualified health plans | 14a | | No |

| orm | 990 (2016) | | | Page 6 |
|-----|--|----------------|-----------|---------------|
| Par | Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions | o" respo | nse to li | |
| | Check if Schedule O contains a response or note to any line in this Part VI | <u> </u> | | ✓ |
| Se | ction A. Governing Body and Management | | | |
| 1a | Enter the number of voting members of the governing body at the end of the tax year 1a 22 | 2 | Yes | No |
| | 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 2: | <u>,</u> | | |
| 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 supervisio of officers, directors or trustees, or key employees to a management company or other person? . | n 3 | | No |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | 4 | | No |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? . | 5 | | No |
| 6 | Did the organization have members or stockholders? | 6 | | No |
| 7a | Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? | 7a | | No |
| b | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? | 7b | | No |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following | | | |
| | The governing body? | 8a | Yes | |
| b | Each committee with authority to act on behalf of the governing body? | 8b | Yes | |
| | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O | 9 | | No |
| Se | ection B. Policies (This Section B requests information about policies not required by the Internal Revenu | <u>ie Code</u> | | |
| 100 | Did the organization have local chapters, branches, or affiliates? | 10a | Yes | No No |
| | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? | 10a | | NO |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the | | Vaa | |
| h | form? | 11a | Yes | |
| | Did the organization have a written conflict of interest policy? If "No," go to line 13 | 12a | Yes | |
| | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to | 120 | 163 | |
| | conflicts? | 12b | Yes | |
| · | Schedule O how this was done | 12c | Yes | |
| 13 | Did the organization have a written whistleblower policy? | 13 | Yes | |
| 14 | Did the organization have a written document retention and destruction policy? | 14 | Yes | |
| 15 | Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | | |
| | The organization's CEO, Executive Director, or top management official | 15a | Yes | |
| Ь | Other officers or key employees of the organization | 15b | Yes | |
| | If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) | | | |
| | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? | 16a | | No |
| Ь | 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 | | |
| Se | ection C. Disclosure | 100 | | |
| 17 | List the States with which a copy of this Form 990 is required to be filed▶ | | | |
| 18 | Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) | | | |
| | available for public inspection. Indicate how you made these available. Check all that apply | | | |
| 19 | 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 | | | |
| 20 | State the name, address, and telephone number of the person who possesses the organization's books and records BRANDI FITZGERALD 136 WEST MAIN STREET WATERBURY, CT 06702 (203) 754-9622 | | | • /==::: |

Part VII

Director

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

| compensated employees, and former such persons | | | | | | | | | | | |
|---|---|--|-----------------------|---------|--------------|------------------------------|--------|--|--|--|--|
| Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee | | | | | | | | | | | |
| (A) Name and Title | (B) Average hours per week (list any hours | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | | | | compensation from the organization (W- | (E) Reportable compensation from related organizations | (F) Estimated amount of other compensation from the organization and | |
| | for related organizations below dotted line) | Individual trustee or director | Institutional Trustee | Officer | key employee | Highest compensated employee | Former | 2/1093-MI2C) | (W- 2/1099- MISC) | related organizations | |
| (1) Stephen Ball | 3 0 | × | | x | | | | | 0 | 0 | |
| President | | | | ^_ | _ | _ | | 0 | | 0 | |
| (2) Carl Cicchetti | 3 0 | ,, | | , | | | | | | | |
| Vice-President | *************************************** | × | | X | | | | 0 | 0 | 0 | |
| (3) Harold Smith | 3 0 | ., | | ., | | | | | | | |
| Vice-President | | X | | X | | | | 0 | 0 | 0 | |
| (4) Michael O'Connor | 3 0 | l | | ., | | | | | | | |
| Secretary | | X | | X | | | | 0 | 0 | 0 | |
| (5) Greg Fenn | 3 0 | l | | Ī., | | | | | | | |
| Treasurer | | X | | X | | | | 0 | 0 | 0 | |
| (6) Maureen Carleton | 10 | l | | | | | | | | | |
| Director | | X | | | | | | 0 | 0 | 0 | |
| (7) Vincent Graziano | 1 0 | l | | | | | | | | | |
| Director | | X | | | | | | 0 | 0 | 0 | |
| (8) Alan Green | 10 | l | | | | | | | | | |
| Director | | × | | | | | | 0 | 0 | 0 | |
| (9) Reggie Ligon | 10 | l | | | | | | | | | |
| Director | | × | | | | | | 0 | 0 | 0 | |
| (10) Kyle Morris | 10 | l | | | | | | | | | |
| Director | | X | | | | | | 0 | 0 | 0 | |
| (11) Jonathan Albert | 1 0 | , | | | | | | | | | |
| Director | | X | | | | | | 0 | 0 | 0 | |
| (12) Charles Oman | 10 | l | | | | | | | | | |
| Director | | × | | | | | | 0 | 0 | 0 | |
| (13) Vernon Proctor | 1 0 | | | | | | | | | | |
| Director | | X | | | _ | _ | | 0 | 0 | 0 | |
| (14) Gregory Cimmino | 1 0 | l | | | | | | | | 0 | |
| Director | | X | | | | l | | 0 | 0 | 0 | |
| (15) James DePaulo | 1 0 | | | | | | | | | 0 | |
| Director | | X | | | | | | 0 | 0 | 0 | |
| (16) Joseph Summa | 1 0 | , | | | | | | | | | |
| Director | *************************************** | × | | | | | | 0 | 0 | 0 | |
| (17) William Wesson | 1 0 | V | | | | | | 0 | | 0 | |

Name and Title

Section B. Independent Contractors

compensation from the organization ▶ 0

Part VII

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

(E)

Reportable

(B)

Description of services

(C)

Compensation

Form 990 (2016)

Page 8

| | hours per week (list any hours | week (list shoth an officer and a strong the strong transfer should be shoul | | | | | | | | c | nount o ompens from t ganizati | sation the |
|--|---|--|-----------------------|---------|--------------|---------------------------------|--------|----------------------|-------------|---|---|---------------|
| | organizations below dotted line) | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | 2/1099-11130) | 2,1039-M3C) | ' | relate rganiza | ed |
| (18) Joseph Yamın | 1 0 | × | | | | | | 0 | 0 | | | 0 |
| Director (19) Melanie Felladore | 1 0 | | | | | | | | | | | |
| Director | | × | | | | | | 0 | 0 | | | 0 |
| (20) Greg Zupkus | 1 0 | Х | | | | | | 0 | 0 | | 0 | |
| Director (21) Jacqueline Caulfield | | | | | | | | | | | | |
| Director | 1 0 | × | | | | | | 0 | 0 | О | | 0 |
| (22) John Zinno | 1 0 | × | | | | | | 0 | 0 | | | 0 |
| Director | | ···· ^ | | | | | | 0 | | | | |
| (23) James O'Rourke | 40 0 | | | Х | | | | 147,758 | 0 | | | 14,776 |
| Executive Director | | | | | | | | | | | | |
| (24) Brandı Fitzgerald Finance Director | 40 0 | | | Х | | | | 68,198 | 0 | | | 6,820 |
| Tillance Director | | | | | | | | | | | | |
| 1b Sub-Total | <u> </u> | | | | · hove | > who | rece | 215,956 | 0 | | | 21,596 |
| of reportable compensation from the | | | | | | | | erved more than \$10 | | | Yes | No. |
| 3 Did the organization list any former of line 1a? <i>If "Yes," complete Schedule J</i> | | | ee, ke | ey e | mplo • | yee, o | or hig | ghest compensated | | 3 | 162 | No |
| For any individual listed on line 1a, is organization and related organizations individual | | | | | | | | | | 1 | Yes | |
| , . | Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for | | | | | | Yes | | | | | |

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

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

Name and business address

(C)

Position (do not check more

(B)

Average

(D)

Reportable

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 (2016) | | | | Page 10 |
|---|-----------------------|-----------------------------|------------------------------------|----------------------------|
| Part IX Statement of Functional Expenses | All abla | | lata salaman (A) | |
| Section 501(c)(3) and 501(c)(4) organizations must complete all co | - | · | , , | |
| Check if Schedule O contains a response or note to any | line in this Part IX | (B) | (C) | <u> ⊔</u> |
| Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. | (A) Total expenses | Program service expenses | Management and general expenses | (D) Fundraisingexpenses |
| Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21 | 0 | 0 | | |
| 2 Grants and other assistance to domestic individuals See Part IV, line 22 | 547,246 | 547,246 | | |
| 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16 | 0 | 0 | | |
| 4 Benefits paid to or for members | 0 | 0 | | |
| 5 Compensation of current officers, directors, trustees, and key employees | 215,956 | 0 | 215,956 | 0 |
| 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) | | | | |
| 7 Other salaries and wages | 2,684,086 | 2,479,971 | 185,530 | 18,585 |
| 8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions) | 146,316 | 108,509 | 35,888 | 1,919 |
| 9 Other employee benefits | 122,825 | 111,010 | 11,278 | 537 |
| 10 Payroll taxes | 227,912 | 196,161 | 30,291 | 1,460 |
| 11 Fees for services (non-employees) | | | | |
| a Management | | | | |
| b Legal | 540 | | 540 | |
| c Accounting | 22,000 | | 22,000 | |
| d Lobbying | | | | |
| e Professional fundraising services See Part IV, line 17 | | | | |
| f Investment management fees | 7,690 | | 7,690 | |
| g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) | 338,878 | 239,311 | 99,322 | 245 |
| 12 Advertising and promotion | 25,272 | 21,175 | 2,152 | 1,945 |
| 13 Office expenses | 15,639 | | 15,457 | 182 |
| 14 Information technology | | | | |
| 15 Royalties | | | | |
| 16 Occupancy | 1,044,273 | 1,026,016 | 16,786 | 1,471 |
| 45 - 1 | , , | , , | | , |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials | | | | |
| 19 Conferences, conventions, and meetings | 21,627 | 15,757 | 5,870 | |
| 20 Interest | 157,709 | 134,865 | 22,844 | |
| 21 Payments to affiliates | 83,159 | 83,159 | . 0 | 0 |
| 22 Depreciation, depletion, and amortization | 604,299 | 593,751 | 10,548 | |
| 23 Insurance | 31,004 | 31,004 | | |
| 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 | 52,651 | 32,00 | | |
| expenses on Schedule O) a PROGRAM SUPPLIES / EXPENSES | 359,891 | 359,891 | | |
| b EQUIP MAINT/RENTAL | 59,688 | 49,222 | 10,466 | |
| c TELEPHONE | 22,120 | 10,166 | 11,954 | |
| d VEHICLE AND EMPLOYEE EXPENSE | 26,094 | 12,743 | 13,351 | |
| a All other eveness | 31,071 | 22 515 | 7,100 | 456 |
| e All other expenses | 6,795,295 | 23,515 | | |
| 25 Total functional expenses. Add lines 1 through 24e | 0,/90,295 | 6,043,472 | 725,023 | 26,800 |

Form **990** (2016)

Form 990 (2016)

15

16

17

18

19

20

21

23

24

25

26

27

28

29

31

32

33

34

Liabilities 22

Fund Balances

Assets or 30

Net

Other assets See Part IV, line 11 .

