NEIGHBORHOOD DEVELOPMENT FUND Not-for-Profit Transmittal and Approval Form

Applicant/Program: YMCA OF GREATER LOUISVILLE Applicant Requested Amount: \$17,250 Appropriation Request Amount: \$250
Executive Summary of Request
YMCA is requesting programming assistance for the annual Together 4 Teens Breakfast that generate funding for free programs for young people and their families in times of need.
Is this program/project a fundraiser? Is this applicant a faith based organization? Does this application include funding for sub-grantee(s)? In this program/project a fundraiser? In the Yes In No In Yes In No In Yes In No
I have reviewed the attached Neighborhood Development Fund Application and have found it complete and within Metro Council guidelines and request approval of funding in the following amount(s). I have read the organization's statement of public purpose to be furthered by the funds requested and I agree that the public purpose is legitimate. I have also completed the disclosure section below, if required. 15
Primary Sponsor Disclosure List below any personal or business relationship you, your family or your legislative assistant have with this organization, its volunteers, its employees or members of its board of directors.
Approved by:
Appropriations Committee Chairman Date
Final Appropriations Amount:
I mai rippropriations rimount.

Applicant/Program: YMCA of Greater Louisville/ Together 4 Teen Breakfast

Additional Disclosure and Signatures

Additional Council Office Disclosure

List below any personal or business relationship you, your family or your legislative assistant have with this organization, its volunteers, its employees or members of its board of directors.

Council Member Signature and Amount

District 1	_ \$
District 2 Barbar Sharllin	\$ 250,00
District 3	\$
District 4 Barbara Garkon Grand	\$ 250-
District 5 Cheri & Hamilton	s # 500 00
District 6 David A James V	\$ \$ 500,0
District 7	\$ 4250
District 8	\$
District 9	\$
District 10 Zachun P. Mularhull	\$ 500,00
District 11	\$
District 12 Rul Ballwell	\$ 500
District 13 Vicki Outrey Welch	\$ 500°0
District 14 Lindi Dulin	\$ 500 -
District 15	\$

^{2 |} Page Effective May 2016

Applicant/Program:

YMCA of Greater Louisville/ Together 4 Teen Breakfast

Additional Disclosure and Signatures

Additional Council Office Disclosure

List below any personal or business relationship you, your family or your legislative assistant have with this organization, its volunteers, its employees or members of its board of directors.

District 16	\$
District 17	\$
District 18	\$
District 19	\$
District 20 Slaud Buson	\$ 500,00
District 21	\$ 500
District 22	\$ 500.00
District 23	\$
District 24	\$
District 25	\$ 1,000.00
District 26	_ \$

3 | Page Effective May 2016

Legal Name of Applicant Organization The Young Men's Christian Assoc. of Greater Louisiville

Program Name and Request Amount	Together 4	4 Teens	Breakfast
3	rogenier.	1 100119	Dieakiasi

	Yes/No/NA
Is the NDF Transmittal Sheet Signed by all Council Member(s) Appropriating Funding?	Yes
Is the funding proposed by Council Member(s) less than or equal to the request amount?	Yes
Is the proposed public purpose of the program viable and well-documented?	Yes
Will all of the funding go to programs specific to Louisville/Jefferson County?	Yes
Has Council or Staff relationship to the Agency been adequately disclosed on the cover sheet?	Yes
Has prior Metro Funds committed/granted been disclosed?	Yes
is the application properly signed and dated by authorized signatory?	Yes
s proof of Tax Exempt status of 501(c) 3, 4, 6, 19, 1120-H included?	Yes
If Metro funding is for a separate taxing district is the funding appropriated for a program outside the egal responsibility of that taxing district?	No
Is the entity in good standing with: Kentucky Secretary of State? Louisville Metro Revenue Commission? Louisville Metro Government? Internal Revenue Service? Louisville Metro Human Relations Commission?	Yes
s the current Fiscal Year Budget included?	Yes
s the entity's board member list (with term length/term limits) included?	Yes
s recommended funding less than 33% of total agency operating budget?	Yes
Does the application budget reflect only the revenue and expenses of the project/program?	Yes
s the cost estimate(s) from proposed vendor (if request is for capital expense) included?	N/A
s the most recent annual audit (if required by organization) included?	N/A
a copy of Signed Lease (if rent costs are requested) included?	N/A
s the Supplemental Questionnaire for churches/religious organizations (if requesting organization is aith-based) included?	Yes
re the Articles of Incorporation of the Agency included?	Yes
the IRS Form W-9 included?	Yes
the IRS Form 990 included?	Yes
re the evaluation forms (if program participants are given evaluation forms) included?	N/A
ffirmative Action/Equal Employment Opportunity plan and/or policy statement included (if equired to do so)?	N/A
as the Agency agreed to participate in the BBB Charity review program? If so, has the applicant et the BBB Charity Review Standards?	N/A
repared by: shughes Date: 2.6.17	

SECTION 1 - APPLICANT INFORMATION					
Legal Name of Applicant Organization:					
(as listed on: http://www.sos.ky.gov/business/records The Young Men's Christian Association of Greater Louisville					
Main Office Street & Mailing Address: 545 South 2nd Street, Louisville, KY 40202					
Website: www.ymca	louisville	org ymcasafeplaceser	vices.org		
Applicant Contact:	Matt R	eed	Title:	Executive Director, Safe Place	
Phone:	(502) 6	35-4403	Email:	mreed@ymcalouisville.org	
Financial Contact:	Kay M	anning	Title:	VP- Finance/ CFO	
Phone:	<u> </u>	87-2384	Email:	kmanning@ymcalouisville.org	
Organization's Repres	entative	who attended NDF Trair	ning: Terri Hathaw	ay	
		L AREA(S) WHERE PROG	RAM ACTIVITIES A	RE (WILL BE) PROVIDED	
Program Facility Location(s): 2400 Crittenden Drive					
Council District(s): 2ip Code(s): 40217					
		ON 2 – PROGRAM REQU		NFORMATION	
	1	gether 4Teens Breakfast			
Total Request: (\$)	17,250		ward (this program	m) in previous year: (\$) \$12,500	
Purpose of Request (cl					
		erally cannot exceed 33%			
		/events for direct benef			
		organization (equipment	, furnishing, buildir	ng, etc)	
The Following are Req					
■ IRS Exempt Status Dete		Letter	Signed lease if r	ent costs are being requested	
Current year projected	_		■ IRS Form W9		
■ Current financial state				s if used in the proposed program	
Most recent IRS Form 9				required by organization)	
■ Articles of Incorporation			Faith Based Org	anization Certification Form, if applicable	
Cost estimates from proposed vendor if request is for capital expense					
Government for this or	any othe	r program or expense, in	cluding funds rece	r received from Louisville Metro ived through Metro Federal Grants, opment Funds). Attach additional	
Source: I	MYDS (2 contracts)	Amount: (\$)	146,679	
	AF Gran		Amount: (\$)	43,700	
Source: (DBG, ES	G grants	Amount: (\$)	77,000	
		BBB Charity Review for p	articipation?		