Grants payable . .

Deferred revenue . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Unrestricted net assets

Accounts payable and accrued expenses

Tax-exempt bond liabilities . . .

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17-24)

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Total liabilities. Add lines 17 through 25 .

Total assets. Add lines 1 through 15 (must equal line 34) .

Escrow or custodial account liability Complete Part IV of Schedule D

key employees, highest compensated employees, and disqualified

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here

and complete lines 30 through 34.

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Loans and other payables to current and former officers, directors, trustees,

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here lacktriangle and

| | 1 | Cash–non-interest-bearing | 666,139 | 1 | 668,672 |
|----------|---|--|---------|---|---------|
| | 2 | Savings and temporary cash investments | 0 | 2 | 0 |
| | 3 | Pledges and grants receivable, net | 240,227 | 3 | 223,754 |
| | 4 | Accounts receivable, net | 37,697 | 4 | 23,227 |
| | 5 | Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L | 0 | 5 | 0 |
| , | 6 | Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L | 0 | 6 | |
| _ ≚ | _ | Nietze en la la companya de la compa | | | |

0

0

0

0

0

0

400.694

168.860

38,908

3,599,353

774.844

4,581,965

9.637.844

265,509

0

0

1.249.888

11,153,241

15.735.206

Form 990 (2016)

15,735,206

833.038

132,566

48,906

3,700,187

0 18

0 22

0

0 25

749.149

4,630,808

9.590.679

1.247.488

11,019,843

15.650.651

181,676

15,650,651

15

16

17

19

20

21

23

24

26

27

28

29

30

31 0

32

33

34

0

90.963

Asset Notes and loans receivable, net 8 Inventories for sale or use 148.232 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other 20,920,463 basis Complete Part VI of Schedule D 10a 11,004,183 9,484,464 10c 11,435,999 Less accumulated depreciation 10b 2.721.135 2.891.897 11 Investments—publicly traded securities . 11 0 12 12 Investments—other securities See Part IV, line 11 . ٥ 13 13 Investments-program-related See Part IV, line 11 14 0 14 Intangible assets

of the audit, review, or compilation of its financial statements and selection of an independent accountant?

3a

3b

No

Form 990 (2016)

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

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

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

Audit Act and OMB Circular A-133?

Additional Data

Form 990 (2016)

Software ID: 16000421

Software Version: 2016v3.0

EIN: 06-0646988 Name: The Waterbury Young Men's Christian Association

| efile GRAPHIC print - DO NOT PROCESS As Filed Data - | | | | | | | DLN: 9349313203651 | | | | | |
|--|----------|--|----------------|--------------------------------|--|--|---|---|---|--|--|--|
| SCI | HED | ULE A | | Public (| Charity Statu | e and Dul | olic Supp | ort | OMB No 1545-0047 | | | |
| | m 990 | | Con | | ganization is a sect 4947(a)(1) nonexe Attach to Form 9 | ion 501(c)(3) o mpt charitable | organization or trust. | | 2016 | | | |
| • | | the Treasury | ► Inf | ormation abou | t Schedule A (Form www.irs.a | 990 or 990-EZ ov/form990. |) and its instru | ıctions is at | Open to Public Inspection | | | |
| Name | e of th | nue Service ne organiza ry Young Men's | | ociation | | | | Employer identific | ation number | | | |
| 1110 11 | accibai | | | | | | | 06-0646988 | | | | |
| | rt I | | | | is (All organization: it is (For lines 1 thro | | | See instructions. | | | | |
| 1 | nganiz | | | | sociation of churches | | | (A)(i) | | | | |
| 2 | | | | , | 1)(A)(ii). (Attach Sch | | | (~,(-,)- | | | | |
| 3 | | | | | vice organization descr | , | • | iii). | | | | |
| 4 | | | | · | ed in conjunction with | | | • | nter the hospital's | | | |
| _ | _ | name, city, | | J 6 4 l l 6.4 | | | | | h.d 170 | | | |
| 5 | Ш | An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170 (b)(1)(A)(iv). (Complete Part II) | | | | | | | | | | |
| 6 | | A federal, s | tate, or local | government or | governmental unit de | scribed in sectio | on 170(b)(1)(<i>A</i> | ۱)(v). | | | | |
| 7 | | section 17 | 0(b)(1)(A) | (vi). (Complete | • | • • | | ınıt or from the gener | al public described in | | | |
| 8 | | A communi | ry trust desc | rıbed ın section | 170(b)(1)(A)(vi) | (Complete Part I | I) | | | | | |
| 9 | | | | | scribed in 170(b)(1) ee instructions Enter t | | | | ege or university or a | | | |
| 10 | ✓ | 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 See section 509(a)(2). (Complete Part III) | | | | | | | | | | |
| 11 | | An organiza | tion organize | ed and operated | exclusively to test for | r public safety S | ee section 509 | (a)(4). | | | | |
| 12 | | more public | ly supported | l organizations d | exclusively for the be lescribed in section 5 the type of supporting | 09(a)(1) or sec | ction 509(a)(2 |). See section 509(a | e purposes of one or a)(3). Check the box | | | |
| a | | organizatio | n(s) the pow | | ated, supervised, or co ppoint or elect a majo | | | | | | | |
| b | | manageme | nt of the sup | | ervised or controlled in ation vested in the san and C. | | | | | | | |
| С | | | | | upporting organization | | | | ted with, its | | | |
| d | | functionally | integrated ' | The organization | d. A supporting organi n generally must satist t IV, Sections A and | fy a distribution i | requirement and | | | | | |
| e | | | | | ed a written determin | | RS that it is a Ty | pe I, Type II, Type II | I functionally | | | |
| f | Enter | | | on-runctionally dorganizations | integrated supporting | organization | | | | | | |
| g | | | | • | pported organization(| s) | | | | | | |
| (i)Name of supported organization | | | | (ii)EIN | (iii) Type of organization (described on lines 1- 10 above (see instructions)) | (iv Is the organiz your governir | ation listed in | (v) Amount of monetary support (see instructions) | (vi) Amount of other support (see instructions) | | | |
| | | | | | | Yes | No | | | | | |
| | | | | | | | | | | | | |
| T | | | | | | | | | | | | |
| Tota | | work Doduc | tion Act Not | tice, see the In | etructions for | Cat No 11285 | <u> </u> | Schedule A /Form 0 | 90 or 990-EZ) 2016 | | | |

| Sch | edule A (Form 990 or 990-EZ) 2016 | | | | | | Page 2 |
|-----|---|----------------------|--------------------|--------------------|---------------------------|--------------------|-----------------|
| P | art III Support Schedule for | Organizations | Described in S | ections 170(b |)(1)(A)(iv) ar | nd 170(b)(1)(A | (vi) |
| | (Complete only if you ch | ecked the box o | n line 5, 7, 8, o | r 9 of Part I or | if the organization | on failed to quali | |
| | III. If the organization fa | ails to qualify un | der the tests lis | ted below, plea: | se complete Par | t III.) | |
| | Section A. Public Support | | T | ı | | | |
| | Calendar year (or fiscal year beginning in) ▶ | (a)2012 | (b) 2013 | (c)2014 | (d)2015 | (e)2016 | (f)Total |
| 1 | Gifts, grants, contributions, and | | | | | | |
| | membership fees received (Do not | | | | | | |
| _ | include any "unusual grant ") | | | | | | |
| 2 | Tax revenues levied for the organization's benefit and either paid | | | | | | |
| | to or expended on its behalf | | | | | | |
| 3 | The value of services or facilities | | | | | | |
| | furnished by a governmental unit to the organization without charge | | | | | | |
| 4 | Total. Add lines 1 through 3 | | | | | | |
| 5 | The portion of total contributions by | | | | | | |
| | each person (other than a | | | | | | |
| | governmental unit or publicly | | | | | | |
| | supported organization) included on line 1 that exceeds 2% of the amount | | | | | | |
| | shown on line 11, column (f) | | | | | | |
| 6 | Public support. Subtract line 5 from | | | | | | |
| _ | line 4 Section B. Total Support | | | | | | |
| | Calendar year | | | | | | |
| | (or fiscal year beginning in) ▶ | (a)2012 | (b) 2013 | (c)2014 | (d)2015 | (e)2016 | (f)Total |
| 7 | | | | | | | _ |
| 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 | | | | | | |
| 4.0 | business is regularly carried on Other income Do not include gain or | | | | | | |
| 10 | loss from the sale of capital assets | | | | | | |
| | (Explain in Part VI) | | | | | | |
| 11 | | | | | | | |
| 12 | 10 Gross receipts from related activities, | etc (see instruction | l ns) | | | 12 | |
| | First five years. If the Form 990 is for | | | 6 | | | |
| 13 | | = | | | • | | anization, T |
| _ | check this box and stop here | | | | <u> </u> | P L | |
| | Section C. Computation of Public | • • | | (6)) | | 1 | |
| | Public support percentage for 2016 (lin | | | column (r)) | | 14 | |
| | Public support percentage for 2015 Sc | | | | 44 22 | 15 | |
| 16a | 33 1/3% support test—2016. If the | | | | ne 14 is 33 1/3% o | r more, check this | |
| | and stop here. The organization quali 33 1/3% support test—2015. If th | | | | III 32 - | | ▶ □ |
| b | | | | | and line 15 is 33 i | 1/3% of more, chec | _ |
| | box and stop here. The organization a 10%-facts-and-circumstances test | | | | no 12 162 or 16h | and line 14 | ▶□ |
| 1/a | is 10% or more, and if the organizatio | | | | | | |
| | in Part VI how the organization meets | | | | | | |
| | organization | | | | | | ►□ |
| b | 10%-facts-and-circumstances tes | st—2015. If the o | rganization did no | t check a box on I | ine 13, 16a, 16b, | or 17a, and line | |
| _ | 15 is 10% or more, and if the organiz | zation meets the "I | facts-and-circums | tances" test, chec | k this box and sto | p here. | |
| | Explain in Part VI how the organization | on meets the "facts | s-and-circumstanc | es" test. The orga | anization qualifies | as a publicly | |
| | supported organization | | | | | | ▶□ |
| 18 | Private foundation. If the organization | on did not check a | box on line 13, 1 | 6a, 16b, 17a, or 1 | 17b, check this box | k and see | |
| | instructions | | | | | | <u>▶</u> ∐ |
| | | | | | Schodu | le A (Form 990 o | r 400_F/\ 7016 |

Part III

| S | ection A. Public Support | | | | | | |
|---|--|-----------|-----------------|-----------|-----------------|-----------------|------------|
| | Calendar year (or fiscal year beginning in) ▶ | (a)2012 | (b) 2013 | (c)2014 | (d) 2015 | (e) 2016 | (f)Total |
| 1 | Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") | 2,470,390 | 2,932,154 | 3,766,971 | 3,629,453 | 3,035,508 | 15,834,476 |
| 2 | Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose | 3,169,767 | 3,242,160 | 3,478,223 | 3,610,106 | 3,726,831 | 17,227,087 |

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If

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

the organization fails to qualify under the tests listed below, please complete Part II.)

| | any activity that is related to the organization's tax-exempt purpose | 3,169,767 | 3,242,160 | 3,478,223 | 3,610,106 | 3,726,831 | 17,227,087 |
|-----|--|-----------------|-----------------|-----------|-----------------|-----------|------------|
| 3 | Gross receipts from activities that are not an unrelated trade or business under section 513 | 58,446 | 56,899 | 37,488 | 37,926 | 39,777 | 230,536 |
| 4 | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | 0 |
| 5 | The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | 0 |
| 6 | Total. Add lines 1 through 5 | 5,698,603 | 6,231,213 | 7,282,682 | 7,277,485 | 6,802,116 | 33,292,099 |
| 7a | Amounts included on lines 1, 2, and 3 received from disqualified persons | 0 | 0 | 0 | 0 | 0 | 0 |
| b | Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year | 0 | 0 | 0 | 0 | 0 | 0 |
| С | Add lines 7a and 7b | 0 | 0 | 0 | 0 | 0 | 0 |
| 8 | Public support. (Subtract line 7c from line 6) | | | | | | 33,292,099 |
| Se | ection B. Total Support | | | | | | |
| | Calendar year (or fiscal year beginning in) ▶ | (a) 2012 | (b) 2013 | (c)2014 | (d) 2015 | (e)2016 | (f)Total |
| 9 | Amounts from line 6 | 5,698,603 | 6,231,213 | 7,282,682 | 7,277,485 | 6,802,116 | 33,292,099 |
| 10a | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | 28,138 | 43,429 | 56,097 | 75,913 | 71,290 | 274,867 |
| ь | Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | | 0 |
| С | Add lines 10a and 10b | 28,138 | 43,429 | 56,097 | 75,913 | 71,290 | 274,867 |
| 11 | Net income from unrelated business activities not included in line 10b, | | | | | | 0 |

| | paid to or expended on its behalf | | | | | | · |
|-----|--|---------------------|-----------------|-----------------------|------------------|---------------------|------------|
| 5 | The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | 0 |
| 6 | Total. Add lines 1 through 5 | 5,698,603 | 6,231,213 | 7,282,682 | 7,277,485 | 6,802,116 | 33,292,099 |
| 7a | Amounts included on lines 1, 2, and 3 received from disqualified persons | 0 | 0 | 0 | 0 | 0 | 0 |
| b | Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year | 0 | 0 | 0 | 0 | 0 | 0 |
| С | Add lines 7a and 7b | 0 | 0 | 0 | 0 | 0 | 0 |
| 8 | Public support. (Subtract line 7c | | | | | | 33,292,099 |
| S | from line 6) ection B. Total Support | | | | | | · · · |
| | Calendar year | | ı | | | <u> </u> | |
| | (or fiscal year beginning in) ▶ | (a)2012 | (b) 2013 | (c)2014 | (d)2015 | (e)2016 | (f)Total |
| 9 | Amounts from line 6 | 5,698,603 | 6,231,213 | 7,282,682 | 7,277,485 | 6,802,116 | 33,292,099 |
| L0a | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | 28,138 | 43,429 | 56,097 | 75,913 | 71,290 | 274,867 |
| b | Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | | 0 |
| С | Add lines 10a and 10b | 28,138 | 43,429 | 56,097 | 75,913 | 71,290 | 274,867 |
| 11 | Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on | | | | | | 0 |
| 12 | Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) | 0 | 0 | 0 | 0 | 0 | 0 |
| 13 | Total support. (Add lines 9, 10c, 11, and 12) | 5,726,741 | 6,274,642 | 7,338,779 | 7,353,398 | 6,873,406 | 33,566,966 |
| 14 | First five years. If the Form 990 is for | or the organization | ı <u> </u> | nird, fourth, or fift | ı <u> </u> | ction 501(c)(3) ord | anization. |
| -4 | check this box and stop here | s. ce organization | | 1041411, 01 1111 | tax year as a se | 301(0)(3) 019 | ▶ □ |
| Se | ection C. Computation of Public | Support Perce | entage | | | | |
| 15 | Public support percentage for 2016 (li | | | column (f)) | | 15 | 99 18 % |
| 16 | Public support percentage from 2015 | | | | | 16 | 99 31 % |

16 Public support percentage from 2015 Schedule A, Part III, line 15 16 Section D. Computation of Investment Income Percentage Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f))

17

17

18

0 82 %

▶□

0 69 %

Investment income percentage from 2015 Schedule A, Part III, line 17

19a 331/3% support tests—2016. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not

20

more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 33 1/3% support tests - 2015. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions Schedule A (Form 990 or 990-EZ) 2016 Part IV Supporting Organizations (Complete only if you checked a box on line 12 of Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of

Page 4

8

9a

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2016

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete

1

8

10a

complete Part I of Schedule L (Form 990 or 990-EZ)

the organization had excess business holdings)

organization had an interest? If "Yes," provide detail in Part VI.

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

provide detail in Part VI.

answer line 10b below

Schedule A (Form 990 or 990-EZ) 2016

Sections A and D, and complete Part V) Section A. All Supporting Organizations Yes No

| 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 | I |
| to the contract of the contrac | | Ì |

| | 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 | | |
| | ın section 509(a)(1) or (2) | 2 | |
| | | | ľ |

| | | 1 | , , | i |
|----|---|----|-----|---|
| 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 | · | | |
| | ın section 509(a)(1) or (2) | 2 | | ĺ |
| 3a | Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) | | | ĺ |
| | below | 3a | | ĺ |
| h | Did the organization confirm that each supported organization qualified under section $501(c)(4)$ (5) or (6) and satisfied | | | ĺ |

| 3a | Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) | | |
|----|---|----|--|
| | below | 3a | |
| b | Did the organization confirm that each supported organization qualified under section $501(c)(4)$, (5) , or (6) and satisfied the public support tests under section $509(a)(2)$? If "Yes," describe in Part VI when and how the organization made the | | |
| | determination | 3b | |
| c | Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? | | |
| | | | |

| b | Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the | | |
|------------|--|----|--|
| | determination | 3b | |
| c | Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? | | |
| | If "Yes," explain in Part VI what controls the organization put in place to ensure such use | 3с | |
| 4 a | Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you | | |
| | checked 12a or 12b in Part I, answer (b) and (c) below | 4a | |

| D | the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the | | |
|----|---|------------|--|
| | determination | 3 b | |
| С | Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? | | |
| | If "Yes," explain in Part VI what controls the organization put in place to ensure such use | 3с | |
| 4a | Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you | | |
| | checked 12a or 12b ın Part I, answer (b) and (c) below | 4a | |
| b | Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported | | |
| | organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or | 4b | |

| 4a | Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you | | |
|----|--|----|--|
| | checked 12a or 12b ın 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 | | |
| | rganization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or apprized by or in connection with its supported organizations | 4b | |
| С | Did the organization support any foreign supported organization that does not have an IRS determination under sections | | |
| | 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes | | |
| | 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 | | |

| | (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 | |
| Ь | 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 | |
| С | 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 (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its | | |

| 6 | Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) 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 section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a | | |

| | organization's supported organizations? If "Yes," provide detail in Part VI. Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) 7 | 6 | |
|---|--|---|--|
| 7 | | | |
| | | 7 | |

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

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,"

Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

| Par | Supporting Organizations (continued) | | | |
|----------------|--|----------|---------|----|
| | | | Yes | No |
| 11 | Has the organization accepted a gift or contribution from any of the following persons? | | | |
| а | A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the | | | |
| | governing body of a supported organization? | 11a | | |
| b | A family member of a person described in (a) above? | 11b | | |
| c | A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI | 11c | | |
| Se | ction B. Type I Supporting Organizations | | | |
| | ction by Type a supporting organizations | | Yes | No |
| 1 | Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Par VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the | t | | |
| | 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 | | |
| Se | ction C. Type II Supporting Organizations | | | |
| | ction c. Type 11 Supporting Organizations | | Yes | No |
| 1 | Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s) | f | | |
| | | | | |
| | | 1 | | |
| Se | ction D. All Type III Supporting Organizations | | | |
| | // 11 2 2 | | 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, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? | e | | |
| | | 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 | | | |
| | | | | |
| <u>Se</u> 1 | ction E. Type III Functionally-Integrated Supporting Organizations | <u></u> | | |
| т а | Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction and the organization satisfied the Activities Test Complete line 2 below | tions) | | |
| | | | | |
| b | The organization is the parent of each of its supported organizations. Complete line 3 below | | | |
| С | The organization supported a governmental entity Describe in Part VI how you supported a government entity (se | e ınstru | ctions) |) |
| 2 | Activities Test Answer (a) and (b) below. | | Yes | No |
| a | Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of the activities. | 22 | | |
| h | substantially all of its activities Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the | 2a | | |
| U | 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. | | | |
| | Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> . | 3a | | |
| b | Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its | | | |
| | supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard | 3b | | |

| 4 | Add lines 1 through 3 | 4 | | |
|---|--|----------|----------------|--------------------------------|
| 5 | Depreciation and depletion | 5 | | |
| 6 | Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) | 6 | | |
| 7 | Other expenses (see instructions) | 7 | | |
| 8 | Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) | 8 | | |
| | Section B - Minimum Asset Amount | | (A) Prior Year | (B) Current Year (optional) |
| | Section B - Minimum Asset Amount | | (A) Prior Year | ` ' |
| 1 | Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year) | 1 | | |
| _ | Average monthly value of securities | 1a | | |
| d | Average monthly value of securities | 14 | | |
| b | Average monthly cash balances | 1b | | |
| c | Fair market value of other non-exempt-use assets | 1c | | |
| d | Total (add lines 1a, 1b, and 1c) | 1d | | |
| e | Discount claimed for blockage or other factors | | | |