Page 1 Effective May 2016

SECTION 3 - AGENCY DETAILS

Describe Agency's Vision, Mission and Services:

YMCA Safe Place Services is a branch of the YMCA of Greater Louisville. The mission of the YMCA of Greater Louisville is to put Christian principles into practice through programs that build a healthy spirit, mind and body for all. The mission of Safe Place Services is to accept, affirm and advocate for youth by empowering them to reach their full potential in spirit, mind and body. As a part of the YMCA of Greater Louisville, Safe Place Services is committed to making our community stronger by providing help, hope and healing to teens and families in crisis.

Safe Place Services began in 1974 with the opening of Shelter House to address the growing number of runaway teens, becoming one of the first dedicated youth shelters in the United States. Since our inception, we have remained a unique and visionary branch of the YMCA of Greater Louisville.

Safe Place Services provides free programs for young people and their families in times of need. Through individualized services focused on nurturing and building on the strengths of the youth, Safe Place not only enhances quality of life for young people and their families now, but establishes a framework for ensuring youth become productive and responsible adults later in life. Our programs include:

Shelter House: A 24-hour emergency shelter for teens (ages 12 - 17), providing case management and family mediation for those who stay at Shelter House as well as those needing non-residential services.

Street Outreach and Youth Development Drop-In Center: Street Outreach offers basic provisions, referrals and case management to homeless young adults (ages 18 - 22). Outreach also includes the Matt Kubancik Youth Development Center, a drop-in facility offering basic provisions, respite from the street, bath and laundry facilities, and life skills training for homeless youth, ages 16 to 22. Services assist young adults to gain stability and independence in their personal, education, employment and housing needs.

Y-NOW Mentoring: A 10-month mentoring program for youth, ages 11 to 15, who have one or both parents incarcerated. YNOW pairs youth and adult mentors, and provides a structured, intensive and often life-changing experience annually for a cohort of 30 selected applicants.

Opportunity Program: A series of group-based interventions and individualized case management available for JCPS students, ages 9 - 16, providing juvenile delinquency prevention and alternatives to detention. Interventions include: Field Release; Opportunity Case Management; Status Diversion Case Management; Truancy Court Diversion; and Y-NOW Elementary.

SECTION 4 - BOARD OF DIRECTORS AND PAID STAFF

Board Member	Term End Date
Tricia Burke, Board Chair	Jan 31, 2019
Martin Padgett, Treasurer	Jan 31, 2019
Howard Holloman, Secretary	Jan 31, 2019
Brad Smith, Past Chair	Jan 31, 2019
Harley Butler, Executive Committee member	Jan 31, 2018
Gaylee Gillim, Executive Committee member	Jan 31, 2018
Barbara N. Lankford, Executive Committee member	Jan 31, 2018
Pat Northam, Executive Committee member	Jan 31, 2019
Greg DeMuth	Jan 31, 2018
David Holobaugh	Jan 31, 2018
im Allen, Betty Kinzer, Debbie Wesslund, Jim Williamson, Scott Zoppoth	Jan 31, 2019
Bill Barber, Mary McKinley	Jan 31, 2019
Tray Cockerell, Christopher Ecken, Brian Jones, Tom Kmetz, Alexandria Shemwell	Jan 31, 2020
Iala Ziady	Jan 31, 2020

Describe the Board term limit policy:

Directors shall be elected to serve no more than three consecutive full three-year terms. Directors who have completed three consecutive full three-year terms may be re-elected after a one-year interval. Six At-Large Directors shall be elected by the Association Board of Directors each year. The Officers of the Association Board shall be a Chair, a Vice-Chair/Treasurer, a Recording Secretary, and the Past Association Board Chair, each of whom shall hold office for three years from the date of election or until their successors are elected and qualified. The fulfillment of any three year term as an Officer shall not be contemplated when considering the term limits applicable to Director under these Bylaws. Every fourth year, the Association Board of Directors shall elect from the At-Large Directors a Chair, a Vice-Chair/Treasurer, and a Recording Secretary. The Chair shall annually appoint a Board Development Committee, which shall consist of three members of the Association Board of Directors and three Branch Board Members.

Three Highest Paid Staff Names	Annual Salary
Steve Tarver	263,007
David Heard	183,716
Becky Gamm	156,494

SECTION 5 - PROGRAM/PROJECT NARRATIVE

A: Describe the program/project start and end dates, a description of the program/project and applicable data with regards to specific client population the program will address (attach related flyers, planning minutes, designs, event permits, proposals for services/goods, etc.):

The Together 4Teens Breakfast is YMCA Safe Place Services' signature fundraising event of the year. Each year, the Together 4Teens Breakfast brings together hundreds of new and longtime supporters, shares the impact of our work through video and firsthand testimonials, and raises funds to continue our mission. Now in its 6th year, the Breakfast generates multi-year gifts and new supporters that are critical to our long-term success. The 2017 Together 4Teens Breakfast is scheduled for Tuesday, March 21, 2017.

B: Describe specifically how the funding will be spent including identification of funding to sub grantee(s):

Together 4Teens Breakfast NDF Metro request TOTAL: \$17,250

Catered breakfast for 400 attendees, \$20.50 per attendee \$8,200 4,550 Contract Event & Marketing Coordination, Current 360 4,500