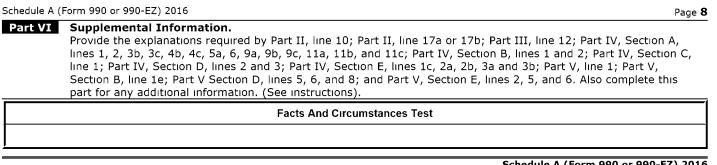
| Section B - Minimum Asset Amount | | (A) Prior Year | (B) Current Year (optional) |
|--|------------|----------------|--------------------------------|
| 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year) | 1 | | |
| a Average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

| _ | tax year or assets held for part of year) | 1 | |
|---|---|------------|--------------|
| a | Average monthly value of securities | 1a | |
| b | Average monthly cash balances | 1 b | |
| c | Fair market value of other non-exempt-use assets | 1c | |
| d | Total (add lines 1a, 1b, and 1c) | 1d | |
| е | Discount claimed for blockage or other factors (explain in detail in Part VI) | | |
| 2 | Acquisition indebtedness applicable to non-exempt use assets | 2 | |
| 3 | Subtract line 2 from line 1d | 3 | |
| 4 | Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions) | 4 | |
| 5 | Net value of non-exempt-use assets (subtract line 4 from line 3) | 5 | |
| 6 | Multiply line 5 by 035 | 6 | |
| 7 | Recoveries of prior-year distributions | 7 | |
| 8 | Minimum Asset Amount (add line 7 to line 6) | 8 | |
| | | | |
| | Section C - Distributable Amount | | Current Year |
| 1 | Adjusted net income for prior year (from Section A, line 8, Column A) | 1 | |
| 2 | Enter 85% of line 1 | 2 | |
| 3 | Minimum asset amount for prior year (from Section B, line 8, Column A) | 3 | |

Enter greater of line 2 or line 3 4 5 Income tax imposed in prior year Distributable Amount. Subtract line 5 from line 4, unless subject to emergency 6 temporary reduction (see instructions)

Schedule A (Form 990 or 990-EZ) (2016)

e Excess from 2016. . . .



efile GRAPHIC print - DO NOT PROCESS As Filed Data -

SCHEDULE C (Form 990 or 990-

Department of the Treasury

EZ)

Political Campaign and Lobbying Activities

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

DLN: 93493132036517

<u>2016</u>

Open to Public Inspection

| Intern | nal Revenue Service | | | | | | | |
|-----------------------------|--|---|---|---|--------------------------------|----------------------------|--|--|
| • S • • • • If the | Section 501(c)(3) organizations Co Section 501(c) (other than section s Section 527 organizations Comple e organization answered "Yes" o Section 501(c)(3) organizations tha | on Form 990, Part IV, Line 3, or Form 9 complete Parts I-A and B Do not complete 501(c)(3)) organizations Complete Parts ete Part I-A only on Form 990, Part IV, Line 4, or Form 9 et have filed Form 5768 (election under s et have NOT filed Form 5768 (election ur | e Part I-C s I-A and C below 990-EZ, Part VI, Iin section 501(h)) Co | Do not complete in the design of the design | Part I-E Activiti Do not | B i es), comp | then plete Part II-E | 3 |
| lf the | e organization answered "Yes" o | on Form 990, Part IV, Line 5 (Proxy Tax | | | | | | |
| | xy Tax) (see separate instruction Section 501(c)(4), (5), or (6) organi | | | | | | | |
| | me of the organization | Zations Complete Fait in | | Emplo | yer id | entif | fication num | ıber |
| The | e Waterbury Young Men's Christian Assoc | ciation | | 06-064 | | | | |
| Par | t I-A Complete if the orga | anization is exempt under section | n 501(c) or is | | | niza | tion. | |
| 1 2 | | nization's direct and indirect political car | | | ⊳ | \$_ | | |
| 3 | Volunteer hours | | | | | | | |
| Par | t I-B Complete if the orga | anization is exempt under section | on 501(c)(3). | | | | | |
| 1 | Enter the amount of any excise t | cax incurred by the organization under se | ection 4955 | | > | \$_ | | |
| 2 | Enter the amount of any excise t | cax incurred by organization managers u | nder section 4955 | | • | \$_ | | |
| 3 | If the organization incurred a sec | ction 4955 tax, did it file Form 4720 for t | this year? | | | | ☐ Yes | □ No |
| 4a | Was a correction made? | | | | | | ☐ Yes | □ No |
| Ь | If "Yes," describe in Part IV | | | | | | | |
| Par | rt I-C Complete if the orga | anization is exempt under section | n 501(c), exce | ept section 501 | L(c)(: | <u>3).</u> | | |
| 1 | <i>'</i> · | ded by the filing organization for section | · | | > | \$_ | | |
| 2 | Enter the amount of the filing org function activities | ganization's funds contributed to other o | rganizations for se | ection 527 exempt | • | \$ ₋ | | |
| 3 | Total exempt function expenditur | res Add lines 1 and 2 Enter here and or | n Form 1120-POL, | line 17b | > | \$ | | |
| 4 | Did the filing organization fileFor | rm 1120-POL for this year? | | | | | ☐ Yes | □ No |
| 5 | organization made payments Fo of political contributions received | employer identification number (EIN) of or each organization listed, enter the amo d that were promptly and directly deliver tee (PAC) If additional space is needed, | ount paid from the ed to a separate p | filing organizatior olitical organizatio | 's fun | ds Al | lso enter the | |
| | (a) Name | (b) Address | (c) EIN | (d) Amount pal filing organiza funds If none, -0- | tıon's | | (e) Amount contributions and promp directly deliv separate proganization enter | or received only and vered to a colitical of the following in the followin |
| | | | | | | | | |
| 2 | | | | | | | | |
| 3 | | | | | | | | |
| 4 | | | | | | | | |
| 5 | | | | | | | | |
| 6 | | | | | | | | |

| | Over \$1,000,000 but not over \$1,500,000 | \$175,000 plus 10% of the | excess over \$1,000,00 | 0 | | | | |
|--|--|-----------------------------------|------------------------|---------------------|----------|------------|--|--|
| | Over \$1,500,000 but not over \$17,000,000 | \$225,000 plus 5% of the e | xcess over \$1,500,000 | | | | | |
| | Over \$17,000,000 | \$1,000,000 | | | | | | |
| | | | | _ | | | | |
| g | Grassroots nontaxable amount (enter 25% of | line 1f) | | | | | | |
| h Subtract line 1g from line 1a If zero or less, enter -0- | | | | | | | | |
| i | Subtract line 1f from line 1c If zero or less, el | nter -0- | | | | | | |
| j | If there is an amount other than zero on eithe section 4911 tax for this year? | r line 1h or line 1i, did the org | anızatıon file Form 4 | 1720 reporting | | ☐ Yes ☐ No | | |
| | (Some organizations that ma | See the separate instru | | | | | | |
| | columns below. | See the separate matra | ctions for lines | za tnrougn <i>i</i> | 2f.) | , ve | | |
| | | Expenditures During 4 | | | 2f.) | | | |
| | | • | | | (d) 2016 | (e) Total | | |
| 2a | Lobbying Calendar year (or fiscal year | Expenditures During 4 | -Year Averaging | Period | | | | |
| 2a b | Lobbying Calendar year (or fiscal year beginning in) | Expenditures During 4 | -Year Averaging | Period | | | | |

Schedule C (Form 990 or 990-EZ) 2016

Total lobbying expenditures

Grassroots ceiling amount (150% of line 2d, column (e))

Grassroots nontaxable amount

Grassroots lobbying expenditures

| Pa | rt II-B Complete if the organization is exempt under section 501(c)(3) and has NOT fil Form 5768 (election under section 501(h)). | ed | | | | |
|---------|--|--|---|--|-----------------------|----------|
| For e | each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying | (a) | | | (b) | |
| activ | · · · · · · · · · · · · · · · · · · · | Yes | No | A | mour | nt |
| 1 | During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of | | | | | |
| | | | | | | |
| а | Volunteers? | | No | | | |
| b | Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? | Yes | | | | |
| С. | Media advertisements? | | No | | | |
| d | Mailings to members, legislators, or the public? | | No | | | |
| e | Publications, or published or broadcast statements? | | No | | | |
| f | Grants to other organizations for lobbying purposes? | V | No | | | 0.40 |
| g h | Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? | Yes | No | | | 3,12 |
| i | Other activities? | | No | | | |
| j | Total Add lines 1c through 1i | | NO | | | 2.12 |
| J 2a | Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? | | No | | | 3,12 |
| za b | If "Yes," enter the amount of any tax incurred under section 4912 | | INO | | | |
| 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? | | | | | |
| | t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c) | (5) 0 | r sectio | \n 5 | 01/6 | ٠, |
| I GI | (6). | (3), 0 | . Section | ,,, <u>,</u> | 01(0 | • • |
| | • • | | | | Yes | No |
| 1 | Were substantially all (90% or more) dues received nondeductible by members? | | | 1 | | |
| 2 | Did the organization make only in-house lobbying expenditures of \$2,000 or less? | | | 2 | | |
| 3 | Did the organization agree to carry over lobbying and political expenditures from the prior year? | | | 3 | | |
| Pai | t III-B Complete if the organization is exempt under section $501(c)(4)$, section $501(c)$ | | | | 01(c | :)(6) |
| | and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes." | III-A | , line 3, | , is | | |
| 1 | Dues, assessments and similar amounts from members | 1 | | | | |
| 2 | Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political | | | | | |
| _ | expenses for which the section 527(f) tax was paid). | | | | | |
| а | Current year | 2a | | | | |
| b | Carryover from last year | 2b | | | | |
| С | Total | 2c | | | | |
| 3 | Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues | 3 | | | | |
| 4 | If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? | | | | | |
| 5 | Taxable amount of lobbying and political expenditures (see instructions) | 5 | | | | |
| | art IV Supplemental Information | | | | | |
| | • • | D 1 11 | • • | | 2 / | |
| | vide the descriptions required for Part l-A, line 1, Part l-B, line 4, Part l-C, line 5, Part II-A (affiliated group list), tructions), and Part II-B, line 1 Also, complete this part for any additional information | Part II- | A, lines . | ı and | 2 (56 | ee |
| | Return Reference Explanation | | | | | |
| Sche | dule C, Part II-B, Line 1 DETAILED DURING 2016, THE WATERBURY YMCA ENGAGED IN THE FOLLOWING ACTIVI | TIES T | O EDUCA | TE | | |
| DES | LEGISLATORS AND ELECTED OFFICIALS ABOUT ITS PROGRAMS AND SERVICE WATERBURY, CT AREA - THE EXECUTIVE DIRECTOR SPOKE WITH LEGISLATE GOVERNMENT OFFICIALS REGARDING FUNDING FOR SPECIFIC PROGRAMS A TO THE ORGANIZATION - THE ORGANIZATION PAYS ANNUAL DUES TO THE CT ALLIANCE MONITORS LEGISLATIVE ACTIVITIES AS THEY RELATE TO YMCA FOR THE BENEFIT OF THESE ORGANIZATIONS BY ATTENDING MEETINGS, CO SESSIONS, ETC | ES IN T DRS, TH ND OTH CT ALL N'S IN (| HE GREA HEIR STA HER ISSU IANCE OI CT AND A | ATER AFF, A JES R F YMO ADVO | ELAT CA'S CATE: | THE S |
| DES | DURING 2016, THE WATERBURY YMCA ENGAGED IN THE FOLLOWING ACTIVI CRIPTION OF THE LOBBYING EVITY WATERBURY, CT AREA - THE EXECUTIVE DIRECTOR SPOKE WITH LEGISLATOR GOVERNMENT OFFICIALS REGARDING FUNDING FOR SPECIFIC PROGRAMS A TO THE ORGANIZATION - THE ORGANIZATION PAYS ANNUAL DUES TO THE CT ALLIANCE MONITORS LEGISLATIVE ACTIVITIES AS THEY RELATE TO YMC/ FOR THE BENEFIT OF THESE ORGANIZATIONS BY ATTENDING MEETINGS, CO SESSIONS, ETC | ES IN T DRS, TH ND OTH CT ALL N'S IN (| HE GREA HEIR STA HER ISSU IANCE OI CT AND A | ATER AFF, A JES R F YMO ADVO | ELAT CA'S CATE: | THE S |

efile GRAPHIC print - DO NOT PROCESS SCHEDULE D

(Form 990)

As Filed Data -

DLN: 93493132036517

OMB No 1545-0047

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.

Open to Public Inspection

Department of the Treasury Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization **Employer identification number** The Waterbury Young Men's Christian Association 06-0646988 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b)Funds and other accounts 1 Total number at end of year 2 Aggregate value of contributions to (during 3 Aggregate value of grants from (during year) Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year > Number of states where property subject to conservation easement is located > 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? □ No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1

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

(ii) Assets included in Form 990, Part X

Assets included in Form 990, Part X

Revenue included on Form 990, Part VIII, line 1

Cat No 52283D

 ${f d}$ Equipment .

| Sche | dule D (Form 990) 2016 | | | | | | | | Page 2 |
|------------|--|--------------------------|------------------------------|----------------|---------------------|-------------|--------------|------------------------------|---------------------|
| Par | t IIII Organizations M | aintaining Colle | ections of Art, F | listoric | al Trea | sures, o | r Other S | Similar Assets | (continued) |
| 3 | Using the organization's acq items (check all that apply) | uisition, accession | , and other records, | check a | ny of the | following | that are a | significant use of it | s collection |
| а | Public exhibition | | | d | ☐ Lo | an or exch | nange prog | rams | |
| b | Scholarly research | | | e | □ Ot | her | | | |
| c | Preservation for future | e generations | | | | | | | |
| 4 | Provide a description of the Part XIII | organization's colle | ections and explain | how they | further | the organı | zation's ex | empt purpose in | |
| 5 | During the year, did the org assets to be sold to raise fui | | | | | | | | es 🗆 No |
| Pa | Complete if the or X, line 21. | | | m 990, | Part IV, | line 9, c | or reporte | d an amount on | Form 990, Part |
| 1 a | Is the organization an agent | | n or other intermed | ary for o | ontributi | ons or oth | er assets r | not | _ |
| | included on Form 990, Part | X ? | | | | | | □ Y | es 🗌 No |
| ь | If "Yes," explain the arrange | mont in Bart VIII | and complete the fo | llowing t | ablo | | | Amount | . |
| C | Beginning balance | ement m Part XIII (| and complete the fo | mownig t | able | | 1c | Amount | · |
| d | Additions during the year | | | | | | 1d | | |
| e | Distributions during the year | r | | | | | 1e | | |
| f | Ending balance | • | | | | | 1f | | |
| 2a | Did the organization include | an amount on For | m 990. Part X. line | 21. for e | scrow or | custodial - | account lia | bility? Y | |
| | - | | | • | | | | . Цт | |
| b | If "Yes," explain the arrange | | | | | | | | <u> ⊔</u> |
| Pa | rt V Endowment Fun | as. Complete if i | | | | | | | (a)Equir years hack |
| 1a | Beginning of year balance . | | (a)Current year 1,249,996 | (b) PH | or year 1,038,03 | | 10,810 | (d)Three years back 4,423 | |
| | Contributions | | 2,400 | | 230,52 | | 1,003,700 | 5,300 | |
| | Net investment earnings, gair | ns, and losses | 76,884 | | -18,55 | 5 | 23,521 | 1,087 | 73 |
| | Grants or scholarships | · | | | | | | | |
| | Other expenditures for faciliti | - F | 0 | | | | 0 | 0 | 0 |
| f | Administrative expenses . | | | | | | | | |
| g | End of year balance | | 1,329,280 | | 1,249,99 | 5 | 1,038,031 | 10,810 | 4,423 |
| 2 | Provide the estimated perce | ntage of the curre | nt year end balance | (line 1g, | column | (a)) held a | 1 as | | |
| а | Board designated or quasi-e | - | 0 % | , | | . ,, | | | |
| ь | Permanent endowment ▶ | 93 76 % | | | | | | | |
| С | Temporarily restricted endo | wment ► 6 24 | 4 % | | | | | | |
| | The percentages on lines 2a | , 2b, and 2c should | d equal 100% | | | | | | |
| 3a | Are there endowment funds organization by | not in the possess | ion of the organizat | on that | are held | and admir | nistered for | the | Yes No |
| | (i) unrelated organizations | | | | | | | | Ba(i) No |
| | (ii) related organizations | | | | | | |]3 | a(ii) No |
| ь 4 | If "Yes" on 3a(II), are the re Describe in Part XIII the inte | = | | | | | | | 3b |
| | | | | willelit iu | iiius | | | | |
| e) | It VI Land, Buildings, Complete if the or | | | n 990, I | Part IV. | lıne 11a. | See Forn | n 990, Part X, lır | ne 10. |
| | Description of property | (a) Cost or other | er basis (b)Cost | | asıs (othe | | cumulated de | | (d)Book value |
| | | (ınvestmer | ic) | | | | | | |
| 1a | Land | | | | 1,495,9 | 77 | | | 1,495,977 |
| b | Buildings | | | | 15,832,4 | 80 | | 7,138,359 | 8,694,121 |
| С | Leasehold improvements | | | | 5,5 | 00 | | 966 | 4,534 |

2,116,256

1,470,250

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

608,588

632,779

11,435,999

1,507,668

837,471

| Part VII | Investments—Other Securities. Complete if the org. See Form 990, Part X, line 12. | anızatıon answe | ered 'Yes' on Form | 990, Part IV, line 11b. |
|-----------------------|---|---------------------------|-----------------------|---|
| | (a) Description of security or category (including name of security) | (b) Book value | | ethod of valuation id-of-year market value |
| | derivatives | | | · |
| Other | neld equity interests | _ | | |
| .) | | | | |
|) | | | | |
| :) | | | | |
|)) | | | | |
| :) | | | | |
|) | | | | |
| i) | | | | |
| 1) | | | | |
| | in (b) must equal Form 990, Part X, col (B) line 12) | • | 137 1 5 | |
| art VIII | See Form 990, Part X, line 13. | | wered 'Yes' on Fori | m 990, Part IV, line 11c. |
| | (a) Description of investment | (b) Book value | | ethod of valuation nd-of-year market value |
| L) | | | | |
| !) | | | | |
| 3) | | | | |
| 1) | | | | |
| 5) | | | | |
| 5) | | | | |
| ") | | | | |
| 3) | | | | |
|)) | | | | |
| | in (b) must equal Form 990, Part X, col (B) line 13) | | | |
| Part IX | Other Assets. Complete if the organization answered 'Yes' (a) Description | on Form 990, Par | t IV, iine IId See Fo | (b) Book value |
| L) | | | | |
| !) | | | | |
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| ') | | | | |
| () | | | | |
|) | | | | |
| otal. (Colu Part X | umn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answer | ed 'Yes' on For | | • • • • • • • • • • • • • • • • • • • |
| | See Form 990, Part X, line 25. (a) Description of liability | | ok value | |
| | income taxes | | | |
| | | | | |
|) | | | | |
|) | | | | |
|) | | | | |
|) | | | | |
| | | | | |
|) | | | | |
| ') | | | | |
| | | | | |
| 3) | | | | |
| 3) | | | | |

Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

4a

4b

Explanation

Page 4

43,046

6,240,359

554.936

6,795,295

Schedule D (Form 990) 2015

2e

3

4c

5

7,690

547,246

Schedule D (Form 990) 2016

е

3

4

b

C

5

Add lines 2a through 2d .

Subtract line 2e from line 1 .