C: If this request is a fundraiser, please detail how the proceeds will be spent: All proceeds raised from the Together 4Teens campaign support the programs conducted by YMCA Safe Place Services: Shelter House; Street Outreach; YNOW Children of Prisoners Mentoring; and our recently launched, Opportunity program. In 2016, the Together 4Teens Breakfast raised \$329,000. Some of the funds raised are multi-year pledges. However, all funds raised support program, facility, and/or operational costs to provide these four direct service programs in 2017 and beyond. D: For Expenditure Reimbursement Only—The grant award period begins with the Metro Council approval date and ends on June 30 of Metro fiscal year in which the grant is approved. If any part of this funding request is for funds to be spent before the grant award period, identify the applicable circumstances: The funding request is a reimbursement of the following expenditures that will probably be incurred after the application date, but prior to the execution of the grant agreement: If selecting this option, the invoice, receipt and payment documentation should not be available as of the date of this application. The Grantee will be required to submit financial reporting in accordance with the reporting schedule provided in the grant agreement. The event is scheduled for Tuesday, March 21, 2017. NDF-associated expenses will be incurred/invoiced around his date. Reimbursements should not be made before application date unless an emergency can be demonstrated by the primary council sponsor. The funding request is a reimbursement of the following expenditures (attach invoices or proof of payment): Attach a copy of invoices and/or receipts to provide proof of payment of the invoices or receipts associated with the work plan identified in this application.	0.16.11	
Opportunity program. In 2016, the Together 4Teens Breakfast raised \$329,000. Some of the funds raised are multi- year pledges. However, all funds raised support program, facility, and/or operational costs to provide these four direct service programs in 2017 and beyond. D: For Expenditure Reimbursement Only — The grant award period begins with the Metro Council approval date and ends on June 30 of Metro fiscal year in which the grant is approved. If any part of this funding request is for funds to be spent before the grant award period, identify the applicable circumstances: The funding request is a reimbursement of the following expenditures that will probably be incurred after the application date, but prior to the execution of the grant agreement: If selecting this option, the invoice, receipt and payment documentation should not be available as of the date of this application. The Grantee will be required to submit financial reporting in accordance with the reporting schedule provided in the grant agreement. The event is scheduled for Tuesday, March 21, 2017. NDF-associated expenses will be incurred/invoiced around tis date. Reimbursements should not be made before application date unless an emergency can be demonstrated by the primary council sponsor. The funding request is a reimbursement of the following expenditures (attach invoices or proof of payment): Attach a copy of invoices and/or receipts to provide proof of payment of the Invoices or proeful with the work plan identified in this application. Attach a copy of invoices and/or receipts to provide proof of payment of the Invoices or proeful with the work plan identified in this application. Attach a copy of invoices and/or receipts to provide proof of payment of the Invoices or proeful and the prooful and the prooful prooful and the prooful pro	C: If this request i	s a fundraiser, please detail how the proceeds will be spent:
and entus on June 30 or Metro fiscal year in which the grant is approved. If any part of this funding request is for funds to be spent before the grant award period, identify the applicable circumstances: The funding request is a reimbursement of the following expenditures that will probably be incurred after the application date, but prior to the execution of the grant agreement: ✓ If selecting this option, the invoice, receipt and payment documentation should not be available as of the date of this application. The Grantee will be required to submit financial reporting in accordance with the reporting schedule provided in the grant agreement. The event is scheduled for Tuesday, March 21, 2017. NDF-associated expenses will be incurred/invoiced around its date. Reimbursements should not be made before application date unless an emergency can be demonstrated by the primary council sponsor. The funding request is a reimbursement of the following expenditures (attach invoices or proof of payment): ✓ Attach a copy of invoices and/or receipts to provide proof of purchase of activities associated with the work plan identified in this application. ✓ Attach a copy of cancelled checks to provide proof of payment of the Invoices or receipts associated with the work plan identified in this application.	Opportunity programyear pledges. Howe	m. In 2016, the Together 4Teens Breakfast raised \$329,000. Some of the funds raised are multi- ver, all funds raised support program, facility, and/or operational costs to provide these forms lived.
and ento on June 30 of Metro fiscal year in which the grant is approved. If any part of this funding request is for funds to be spent before the grant award period, identify the applicable circumstances: ■ The funding request is a reimbursement of the following expenditures that will probably be incurred after the application date, but prior to the execution of the grant agreement: ✓ If selecting this option, the invoice, receipt and payment documentation should not be available as of the date of this application. The Grantee will be required to submit financial reporting in accordance with the reporting schedule provided in the grant agreement. The event is scheduled for Tuesday, March 21, 2017. NDF-associated expenses will be incurred/invoiced around its date. Reimbursements should not be made before application date unless an emergency can be demonstrated by the primary council sponsor. The funding request is a reimbursement of the following expenditures (attach invoices or proof of payment): ✓ Attach a copy of invoices and/or receipts to provide proof of purchase of activities associated with the work plan identified in this application. ✓ Attach a copy of cancelled checks to provide proof of payment of the Invoices or receipts associated with the work plan identified in this application.		
and entus on June 30 or Metro fiscal year in which the grant is approved. If any part of this funding request is for funds to be spent before the grant award period, identify the applicable circumstances: The funding request is a reimbursement of the following expenditures that will probably be incurred after the application date, but prior to the execution of the grant agreement: ✓ If selecting this option, the invoice, receipt and payment documentation should not be available as of the date of this application. The Grantee will be required to submit financial reporting in accordance with the reporting schedule provided in the grant agreement. The event is scheduled for Tuesday, March 21, 2017. NDF-associated expenses will be incurred/invoiced around its date. Reimbursements should not be made before application date unless an emergency can be demonstrated by the primary council sponsor. The funding request is a reimbursement of the following expenditures (attach invoices or proof of payment): ✓ Attach a copy of invoices and/or receipts to provide proof of purchase of activities associated with the work plan identified in this application. ✓ Attach a copy of cancelled checks to provide proof of payment of the Invoices or receipts associated with the work plan identified in this application.		
and ento on June 30 of Metro fiscal year in which the grant is approved. If any part of this funding request is for funds to be spent before the grant award period, identify the applicable circumstances: ■ The funding request is a reimbursement of the following expenditures that will probably be incurred after the application date, but prior to the execution of the grant agreement: ✓ If selecting this option, the invoice, receipt and payment documentation should not be available as of the date of this application. The Grantee will be required to submit financial reporting in accordance with the reporting schedule provided in the grant agreement. The event is scheduled for Tuesday, March 21, 2017. NDF-associated expenses will be incurred/invoiced around its date. Reimbursements should not be made before application date unless an emergency can be demonstrated by the primary council sponsor. The funding request is a reimbursement of the following expenditures (attach invoices or proof of payment): ✓ Attach a copy of invoices and/or receipts to provide proof of purchase of activities associated with the work plan identified in this application. ✓ Attach a copy of cancelled checks to provide proof of payment of the Invoices or receipts associated with the work plan identified in this application.		
and entus on June 30 of Metro fiscal year in which the grant is approved. If any part of this funding request is for funds to be spent before the grant award period, identify the applicable circumstances: The funding request is a reimbursement of the following expenditures that will probably be incurred after the application date, but prior to the execution of the grant agreement: ✓ If selecting this option, the invoice, receipt and payment documentation should not be available as of the date of this application. The Grantee will be required to submit financial reporting in accordance with the reporting schedule provided in the grant agreement. The event is scheduled for Tuesday, March 21, 2017. NDF-associated expenses will be incurred/invoiced around his date. Reimbursements should not be made before application date unless an emergency can be demonstrated by the primary council sponsor. The funding request is a reimbursement of the following expenditures (attach invoices or proof of payment): ✓ Attach a copy of invoices and/or receipts to provide proof of purchase of activities associated with the work plan identified in this application. ✓ Attach a copy of cancelled checks to provide proof of payment of the Invoices or receipts associated with the work plan identified in this application.		
If selecting this option, the invoice, receipt and payment documentation should not be available as of the date of this application. The Grantee will be required to submit financial reporting in accordance with the reporting schedule provided in the grant agreement. The event is scheduled for Tuesday, March 21, 2017. NDF-associated expenses will be incurred/invoiced around his date. Reimbursements should not be made before application date unless an emergency can be demonstrated by the primary council sponsor. The funding request is a reimbursement of the following expenditures (attach invoices or proof of payment): Attach a copy of invoices and/or receipts to provide proof of purchase of activities associated with the work plan identified in this application.	and ends on June 3	U of Metro fiscal year in which the grant is approved. If any part of this funding request is for
The Grantee will be required to submit financial reporting in accordance with the reporting schedule provided in the grant agreement. The event is scheduled for Tuesday, March 21, 2017, NDF-associated expenses will be incurred/invoiced around his date. Reimbursements should not be made before application date unless an emergency can be demonstrated by the primary council sponsor. The funding request is a reimbursement of the following expenditures (attach invoices or proof of payment): Attach a copy of invoices and/or receipts to provide proof of purchase of activities associated with the work plan identified in this application. Attach a copy of cancelled checks to provide proof of payment of the Invoices or receipts associated with the work.	application date	e, but prior to the execution of the grant agreement:
The Grantee will be required to submit financial reporting in accordance with the reporting schedule provided in the grant agreement. The event is scheduled for Tuesday, March 21, 2017. NDF-associated expenses will be incurred/invoiced around his date. Reimbursements should not be made before application date unless an emergency can be demonstrated by the primary council sponsor. The funding request is a reimbursement of the following expenditures (attach invoices or proof of payment): Attach a copy of Invoices and/or receipts to provide proof of purchase of activities associated with the work plan identified in this application. Attach a copy of cancelled checks to provide proof of payment of the Invoices or receipts associated with the work plan.	If selecting the application.	his option, the invoice, receipt and payment documentation should not be available as of the date of this
Reimbursements should not be made before application date unless an emergency can be demonstrated by the primary council sponsor. The funding request is a reimbursement of the following expenditures (attach invoices or proof of payment): ✓ Attach a copy of invoices and/or receipts to provide proof of purchase of activities associated with the work plan identified in this application. ✓ Attach a copy of cancelled checks to provide proof of payment of the invoices or receipts associated with the work.	The Grantee will grant agreement.	be required to submit financial reporting in accordance with the reporting schedule provided in the
invoices or proof of payment): Attach a copy of invoices and/or receipts to provide proof of purchase of activities associated with the work plan identified in this application. Attach a copy of cancelled checks to provide proof of payment of the invoices or receipts associated with the work plan.	The event is sched his date.	fuled for Tuesday, March 21, 2017. NDF-associated expenses will be incurred/invoiced around
Attach a copy of invoices and/or receipts to provide proof of purchase of activities associated with the work plan identified in this application. Attach a copy of cancelled checks to provide proof of payment of the invoices or receipts associated with the work.	by the printary (council sponsor. The funding request is a reimbursement of the following expanditures (ottook
	✓ Attach a copy identified in t ✓ Attach a copy	of invoices and/or receipts to provide proof of purchase of activities associated with the work plan his application.
	✓ Attach a copy	of cancelled checks to provide proof of payment of the Invoices or receipts associated with the control