Part XIII Supplemental Information

Return Reference

See Additional Data Table

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**

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,

| | chedule D (Form 990) 2015 | | | |
|--------------------------------------|-----------------------------|--|--|--|
| Supplemental Information (continued) | Part XIII Supplemental Info | | | |
| Return Reference Explanation | Return Reference | | | |
| | | | | |
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| | | | | |

Schedule D (Form 990) 2016

Additional Data

Software ID: 16000421 Software Version: 2016v3.0

EIN: 06-0646988 Name: The Waterbury Young Men's Christian Association

| Supplemental Information | | |
|--------------------------|----------|--|
| Return Reference | Explanat | |

Schedule D, Part V, Line 4

tion

THE ORGANIZATION'S ENDOWMENT CONSISTS OF INDIVIDUAL DONOR-RESTRICTED FUNDS ESTABLISHED

Intended uses of endowment FOR funds A VARIETY OF PURPOSES AS REQUIRED BY GENERALLY ACCEPTED ACCOUNTING PRINCIPLES, NET ASSET S ASSOCIATED WITH ENDOWMENT FUNDS ARE CLASSIFIED AND REPORTED BASED ON THE EXISTENCE OR AB SENCE OF DONOR-IMPOSED RESTRICTIONS

| Supplemental Information | |
|--|---|
| Return Reference | Explanation |
| Schedule D, Part X, Line 2 FIN 48 (ASC 740) footnote | THE ORGANIZATION BELIEVES THAT IT HAS APPROPRIATE SUPPORT FOR ANY TAX POSITIONS TAKEN, AND AS SUCH, DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS THAT ARE MATERIAL TO THE FINANCIAL STA TEMENTS THE ORGANIZATION'S RETURN OF ORGANIZATIONS EXEMPT FROM INCOME TAX (FORM 990) FOR THE YEARS ENDED DECEMBER 31, 2013, 2014, AND 2015 ARE SUBJECT TO EXAMINATION BY THE IRS, G ENERALLY FOR THREE YEARS AFTER THEY WERE FILED |

| Supplemental Information | |
|---|--|
| Return Reference | Explanation |
| Schedule D, Part XI, Line 2(d) Other revenues in audited financial statements not in form 990 | SPECIAL EVENT EXPENSES DEDUCTED ON FORM 990 PART VIII LINE 8B - 27320 COST OF GOODS SOLD DEDUCTED ON FORM 990 PART VIII LINE 10B - 15726 |

| Supplemental Information | | |
|---|--|--|
| Return Reference | Explanation | |
| Schedule D, Part XI, Line 4(b) Other revenues in form 990 not in audited financial statements | PROGRAM FINANCIAL ASSISITANCE BASED ON NEED - IN KIND - 547246 | |

| Supplemental Information | |
|---|--|
| Return Reference | Explanation |
| Schedule D, Part XII, Line 2(d) Other expenses in audited financial statements not in form 990 | SPECIAL EVENT EXPENSES DEDUCTED ON FORM 990 PART VIII LINE 8B - 27320 COST OF GOODS SOLD DEDUCTED ON FORM 990 PART VIII LINE 10B - 15726 |

| Supplemental Information | | |
|--|---|--|
| Return Reference | Explanation | |
| Schedule D, Part XII, Line 4(b) Other expenses in form 990 not in audited financial statements | PROGRAM FINANCIAL ASSISTANCE BASED ON NEED - IN KIND - 547246 | |

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493132036517 OMB No 1545-0047 SCHEDULE G **Supplemental Information Regarding** (Form 990 or 990-EZ) **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 Open to Public Department of the Treasury Attach to Form 990 or Form 990-EZ. Inspection Internal Revenue Service ▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www irs gov/form990 **Employer identification number** Name of the organization The Waterbury Young Men's Christian Association 06-0646988 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations e Solicitation of non-government grants Internet and email solicitations Solicitation of government grants Phone solicitations ☐ Special fundraising events ☐ In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (i) Name and address of (ii) Activity (iii) Did (iv) Gross receipts (v) Amount paid to (vi) Amount paid to ındıvıdual fundraiser have from activity (or retained by) (or retained by) or entity (fundraiser) custody or fundraiser listed in organization control of col (i) contributions? Yes No 8 10 Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Cat No 50083H Schedule G (Form 990 or 990-EZ) 2016

| | | 5,000. (a)Event #1 | (b) Event #2 | (c)Other events | (d) |
|-----------------|---|--|--|-------------------------|--|
| KIE | | Golf Tournament (event type) | Fischang-Cicchetti Race (event type) | (total number) | Total events (add col (a) through col (c)) |
| Revenue | | | | | |
| | 1 Gross receipts | 56,370 | 15,027 | 7,150 | 78,547 |
| | 2 Less Contributions | 39,530 | 7,378 | 7,150 | 54,058 |
| | line 2) | 16,840 | 7,649 | 0 | 24,489 |
| | 4 Cash prizes | | | | |
| ses | Noncash prizes Rent/facility costs | 16.706 | | | 16.706 |
| Expenses | 7 Food and beverages | 16,786 | | | 16,786 |
| ă т | 8 Entertainment | | | | |
| Direct | 9 Other direct expenses | 1,786 | 8,748 | 0 | 10,534 |
| | 10 Direct expense summary Add lines 4 | through 9 in column (d) | | • | 27,320 |
| | 11 Net income summary Subtract line 10 | | | | -2,831 |
| Pai | Gaming. Complete if the org on Form 990-EZ, line 6a. | anızatıon answered "Ye | es" on Form 990, Part I | V, line 19, or reported | more than \$15,000 |
| e | | | | | |
| venu | | (a) Bingo | (b) Pull tabs/Instant bingo/progressive bingo | (c) Other gaming | (d) Total gaming (add col (a) through col (c)) |
| Revenue | 1 Gross revenue | (a) Bingo | | (c) Other gaming | |
| | 1 Gross revenue | (a) Bingo | | (c) Other gaming | |
| | | (a) Bingo | | (c) Other gaming | |
| Expenses | 2 Cash prizes | (a) Bingo | | (c) Other gaming | |
| | 2 Cash prizes | (a) Bingo | | (c) Other gaming | |
| Expenses | 2 Cash prizes | (a) Bingo | | (c) Other gaming | |
| Expenses | 2 Cash prizes | | bingo/progressive bingo | | |
| Expenses | 2 Cash prizes | ☐ Yes%_ | bingo/progressive bingo | ☐ Yes % | |
| Expenses | 2 Cash prizes | Yes % No | bingo/progressive bingo | ☐ Yes % ☐ No | |
| blied Expenses | 2 Cash prizes | Yes% No through 5 in column (d) t line 7 from line 1, column ton conducts gaming active | bingo/progressive bingo Yes % No n (d) | ☐ Yes % ☐ No | col (a) through col (c)) |
| Direct Expenses | 2 Cash prizes | Yes % No through 5 in column (d) t line 7 from line 1, column ion conducts gaming activities in each of | Yes | ☐ Yes % % ☐ No ▶ | |

| sche | dule G (Form 990 or 990-EZ) 2016 | | | | | F | age |
|------------|--|---|---|----------|------------|---------|-----|
| L 1 | Does the organization conduct gaming | activities with nonmember | s [?] | | ☐ Yes | □No | |
| .2 | Is the organization a grantor, beneficial formed to administer charitable gamin | | a member of a partnership or other entity | | □Yes | □No | |
| .3 | Indicate the percentage of gaming act | ıvıty conducted ın | | | | | |
| а | The organization's facility | | | 13a | | | |
| b | An outside facility | | | 13b | | | |
| 4 | Enter the name and address of the per | rson who prepares the orga | nization's gaming/special events books and re | cords | | | |
| | Name | | | | | | |
| | Address > | | | | | | |
| 5a | Does the organization have a contract revenue? | with a third party from who | om the organization receives gaming | | □Yes | □No | |
| b | If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the | | | | | | |
| | amount of gaming revenue retained by | y the third party $ hildsymbol{\blacktriangleright}$ \$ | | | | | |
| c | If "Yes," enter name and address of th | e third party | | | | | |
| | Name > | | | | | | |
| | Address ► | | | | | | |
| 6 | Gaming manager information | | | | | | |
| | Name ► | | | | | | |
| | Gaming manager compensation $ hilder$ \$ | | | | | | |
| | Description of services provided | | | | | | |
| | ☐ Director/officer | ☐ Employee | ☐ Independent contractor | | | | |
| 7 | Mandatory distributions | | | | | | |
| а | Is the organization required under state retain the state gaming license? | te law to make charitable di | stributions from the gaming proceeds to | | П., | п | |
| b | | ured under state law distribi | uted to other exempt organizations or spent | | ☐ Yes | □ No | |
| _ | in the organization's own exempt activ | | | | | | |
| Par | t IV Supplemental Information | on. Provide the explanat .5c, 16, and 17b, as app | tions required by Part I, line 2b, column dicable. Also complete this part to provid | | | | |
| | Return Reference | | Explanation | | | | _ |
| | | | Sched | ule G (F | orm 990 or | 990-F7) | 20 |

efile GRAPHIC print - DO NOT PROCESS DLN: 93493132036517 As Filed Data OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations,** (Form 990) **2016** Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public Attach to Form 990. Department of the Inspection ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Treasury Internal Revenue Service Name of the organization **Employer Identification number** The Waterbury Young Men's Christian Association 06-0646988 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and ✓ Yes Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete If the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (c) IRC section (a) Name and address of (b) EIN (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, if applicable non-cash assistance organization grant cash or assistance or government assistance other) (1) (3) (5) (6)(7)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2016

(5) (6)

Schedule I (Form 990) 2016

(7)

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

Explanation IT IS THE GOAL OF THE WATERBURY YMCA TO PROVIDE SERVICES TO ANY PERSON WHO DESIRES TO PARTICIPATE IN THE ACTIVITIES AND PROGRAMS OF THE Schedule I, Part I, Line 2 Procedures for monitoring use of YMCA, REGARDLESS OF THEIR ABILITY TO PAY THE STANDARD MEMBERSHIP OR PROGRAM FEE THOSE NOT ABLE TO PAY THE FULL FEE MAY BE AWARDED

grant funds ASSISTANCE BASED UPON A SLIDING SCALE AND DEMONSTRATED NEED. THE WATERBURY YMCA BELIEVES A STRONG SENSE OF OWNERSHIP AND PRIDE IS DEVELOPED IF THE FINANCIAL AID RECIPIENT CONTRIBUTES TO THE COST OF THEIR INVOLVEMENT. THEREFORE, APPLICANTS WILL BE ASKED TO PAY A PORTION

OF THE FEE FLIGIBILITY IS REVIEWED PRIOR TO THE BEGINNING OF THE NEXT PROGRAM OR MEMBERSHIP PERIOD.

Page 2

| efil | e GRAPHIC pi | int - DO NOT PROCESS As File | d Dat | ta - | DLN: 934 | 4931 3 | 2036 | 517 |
|------------|---|--|----------|--|------------------------|---------------|----------------|---------|
| Sch | edule J | Compe | nsat | ion Information | 10 | 1B No | 1545-0 | 0047 |
| (Forr | n 990) | For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ▶ Attach to Form 990. | | | | | | <u></u> |
| • | tment of the Treasury | ▶ Information about Sch | edule . | J (Form 990) and its instructions | is at | pen t | | |
| | al Revenue Service ne of the organiz | _ | ww.irs | <u>gov/107111990</u> . | Employer identificat | | ectio Imber | |
| | | en's Christian Association | | | 06-0646988 | | | |
| Pa | Tt I Questi | ons Regarding Compensation | | | | | Yes | |
| 1 a | | opiate box(es) if the organization provide ection A, line 1a Complete Part III to pro | | | | | res | No_ |
| | First-class | or charter travel | | Housing allowance or residence for | personal use | | | |
| | _ | companions | 닏 | Payments for business use of perso | | | | |
| | | nification and gross-up payments | 님 | Health or social club dues or initiati | | | | |
| | ☐ Discretion | ary spending account | Ш | Personal services (e g , maid, chau | ffeur, chef) | | | |
| b | | xes in line 1a are checked, did the organi all of the expenses described above? If "N | | | nent or reimbursement | 1b | | |
| 2 | | ation require substantiation prior to reimbes, officers, including the CEO/Executive | | | e 1a? | 2 | | |
| 3 | organization's C | If any, of the following the filing organiza EO/Executive Director Check all that app Id organization to establish compensation | ly Do | not check any boxes for methods | | | | |
| | ✓ Compens | ation committee | | Written employment contract | | | | |
| | · | ent compensation consultant | ✓ | Compensation survey or study | | | | |
| | ✓ Form 990 | of other organizations | ✓ | Approval by the board or compensa | ation committee | | | |
| 4 | During the year related organiza | , did any person listed on Form 990, Part ition | VII, Se | ection A, line 1a with respect to the fi | ling organization or a | | | |
| а | Receive a sever | ance payment or change-of-control paym | ent? | | | 4a | | No |
| b | | r receive payment from, a supplemental i | | lified retirement plan? | | 4b | | No |
| С | | r receive payment from, an equity-based of lines 4a-c, list the persons and provide | | - | t III | 4c | | No |
| 5 | For persons liste |), 501(c)(4), and 501(c)(29) organized on Form 990, Part VII, Section A, line ontingent on the revenues of | | | | | | |
| а | The organization | 17 | | | | 5a | | No |
| b | Any related orga If "Yes," on line | anization? 5a or 5b, describe in Part III | | | | 5b | | No |
| 6 | | ed on Form 990, Part VII, Section A, line ontingent on the net earnings of | 1a, dıd | the organization pay or accrue any | | | | |
| а | The organization | 1? | | | | 6a | | No |
| b | Any related orga | | | | | 6b | | No |
| | - | 6a or 6b, describe in Part III | | | | | | |
| 7 | | ed on Form 990, Part VII, Section A, line escribed in lines 5 and 6? If "Yes," describ | | | ed | 7 | | No |
| 8 | | nts reported on Form 990, Part VII, paid hitial contract exception described in Regu | | | escribe | 8 | | No |
| 9 | If "Yes" on line 53 4958-6(c)? | 8, did the organization also follow the reb | uttable | presumption procedure described in | Regulations section | 9 | | |
| For F | Paperwork Redu | iction Act Notice, see the Instruction | for F | orm 990. Cat No | 50053T Schedule J | (Form | 9901 | 2016 |

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

| For each individual whose instructions, on row (ii) | se com Do no | mpensation must be report ot list any individuals that B)(i)-(iii) for each listed ind | rted on Schedule J, report t are not listed on Form 99 | t compensation from the c 990, Part VII | organization on row (i) an | nd from related organizati | cions, described in the | at Individual |
|---|-----------------|--|---|--|-----------------------------------|---------------------------------|------------------------------------|--|
| (A) Name and Title | | (B) Breakdown of W-2 and/or 1099-MISC compensation | | | (C) Retirement and other deferred | (D) Nontaxable benefits | (E) Total of columns (B)(ı)-(D) | (F) Compensation in column(B) reported as |
| | | (i) Base compensation | Danii - 0 | Other reportable compensation | compensation | | | deferred on prior Form 990 |
| James O'Rourke Executive Director | (i) | | 0 | 0 | 14,776 | 0 | 162,534 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| See Addıtıonal Data Table | 7 | | | | <u> </u> | | | |
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| 1 | | 1 | 1 | 1 ' | ! | 1 | | |

Schedule J (Form 990) 2016 Page 3 Part III Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information Return Reference Explanation

Schedule 1 (Form 990) 2016

| Supplemental Information on Tax Exempt Bonds Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI. Attach to Form 990. Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990 . Employer identificat | (h) On ehalf of issuer | ublication (i) | |
|--|---|------------------|---------------|
| The Waterbury Young Men's Christian Association Information about Schedule K (Form 990) and its instructions is at www.irs.qov/form990 . Employer identificat 06-0646988 | tion number (h) On ehalf of issuer | ion er (i) | |
| Name of the organization The Waterbury Young Men's Christian Association 06-0646988 | (h) On ehalf of issuer | (i) | |
| Part I Bond Issues | ehalf of issuer | | |
| | ehalf of issuer | | |
| be | e I Na I | | Pool ncing |
| A CT HEALTH&ED FACILITIES AUTH CHILD CARE REV BONDS 2015 O6-0806186 20774YUS4 04-01-2015 3,808,144 THE 2015 BOND ISSUE WAS AN ADV REFUNDING OF THE 10-23-08 CHEFA BOND ISSUE | X | Yes | No_ |
| Part II Proceeds | | | |
| A B C | | D | |
| 1 Amount of bonds retired | | | |
| 2 Amount of bonds legally defeased | | | |
| 3 Total proceeds of issue | | | |
| 4 Gross proceeds in reserve funds | | | |
| 5 Capitalized interest from proceeds | | | |
| 6 Proceeds in refunding escrows | | | |
| 7 Issuance costs from proceeds | <u> </u> | | |
| | | | |
| | | | |
| | | | |
| 11 Other spent proceeds | | | |
| 13 Year of substantial completion | | | |
| Yes No Yes No Yes No | Yes | | No |
| 14 Were the bonds issued as part of a current refunding issue? X | | | |
| 15 Were the bonds issued as part of an advance refunding issue? | | | |
| 16 Has the final allocation of proceeds been made? | | | |
| 17 Does the organization maintain adequate books and records to support the final allocation of proceeds? | | | |
| Part III Private Business Use | | · | |
| A B C | | D | |
| Yes No Yes No Yes No In the Note of the No | Yes | | No |
| 2 Are there any lease arrangements that may result in private business use of bond-financed property? | | | |

6

Part IV

c

Page 2

D

Schedule K (Form 990) 2016

Nο

Yes

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Yes

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Yes

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No

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Yes

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If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside b counsel to review any management or service contracts relating to the financed property? Are there any research agreements that may result in private business use of bond-financed C Χ d

Enter the percentage of financed property used in a private business use by entities other than

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of . . . If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12

Has the organization established written procedures to ensure that all nonqualified bonds of

a section 501(c)(3) organization or a state or local government Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3)

Penalty in Lieu of Arbitrage Rebate? . . . If "No" to line 1, did the following apply? Rebate not due yet?

Exception to rebate?

hedge with respect to the bond issue?

If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed Is the bond issue a variable rate issue?

Was the hedge superintegrated?

Arbitrage

the issue are remediated in accordance with the requirements under

Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and

Has the organization or the governmental issuer entered into a qualified

Does the bond issue meet the private security or payment test? . . .

Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were

If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?

D

| | I | | • • | I . | - | - | | - | 1 - | |
|---|--|-----------|-----------|-----------|-------------|----------------|---------------|----|-----|----|
| | Г | Yes | 1 | No | Yes | No | Yes | No | Yes | No |
| 5a Were gross proceeds in (GIC)? | nvested in a guaranteed investment contract | | | Х | | | | | | |
| b Name of provider | | | | | | | | | | |
| c Term of GIC | | | | | | | | | | |
| the GIC satisfied? . | fe harbor for establishing the fair market value of | | | | | | | | | |
| | eds invested beyond an available temporary | | | Х | | | | | | |
| 7 Has the organization exequirements of section | stablished written procedures to monitor the n 148? | Х | | | | | | | | |
| Part V Procedures | To Undertake Corrective Action | | | | | | | | | |
| I | | | | A | | В | | С | | D |
| ı | | | Yes | No | Yes | s No | Yes | No | Yes | No |
| federal tax requiremen | stablished written procedures to ensure that violation its are timely identified and corrected through the ement program if self-remediation is not available ur | | х | | | | | | | |
| Part VI Suppleme | ental Information. Provide additional informa | ation for | responses | to questi | ons on Schr | edule K (see ı | nstructions). | | | |
| Return Reference | | Explar | nation | | | | | | | |
| Schedule K, Part VI | THE ORGANIZATION IS A CONDUIT BORROWER I 8038 LINE 18 WAS \$35,708,992 THE ORGANIZA \$3,808,144 | | | | | | JRM . | | | |