E: Describe the program's benefits to those being served (measurable outcomes). Include the program's process for collecting data and the indicators that will be tracked to measure the benefits to those being served:

The Together 4Teens Breakfast raises financial support for YMCA Safe Place Services' programs serving runaway, homeless and at-risk youth in crisis. Our programs are driven by three overarching goals:

- 1. Safety: Provide youth access to safety, basic needs and alternatives to street life or other impulsive reactions to crises.
- 2. Youth & Family Strengthening: Engage youth and families in services which reinforce positive social and emotional wellbeing, foster new coping strategies and increase self sufficiency.
- 3. Community Strengthening: Respond to community need through effective service coordination to connect youth to stabilizing forces in their own communities.

Each program collects data that tracks activities, clients served, and program outcomes. Program staff use a variety of intake forms, surveys, and case notes. Program outcomes are reviewed quarterly and annually.

Shelter House outcomes focus on providing immediate safety and long-term family reunification and stability. Street Outreach outcomes focus on providing safety and building positive connections and skills to enable homeless, young adults to achieve educational goals, employment, and housing. Y-NOW outcomes focus on enabling children of prisoners achieve personal goals and academic progress during the program in order to graduate from high school, enter college and avoid incarceration in the longer-term. Opportunity outcomes focus on improved school attendance, grades and behavior in order to prevent juvenile delinquency and detention.

F: Briefly describe any existing collaborative relationships the organization has with other community organizations. Describe what those partners are bringing to the relationship in general and to this program/project specifically.

YMCA Safe Place Services is a prominent and respected stakeholder amongst Louisville's diverse coalition of youth and family-serving organizations who are engaged in a system of care approach to working with young people at risk. We work closely with LMPD, JCPS, LMYDS, KY DJJ and KY CHFS. We also work closely and collaboratively with many community partners through our membership in the Coalition for the Homeless, Louisville Human Trafficking Task Force, the Face It campaign to end child abuse in Kentucky, and the Coalition Supporting Young Adults. We maintain many direct collaborations with agencies including: Salvation Army, University of Kentucky, and Youth Build just to name a few. We receive medical services through Phoenix Hill and financial support for art activities through ArtsReach. We regularly host internships and practicum students from the University of Louisville and other nearby universities. And of course, we collaborate with other branches of the YMCA of Greater Louisville.

SECTION 6 -- PROGRAM/PROJECT BUDGET SUMMARY

THE PROGRAM/PROJECT BUDGET SHOULD REALISTICALLY ESTIMATE WHAT AMOUNT IS NEEDED FROM METRO GOVERNMENT AND WHAT IS EXPECTED FROM OTHER SOURCES.

	Column 1	Column 2	Column (1+2)=3 Total Funds
Program/Project Expenses	Proposed Metro Funds	Non- Metro Funds	
A: Personnel Costs Including Benefits	0	4,000	4,000
B: Rent/Utilities			
C: Office Supplies	0	150	150
D: Telephone			
E: In-town Travel	0	100	100
F: Client Assistance (See Detailed List on Page 8)			100
G: Professional Service Contracts	4,500	4,500	9,000
H: Program Materials			2,000
I: Community Events & Festivals (See Detailed List on Page 8)	12,750	6,700	19,450
J: Machinery & Equipment			,
K: Capital Project			
L: Other Expenses (See Detailed List on Page 8)			
*TOTAL PROGRAM/PROJECT FUNDS	17,250	15,450	32,700
% of Program Budger	53 %	47 %	100%

List funding sources for total program/project costs in Column 2, Non-Metro Funds:

Other State, Federal or Local Government	
United Way	
Private Contributions (do not include individual donor names)	\$15,450
Fees Collected from Program Participants	-
Other (please specify)	
Total Revenue for Columns 2 Expenses **	\$15,450

^{*}Total of Column 1 MUST match "Total Request on Page 1, Section 2"

^{**}Must equal or exceed total in column 2.