В

С

Α

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493132036517 OMB No 1545-0047 Supplemental Information to Form 990 or 990-EZ SCHEDULE O Complete to provide information for responses to specific questions on 2016 (Form 990 or 990-Form 990 or 990-EZ or to provide any additional information. EZ) ➤ Attach to Form 990 or 990-EZ. Open to Public ▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at Department of the Treasury Inspection www.irs.gov/form990. Internal Revenue ferrice | Name of the organization Employer identification number The Waterbury Young Men's Christian Association 06-0646988 990 Schedule O, Supplemental Information Return **Explanation** Reference THE BY-LAWS OF THE WATERBURY YOUNG MEN'S CHRISTIAN ASSOCIATION STATE THAT THE MISSION OF T Form 990. Part I, Line 1 HE WATERBURY YOUNG MEN'S CHRISTIAN ASSOCIATION IS "TO PUT CHRISTIAN PRINCIPLES INTO PRACTI CONTINUED CE THROUGH PROGRAMS THAT DEVELOP HEALTHY SPIRIT, MIND, AND BODY FOR ALL "THE MISSION SUPP MISISON ORTS ITS CHARITABLE WORK AND PROVIDES THE FOUNDATION OF THE PROGRAMS AND SERVICES FOR THE CONSTITUENTS IN THE COMMUNITY THAT PROMOTES YOUTH DEVELOPMENT, HEALTHY LIVING, AND SOCIAL RESPONSIBILITY ESTABLISHED 159 YEARS AGO. THE WATERBURY YMCA HAS BEEN ABLE TO OFFER A SUP PORTIVE NETWORK FOR COMMUNITY MEMBERS AND PROGRAM PARTICIPANTS THROUGHOUT ITS HISTORY. THE WATERBURY YMCA IS A CHARITABLE. COMMUNITY AND SOCIAL SERVICE ORGANIZATION THAT CONSISTS O F MEN, WOMEN AND CHILDREN OF ALL AGES, ABILITIES, INCOMES, ETHNICITY, AND RELIGIONS IT IS DEDICATED TO YOUTH DEVELOPMENT, HEALTHY LIVING, AND SOCIAL RESPONSIBILITY, AND ACCOMPLISH ES THESE GOALS BY OFFERING PROGRAMS THAT ADDRESS THE NEEDS OF THE GREATER WATERBURY COMMUN ITY IN 2016, THE WATERBURY YMCA WAS ABLE TO OFFER FINANCIAL ASSISTANCE TO INDIVIDUALS AND FAMILIES TOTALING MORE THAN \$547,000, THEREBY GRANTING ACCESS TO MEMBER SERVICES AND PROG RAMS THESE FUNDS WERE MADE AVAILABLE AS A DIRECT RESULT OF THE GENEROSITY OF YMCA SUPPORT ERS WHO CONTRIBUTED OVER \$183,000 TO THE YMCA COMMUNITY SUPPORT CAMPAIGN FACILITIES THE FACILITIES CURRENTLY OWNED BY THE WATERBURY YMCA ALLOW US TO DO OUR CHARITABLE WORK AND PR OVIDE PROGRAM SERVICES TO THE COMMUNITY THESE FACILITIES INCLUDES A 60,000 SQUARE FOOT HA NDICAPPED ACCESSIBLE BUILDING IN WATERBURY, CT. AN 80-ACRE OUTDOOR CENTER/CAMP FACILITY IN WATERTOWN, CT, A DAY CAMP PROGRAM ON THE SOUTHBURY TRAINING SCHOOL PROPERTY IN SOUTHBURY, CT AS WELL AS 6 OFF-SITE CHILDCARE PROGRAMS IN THE GREATER WATERBURY AREA

990 Schedule O, Supplemental Information

Return
Reference

Explanation

| Form 990, | THE YMCA HAD 22 POLICYMAKING VOLUNTEERS AND MORE THAN 194 PROGRAM VOLUNTEERS WHO MADE SIGN |
|----------------|--|
| Part I, Line 6 | IFICANT CONTRIBUTIONS OF THEIR TIME IN THE FURTHERANCE OF YMCA ACTIVITIES BY ACTING AS MEN |
| · | TORS, COACHES, PROGRAM LEADERS, INSTRUCTORS AND MORE THESE SERVICES DO NOT MEET THE CRITE |
| | RIA FOR RECOGNITION AS CONTRIBUTIONS, THEREFORE, THEIR VALUE IS NOT REFLECTED IN THIS FORM |
| | 990 |

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

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

| Form 990, Part VI, Line 15a Process to establish compensation of top management official THE EXECUTIVE COMPENSATION COMMITTEE, COMPRISED OF THE CURRENT WATERBURY YMCA BOARD OF DIR ECTORS EXECUTIVE COMPENSATION PLAN THIS IS A BODY OF VOLUNTEERS WITH KNOWLEDGE OF THE KE Y EMPLOYEES' CONTRIBUTIONS TO THE ORGANIZATION WHO HAVE NO PROFESSIONAL ASSOCIATIONS/BUSIN ESS RELATIONSHIP WITH THE PERSONS UNDER REVIEW THE EXECUTIVE COMPENSATION COMMITTEE HAS THE AUTHORITY TO DETERMINE THE TOTAL COMPENSATION PACKAGES OF ITS EXECUTIVES AND COMPLY WITH INTERNAL SANCTIONS ALSO, THIS COMMITTEE COMPLETES THE EXECUTIVE DIRECTOR'S PERFORMANCE REVIEW THE ROLE OF THE EXECUTIVE COMPENSATION COMMITTEE IS TO PROVIDE THE NECESSARY DIRECTOR AND OVERSIGHT OF THE ORGANIZATION'S EXECUTIVE COMPENSATION TO DEVELOP THE TOTAL COMPENSATION AND BENEFITS PACKAGE OF THE EXECUTIVE DIRECTOR AND REVIEW THE RECOMMENDATIONS OF THE EXECUTIVE DIRECTOR REGARDING COMPENSATION FOR THE FINANCE DIRECTOR AND ASSOCIATE EXECUTIVE DIRECTOR SOURCE OF COMPARABLE DATA THE OBJECTIVE IS TO SEEK TOTAL COMPENSATION DAT A OBTAINED FROM AN INDEPENDENT SOURCE, IF POSSIBLE IN OUR CASE THE COMMITTEE CHAIR UTILIZ ED YUSA DATA AND BENCHMARKS AMONG A NUMBER OF OTHER YMCAS REPORT ESTABLISHED BY THE COMPENSATION COMMITTEE DETERMINATION OF COMPENSATIONS IS NOTED IN THE ASSOCIATION'S MINUTES AND D IS AVAILABLE FOR REVIEW BY THE COMMITTEE | Return Reference | Explanation |
|--|--|--|
| | Part VI, Line 15a Process to establish compensation of top management | ECTORS EXECUTIVE COMMITTEE, ALLOWS THE ORGANIZATION TO TAKE A SYSTEMATIC APPROACH TO MANAG ING ITS EXECUTIVE COMPENSATION PLAN THIS IS A BODY OF VOLUNTEERS WITH KNOWLEDGE OF THE KE Y EMPLOYEES' CONTRIBUTIONS TO THE ORGANIZATION WHO HAVE NO PROFESSIONAL ASSOCIATIONS/BUSIN ESS RELATIONSHIP WITH THE PERSONS UNDER REVIEW THE EXECUTIVE COMPENSATION COMMITTEE HAS T HE AUTHORITY TO DETERMINE THE TOTAL COMPENSATION PACKAGES OF ITS EXECUTIVES AND COMPLY WIT H INTERNAL SANCTIONS ALSO, THIS COMMITTEE COMPLETES THE EXECUTIVE DIRECTOR'S PERFORMANCE REVIEW THE ROLE OF THE EXECUTIVE COMPENSATION COMMITTEE IS TO PROVIDE THE NECESSARY DIRECTION AND OVERSIGHT OF THE ORGANIZATION'S EXECUTIVE COMPENSATION TO DEVELOP THE TOTAL COMPENSATION AND BENEFITS PACKAGE OF THE EXECUTIVE DIRECTOR AND REVIEW THE RECOMMENDATIONS OF THE EXECUTIVE DIRECTOR REGARDING COMPENSATION FOR THE FINANCE DIRECTOR AND ASSOCIATE EXECUTIVE DIRECTOR SOURCE OF COMPARABLE DATA THE OBJECTIVE IS TO SEEK TOTAL COMPENSATION DATA OBTAINED FROM AN INDEPENDENT SOURCE, IF POSSIBLE IN OUR CASE THE COMMITTEE CHAIR UTILIZED YUSA DATA AND BENCHMARKS AMONG A NUMBER OF OTHER YMCAS REPORT ESTABLISHED BY THE COMPENSATION COMMITTEE DETERMINATION OF COMPENSATIONS IS NOTED IN THE ASSOCIATION'S MINUTES AN |

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

| Return Reference | Explanation |
|--|--|
| Form 990, Part VI, Line 19 Required documents available to the public | THE ORGANIZATION'S ANNUAL 990 FILING IS AVAILABLE FOR INSPECTION ON THE PUBLICLY AVAILABLE WEBSITE GUIDE STAR THE ORGANIZATION'S ANNUAL 990 FILING AND ANNUAL CERTIFIED AUDIT ARE A VAILABLE FOR PUBLIC INSPECTION AT THE CONNECTICUT PUBLIC CHARITIES UNIT OF THE CONNECTICUT ATTORNEY GENERAL'S OFFICE IN HARTFORD CT THE ORGANIZATION REGISTERS ANNUALLY UNDER THE C T SOLICITATION OF CHARITABLE FUNDS ACT AND SUBMITS THESE DOCUMENTS ANNUALLY AS REQUIRED T HE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, ANNUAL AUDITED FINANCI AL STATEMENTS AND ANNUAL 990 FILING ARE AVAILABLE FOR INSPECTION BY MEMBERS OF THE PUBLIC AT THE ORGANIZATION'S PLACE OF BUSINESS DURING NORMAL BUSINESS HOURS APPOINTMENTS FOR REV IEW OF THESE DOCUMENTS MUST BE MADE WITH THE ORGANIZATION'S FINANCE DIRECTOR IN ADVANCE |

| Return Reference | Explanation |
|---------------------|---|
| | - Total Revenue , Related or Exempt Function Revenue , Unrelated Business Revenue , Rev enue Excluded from Tax Under Sections 512, 513, or 514 , - Total Revenue , Related or Ex empt Function Revenue , Unrelated Business Revenue , Revenue Excluded from Tax Under Sec tions 512, 513, or 514 . |
| Service Revenue | 1013 012, 010, 01 014 , |

Return Explanation
Reference

| • | INSURANCE PROCEEDS - Total Revenue 1880, Related or Exempt Function Revenue 1880, Unrela |
|-----------------|--|
| Part VIII, Line | ted Business Revenue,Revenue Excluded from Tax Under Sections 512, 513, or 514, |
| 11d Other | |
| Miscellaneous | |
| Revenue | |

Return Explanation
Reference

Form 990
Additional Information Related to Program and Community Services the Waterbury Ymca Strives to Serve a Broad Cross Section of its community ensuring Services are accessible and Afforda Ble to the Community at large financial assistance is made available to those who can't a Fford the full fee this is made possible by the support received from the greater waterbury united way, Ymca Community support campaign, and through the generosity of other foundations and donors