Detail for Client Assistance, Community Events & Festivals or Other Expenses shown on Page 7 (circle one and use multiple sheets if necessary)	Column 1	Column 2	Column (1 + 2)=3
(circle one and use multiple sneets if necessary)	Proposed Metro Funds	Non- Metro Funds	Total Funds
Catering	8,200	0	8,200
AV Rental	4,550	0	4,550
Facility Rental	0	500	500
Video Production	0	5,500	5,500
Postage	0	200	200
Printing	0	500	500
Total	12,750	6,700	19,450

Donor*/Type of Contribution	Value of Contribution	Method of Valuation
Volunteers	\$2,645	125 hrs * \$21.16
Melwood Arts Center/ Facility Discount	\$1,000	Advertised rental rate
Total Value of In-Kind (to match Program Budget Line Item.	\$3,645	
Volunteer Contribution & Other In Kind) NOR INFORMATION REFERS TO WHO MADE TO INDIVIDUALLY, BUT GROUPED TOGETHER CONTRIBUTION.	THE IN KIND CONTRIBUTION. YOU ONE LINE AS A TOTAL NOTE	VOLUNTEERS NEED NOT B
NOR INFORMATION REFERS TO WHO MADE TO INDIVIDUALLY, BUT GROUPED TOGETHER OF PER WEEK BY Fiscal Year Start Date: January 1	ON ONE LINE AS A TOTAL NOT	NG HOW MANY HOURS P
NOR INFORMATION REFERS TO WHO MADE TO INDIVIDUALLY, BUT GROUPED TOGETHER CON PER WEEK BY Fiscal Year Start Date: January 1 Your Agency anticipate a significant increase to projected for next fiscal year? NO	ON ONE LINE AS A TOTAL NOT	NG HOW MANY HOURS P
NOR INFORMATION REFERS TO WHO MADE TO INDIVIDUALLY, BUT GROUPED TOGETHER CON PER WEEK By Fiscal Year Start Date: January 1 Your Agency anticipate a significant increase	ON ONE LINE AS A TOTAL NOT	NG HOW MANY HOURS P
NOR INFORMATION REFERS TO WHO MADE TO INDIVIDUALLY, BUT GROUPED TOGETHER CON PER WEEK BY Fiscal Year Start Date: January 1 Your Agency anticipate a significant increase to projected for next fiscal year? NO	ON ONE LINE AS A TOTAL NOT	NG HOW MANY HOURS P

SECTION 7 - CERTIFICATIONS & ASSURANCES

By signing Section 7 of the Grant Application, the authorized official signing for the applicant organization certifies and assures to the best of his or her knowledge and/or belief the following Assurances and Certifications, if there is any reason why one or more of the assurances or certifications listed cannot be certified or assured, please explain in writing and attach to this application.

Standard Assurances

- Applicant understands this application and its attachments as well as any resulting grant agreement, reports and proof of expenditure is subject to Kentucky's open records law.
- Applicant understands if the grant agreement is not returned to Louisville Metro within 90 days of its mailing to the applicant, the approval is automatically revoked and the funds will not be disbursed to our organization.
- Applicant and any sub grantee will give Louisville Metro Government access to and the right to examine all paper or electronic records related to the awarded grant for up to five years of the grant agreement date.
- 4. Applicant assures compliance with the grant requirements and will monitor the performance of any third party (sub-grantee).
- The Agency is in good standing with the Kentucky Secretary of State, Louisville Metro Government, the Jefferson County Revenue Commission, the Internal Revenue Service, and the Louisville Metro Human Relations Commission.
- Applicant understands failure to provide the services, programs, or projects included in the agreement will result in funds being 6. withheld or requested to be returned if previously disbursed.
- 7. Applicant understands they must return to Louisville Metro any unexpended funds by July 31 following the Metro Louisville's fiscal
- Applicant understands they must provide proof of all expenditures (canceled checks, receipts, paid invoices). The Applicant understands the failure to provide proof of expenditures as required in the grant agreement could result in funding being withheld or request to be returned if previously disbursed.
- Applicant understands if this application is approved, the grant agreement will identify an award period that begins with the Metro Council approval date, and will end with June 30 of the fiscal year in which the grant is approved. Expenditures associated with this award expected to occur prior to the award period (approval date) must be disclosed in this application in order to be considered compliant with the grant agreement.
- 10. Applicant understands if we choose to incur expenditures prior to the approval of the application by the Metro Council, there is no guarantee that funding will be reimbursed, as the Council may choose not to award the application.
- 11. Applicant will establish safeguards to prohibit employees or any person that receives compensation from awarded funds from using their position for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal

Standard Certifications

- The Agency certifies it will not use Louisville Metro Government funds for any religious, political or fratemal Activities.
- The Agency has a written Affirmative Action/Equal Opportunity Policy.
- 3. The Agency does not discriminate in employment or in provision of any service/program/activity/event based on age, color, disabled status, national origin, race, religion, sex, gender identity or sexual orientation, or Vietnam era veteran status.
- The Agency certifies it will not require clients, recipients, or beneficiaries to participate in religious, political, fraternal or like activities in order to receive services/benefits provided with Louisville Metro Government funds.
- The Agency understands the Americans with Disabilities Act (ADA) and makes reasonable accommodations.

Relationship Disclosure: List below any relationship you or any member of your Board of Directors or employees has with any Councilperson, Councilperson's family, Councilperson's staff or any Louisville Metro Government employee.

SECTION 8 - CERTIFICATIONS & ASSURANCES

I certify under the penalty of law the information in this application (including, without limitation, "Certifications and Assurances") is accurate to the best of my knowledge. I am aware my organization will not be eligible for funding if investigation at any time shows falsification. If falsification is shown after funding has been approved, any allocations already received and expended are subject to be repaid. I further certify that I am legally authorized to sign this application for the applying organization and have initialed each page of the

Signature of Legal Signatory: Date: Jan 26, 2017 Legal Signatory: (please print): Matt Reed Title: Exec. Director (YSPS) Phone: (502) 635-4403 Extension: Email: mreed@ymcalouisville.org

Page 10 Effective May 2016

Applicant's Initials M

THE YOUNG MENS CHRISTIAN ASSOCIATION OF GREATER LOUISVILLE

General Information

Organization Number

0056860

Name

THE YOUNG MENS CHRISTIAN ASSOCIATION OF GREATER

LOUISVILLE

Profit or Non-Profit

N - Non-profit

Company Type

KCO - Kentucky Corporation

Status

A - Active

Standing

G - Good

State

KY

File Date

4/3/1878

Organization Date

4/3/1878

Last Annual Report

3/16/2016

Principal Office

545 SOUTH SECOND ST

LOUISVILLE, KY 40202

Registered Agent

R. STEPHEN TARVER 545 SOUTH SECOND ST.

LOUISVILLE, KY 40202

Current Officers

Chairman

G. BRADLEY SMITH

President

R STEPHEN TARVER

Vice President

S KAY MANNING

Vice President **Vice President**

DAVID HEARD BECKY GAMM

Director

IAMES R ALLEN

G. BRADLEY SMITH

Director

Director

TRICIA BURKE

Director

COURTNEY GIESEL

Director

HOWARD L HOLLOMAN, IR

Director

HARLEY BUTLER

Director

GAYLEE GILLIM

Individuals / Entities listed at time of formation

Director

PAUL ALSTEDT

Director

WM KENDRICK EWING

Director Director

LEO K BROECKER

LCALVIN HIEB

Director

DAVE LAWRENCE

Incorporator

HELM BRUCE

Incorporator

EMMET O'NEAL

Incorporator

HISCHEIRICH

Incorporator Incorporator

DAVID A KELLER IAMES D JACOBS

Images available online

Documents filed with the Office of the Secretary of State on September 15, 2004 or thereafter are available as scanned images or PDF documents. Documents filed prior to September 15, 2004 will become available as the images are created.

₫.					-0
	Certificate of Assumed Name	6/7/2016	1 page	<u>tiff</u>	PDF
	Annual Report	3/16/2016	1 page	PDF	<u> </u>
	Articles of Merger	12/28/2015	3 pages	ţiff	PDF
	Annual Report	4/3/2015	1 page	PDF	<u>, 57</u>
	<u>Amendment</u>	11/18/2014	1 page	tiff	<u>PDF</u>
	Annual Report	1/23/2014	1 page	PDF	<u> </u>
	Annual Report	2/7/2013	1 page	PDF	
	Annual Report	2/13/2012	1 page	PDF	
	Annual Report	3/4/2011	1 page	PDF	
	Name Renewal	11/3/2010	1 page	tiff	<u>PDF</u>
	Name Renewal	11/3/2010	1 page	tiff	PDF
	Name Renewal	11/3/2010	1 page	tiff	PDF
	Annual Report	3/29/2010	1 page	PDF	<u></u>
	Annual Report	5/6/2009	1 page	PDF	
	Annual Report	1/21/2008	1 page	PDF	
	Annual Report	1/8/2007	1 page	PDF	80
	Annual Report	3/14/2006	1 page	tiff	PDF
	Name Renewal	11/2/2005	1 page	<u>tiff</u>	PDF
	Name Renewal	11/2/2005	1 page	tiff	PDF
	Name Renewal	11/2/2005	1 page	<u>tiff</u>	PDF
	Annual Report	2/28/2005	1 page	PDF	<u></u>
	<u>Annual Report</u>	4/29/2003	1 page	tiff	<u>PDF</u>
	<u>Annual Report</u>	4/11/2002	1 page	tiff	PDF
	<u>Annual Report</u>	4/17/2001	1 page	tiff	PDF
	Certificate of Assumed Name	4/9/2001	1 page	tiff	PDF
	Certificate of Assumed Name	4/9/2001	1 page	tiff	PDF
	<u>Certificate of Assumed Name</u>	4/9/2001	1 page	tiff	<u>PD</u> F
	Statement of Change	7/14/2000	1 page	tiff	PDF
	Annual Report	5/17/2000	6 pages	<u>tiff</u>	<u>PDF</u>
	Annual Report	6/3/1999	5 pages	tiff	<u>PDF</u>
	<u>Annual Report</u>	4/22/1998	6 pages	<u>tiff</u>	<u>PDF</u>
	Annual Report	7/1/1997	5 pages	<u>tiff</u>	<u>PDF</u>
	Annual Report	7/1/1996	5 pages	<u>tiff</u>	<u>PDF</u>
	Annual Report	7/1/1995	5 pages	<u>tiff</u>	<u>PDF</u>
		4/7/1994	1 page	<u>tiff</u>	<u>PDF</u>
		3/23/1993	1 page	<u>tiff</u>	<u>PDF</u>
		3/18/1992	1 page	<u>tiff</u>	<u>PDF</u>
		7/1/1991	1 page	<u>tiff</u>	<u>PDF</u>
		7/1/1990	3 pages	tiff	<u>PDF</u>
		7/1/1989	1 page	<u>tiff</u>	<u>PDF</u>
1	Annual Report	3/21/1983	1 page	<u>tiff</u>	<u>PDF</u>

<u>Amendment</u>	12/27/1966	4 pages	<u>tiff</u>	<u>PDF</u>
Amendment	12/30/1950	4 pages	<u>tiff</u>	PDF
Statement of Change	7/1/1946	2 pages	<u>tiff</u>	PDF
Statement of Change	10/28/1941	2 pages	tiff	PDF
<u>Amendment</u>	2/12/1913	2 pages	<u>tiff</u>	PDF
<u>Amendment</u>	2/10/1880	2 pages	tiff	PDF
Articles of Incorporation	4/3/1878	3 pages	<u>tiff</u>	PDF

Assumed Names

THE YMCA OF GREATER LOUISVILLE
CAMP PIOMINGO
YMCA CAMP PIOMINGO
THE YMCA OF GREATER LOUISVILLE

Active Inactive Inactive

Activity History

Activity mistory			
Filing	File Date	Effective Date	Org. Referenced
Added assumed name	6/7/2016 12:37:30 PM	6/7/2016	THE YMCA OF GREATER LOUISVILLE
Annual report	3/16/2016 7:08:09 PM	3/16/2016 7:08:09 PM	
Survivor	12/28/2015	1/1/2016	(NQ) YMCA OF SOUTHERN INDIANA, INC.
Annual report	4/3/2015 1:17:48 PM	4/3/2015 1:17:48 PM	
Amendment - Miscellaneous amendments	11/18/2014 3:16:52 PM	11/18/2014	
Annual report	1/23/2014 4:38:12 PM	1/23/2014 4:38:12 PM	
Annual report	2/7/2013 2:15:46 PM	2/7/2013 2:15:46 PM	
Annual report	2/13/2012 1:34:34 PM	2/13/2012 1:34:34 PM	
Annual report	3/4/2011 2:52:53 PM	3/4/2011 2:52:53 PM	
Annual report	3/29/2010 3:46:54 PM	3/29/2010 3:46:54 PM	
Annual report	5/6/2009 8:28:33 AM	5/6/2009 8:28:33 AM	
Annual report	1/21/2008 11:19:05 AM	1/21/2008 11:19:05 AM	
	1/8/2007 8:16:15 PM	1/8/2007 8:16:15 PM	
Annual report	3/14/2006 3:03:17 PM	3/14/2006	
Annual report	2/28/2005	2/28/2005	
	4/9/2001 2:27:47 PM	4/9/2001	CAMP PIOMINGO
	4/9/2001 2:26:43 PM	4/9/2001	THE YMCA OF GREATER

Added assumed name	4/9/2001 2:25:35 PM	4/9/2001	YMCA CAMP PIOMINGO
Registered agent address change	7/14/2000 9:40:01 AM	7/14/2000	
Principal office change	4/24/2000 2:17:41 PM	4/24/2000	
Amendment previous name	12/27/1966	12/27/1966	THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF LOUISVILLE AND JEFFERSON COUNTY, KENTUCKY

Microfilmed Images

Microfilm images are not available online. They can be ordered by faxing a Request For Corporate Documents to the Corporate Records Branch at 502-564-5687.

	007 0001	
Annual Report	6/21/2004	1 page
Annual Report	4/29/2003	1 page
Annual Report	4/11/2002	1 page
Annual Report	4/17/2001	1 page
Statement of Change	7/14/2000	1 page
Annual Report	5/17/2000	6 pages
Annual Report	6/3/1999	5 pages
Annual Report	4/22/1998	6 pages
Annual Report	7/1/1997	5 pages
Annual Report	7/1/1996	5 pages
Annual Report	7/1/1995	5 pages
Annual Report	4/7/1994	1 page
Annual Report	3/23/1993	1 page
Annual Report	3/18/1992	1 page
Annual Report	7/1/1991	1 page
Annual Report	7/1/1990	3 pages
Annual Report	7/1/1989	1 page
Statement of Change	5/30/1986	2 pages
Statement of Change	6/3/1976	2 pages
Amendment	12/27/1966	4 pages
Amendment	12/30/1950	4 pages
Statement of Change	7/1/1946	2 pages
Annual Report	11/3/1941	40 pages
Statement of Change	10/28/1941	2 pages
Amendment	2/12/1913	2 pages
Amendment	2/10/1880	2 pages
Articles of Incorporation	4/3/1878	3 pages

THE YMCA OF GREATER LOUISVILLE

General Information

Organization Number 0056860

Name THE YMCA OF GREATER LOUISVILLE

Company Type ASC - Assumed Name Corporation

Status A - Active

State KY

 File Date
 6/7/2016

 Expiration Date
 6/7/2021

 Renewal Date
 12/7/2020

Principal Office 545 SOUTH SECOND STREET

LOUISVILLE, KY 40202

Current Officers

Individuals / Entities listed at time of formation

Director PAUL ALSTEDT

Director WM KENDRICK EWING

DirectorLEO K BROECKERDirectorI CALVIN HIEBDirectorDAVE LAWRENCE

IncorporatorHELM BRUCEIncorporatorEMMET O'NEALIncorporatorH I SCHEIRICHIncorporatorDAVID A KELLERIncorporatorIAMES D IACOBS

Images available online

Documents filed with the Office of the Secretary of State on September 15, 2004 or thereafter are available as scanned images or PDF documents. Documents filed prior to September 15, 2004 will become available as the images are created.

Certificate of Assumed Name	6/7/2016	1 page	tiff	PDF
Annual Report	3/16/2016	1 page	PDF	<u></u>
Articles of Merger	12/28/2015	3 pages	tiff	<u>PDF</u>
Annual Report	4/3/2015	1 page	<u>PDF</u>	_
<u>Amendment</u>	11/18/2014	1 page	tiff	<u>PDF</u>
Annual Report	1/23/2014	1 page	<u>PDF</u>	
Annual Report	2/7/2013	1 page	PDF	
Annual Report	2/13/2012	1 page	<u>PDF</u>	
Annual Report	3/4/2011	1 page	<u>PDF</u>	
Name Renewal	11/3/2010	1 page	tiff	<u>PDF</u>
Name Renewal	11/3/2010	1 page	<u>tiff</u>	<u>PDF</u>
Name Renewal	11/3/2010	1 page	<u>tiff</u>	PDF

Annual Report	3/29/2010	1 page	<u>PDF</u>	
Annual Report	5/6/2009	1 page	PDF	
Annual Report	1/21/2008	1 page	PDF	
Annual Report	1/8/2007	1 page	PDF	
Annual Report	3/14/2006	1 page	tiff	<u>PDF</u>
Name Renewal	11/2/2005	1 page	tiff	PDF
Name Renewal	11/2/2005	1 page	tiff	PDF
Name Renewal	11/2/2005	1 page	tiff	PDF
Annual Report	2/28/2005	1 page	PDF	
Annual Report	4/29/2003	1 page	tiff	<u>PDF</u>
Annual Report	4/11/2002	1 page	tiff	PDF
Annual Report	4/17/2001	1 page	tiff	PDF
Certificate of Assumed Name	4/9/2001	1 page	tiff	PDF
Certificate of Assumed Name	4/9/2001	1 page	tiff	PDF
Certificate of Assumed Name	4/9/2001	1 page	tiff	PDF
Statement of Change	7/14/2000	1 page	<u>tiff</u>	PDF
Annual Report	5/17/2000	6 pages	<u>tiff</u>	PDF
Annual Report	6/3/1999	5 pages	tiff	PDF
Annual Report	4/22/1998	6 pages	tiff	PDF
Annual Report	7/1/1997	5 pages	tiff	PDF
Annual Report	7/1/1996	5 pages	tiff	PDF
Annual Report	7/1/1995	5 pages	tiff	PDF
Annual Report	4/7/1994	1 page	tiff	PDF
Annual Report	3/23/1993	1 page	<u>tiff</u>	PDF
Annual Report	3/18/1992	1 page	tiff	PDF
Annual Report	7/1/1991	1 page	<u>tiff</u>	PDF
Annual Report	7/1/1990	3 pages	tiff	PDF
Annual Report	7/1/1989	1 page	tiff	PDF
Annual Report	3/21/1983	1 page	tiff	PDF
<u>Amendment</u>	12/27/1966	4 pages	<u>tiff</u>	PDF
<u>Amendment</u>	12/30/1950	4 pages	tiff	PDF
Statement of Change	7/1/1946	2 pages	tiff	PDF
Statement of Change	10/28/1941	2 pages	tiff	PDF
<u>Amendment</u>	2/12/1913	2 pages	tiff	PDF
<u>Amendment</u>	2/10/1880	2 pages	tiff	PDF
Articles of Incorporation	4/3/1878	3 pages	tiff	PDF

Assumed Name of

THE YOUNG MENS CHRISTIAN ASSOCIATION OF GREATER LOUISVILLE Active
THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF LOUISVILLE AND
JEFFERSON COUNTY, KENTUCKY
Inactive

THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF LOUISVILLE,

KENTUCKY

Activity History

Filing File Date Effective Date Org. Referenced Added assumed name 6/7/2016 6/7/2016 THE YOUNG MEI

12:37:30 PM

THE YOUNG MENS CHRISTIAN ASSOCIATION OF GREATER

Inactive

LOUISVILLE

Add

6/7/2016 12:37:30 PM

6/7/2016

THE YOUNG MENS CHRISTIAN ASSOCIATION OF GREATER LOUISVILLE

Microfilmed Images

Internal Revenue Service

Date: August 19, 2004

Young Men's Christian Association of Greater Louisville 545 S. 2nd St. Louisville, KY 40202

Department of the Treasury P. O. Box 2508 Cincinnati, OH 45201

Person to Contact:

John Kennedy ID 31-07927 Customer Service Representative

Toll Free Telephone Number: 8:00 a.m. to 6:30 p.m. EST

877-829-5500

Fax Number:

513-263-3756

Federal Identification Number:

Dear Sir or Madam:

This is in response to your request of August 19, 2004, regarding your organization's taxexempt status.

In January 1945 we issued a determination letter that recognized your organization as exempt from federal income tax. Our records indicate that your organization is currently exempt under section 501(c)(3) of the Internal Revenue Code.

Our records indicate that your organization is also classified as a public charity under section 509(a)(2) of the Internal Revenue Code.

Our records indicate that contributions to your organization are deductible under section 170 of the Code, and that you are qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Internal Revenue Code.

If you have any questions, please call us at the telephone number shown in the heading of this letter.

Sincerely,

Janna K. Skufen

Janna K. Skufca, Director, TE/GE Customer Account Services

2017 09	YMCA of Greater Louisville	Budget
2110	SAFE PLACE SERVICES	Expenses
	PROFESSIONAL SALARIES	758,353
2120	PROGRAM SALARIES	129,857
2160	MAINTENANCE SALARIES	30,766
2165	HOUSEKEEPING SALARIES	6,689
2179	COOK SALARIES	11,676
2190	OTHER SALARIES	256,069
2210	GROUP HEALTH INSURANCE	110,840
2220	RETIREMENT FUND	69,761
2230	GROUP LIFE INSURANCE	971
2310	SOCIAL SECURITY	91,296
2320	UNEMPLOYMENT INSURANCE	9,547
2330	WORKER COMP INSURANCE	15,515
2440	CONTRACT SERVICES	10,900
2480	COMPUTER SERVICES	2,500
2510	OFFICE SUPPLIES	7,300
2520	MAINTENANCE SUPPLIES	3,000
2521	HOUSEKEEPING SUPPLIES	8,500
2530	MEDICAL SUPPLIES	1,450
2540	PROGRAM SUPPLIES	22,200
3210	TRAVEL & LOCAL EXPENSE	6,700
3250	VEHICLE OPERATION	6,000
3540	NETWORK DUES	2,700
2541	CLASS SUPPLIES	1,000
2550	FOOD SUPPLIES	30,810
2555	TOGETHER 4 TEENS SUPPLY	14,000
2580	SUBSCRIPTIONS	2,300
2600	TELEPHONE	7,078
2610	TELEPHONE EQUIPM'T/MTNE	200
2620	TELEPHONE/CELL	7,920
2700	POSTAGE	4,600
2830	LICENSE & PERMITS	4,525
2831	ELECTRIC	24,054
2832	GAS	3,676
3810	INSURANCE PREMIUMS	16,700
3820	AUTO INSURANCE PREMIUM	3,100
2836	WATER/SEWER	4,737
2840	BLDG & GROUNDS MAINTEN.	12,000
2843	BLDG & GROUNDS REPAIRS	16,000
850	SNOW REMOVAL	2,500
940	EQUIP MAINT/CONTRACTS	3,996
120	PROMOTION	9,800
150	ANN'L SUPPORT PROMO MAT	1,000
314	STAFF RECOGNITION	2,750
315	STAFF TRAINING	18,500
317	COMMITTEE EXP	3,500
318	VOLUNTEER TRAINING	1,000
110	PRINTING	1,000 8,000
431	LEGAL FEES	8,000 500
510	FAIR SHARE Y-USA	
801	MGMT SERV FEE-FROM ASO	14,368
803	INTRA BRANCH ALLOC-OTHE	102,000
805	INTRA ASSN LOAN PAYMENT	(16,824)
-	Expense	(36,000)
	wrys arts a	1,830,379
898	ALLOC'TD DEBT SERV(P&I)	123,941
398	OPERATING RESERVE	42,603
		•
	MAINTENANCE RESERVE	46,170

2017	YMCA of Greater Louisville	Budget
09	SAFE PLACE SERVICES	Revenue
0110	CONTRIBUTIONS	324,000
0130	ANNUAL GIVING	238,000
0131	DESIGNATED ANN'L GIVING	59,000
0132	TOGETHER 4 TEENS MULTI	210,000
0310	SPECIAL EVENTS-INCOME	114,000
0320	SPECIAL EVENTS-EXPENSE	(10,000)
0810	METRO UNITED WAY	258,812
1012	PURCH. OF SERVICE-STATE	77,000
1050	GOV'T GRANTS-FEDERAL	300,000
1055	GOV'T GRANTS-CITY	239,480
1510	INTEREST INCOME	2,000
1809	SPECIAL ENDOWMT ALLOCATION	40,000
	YMCA GENERAL SUPPORT	190,801
R	Revenue	1,852,292

A	В	
		C
	YMCA of Greater Louisville	2017
1	As of Year-End	Budget
2 1	Current Unrestricted	-200001
	CONTRIBUTIONS	613,67
	D ANNUAL GIVING	1,509,750
	1 Designated ann'l giving	315,616
	2 TOGETHER 4 TEENS MULTI	210,000
) SPECIAL EVENTS-INCOME	225,200
	I SPEC'L EVENT-CHAR AWARD	15,000
	3 SPEC'L EVENT-IRON MAN	2,000
10 0315	SPEC EVENTS-RUNNERS EXPO	5,100
11 0320	SPECIAL EVENTS-EXPENSE	-87,000
12 0321	SPEC EVT-CHAR AWARD EXP	-20,750
13 0323	SPEC'L EVENT-IRON MAN	-1,100
	METRO UNITED WAY	590,961
<u>15</u> 0811	UNITED WAY-SPECIAL ALLOCATION	15,000
<u>16</u> 0820	UNITED WAY-COM.FED.CAM.	5,000
<u>17</u> 1010	PURCH.OF SERVICE-COUNTY	276,096
18 1011	PURCH. OF SERVICE-FED.	1,428,659
19 1012	PURCH. OF SERVICE-STATE	77,000
20 1013	PURCH. OF SERVICE-CITY	31,000
<u>21</u> 1014	FOOD CREDITS-STATE INC.	204,363
	Y-USA GRANTS	105,500
	GOV'T GRANTS-FEDERAL	430,472
	GOV'T GRANT-STATE	83,302
	GOV'T GRANTS-CITY	359,829
	GOV'T GRANTS-COUNTY	65,000
	GOV'T GRANT-VET.ADMIN.	62,062
28 1062	GRANT-CRUSADE FOR CHILDREN	19,000
<u>29</u> 1064	FOUNDATION GRANTS	168,000
	JOINER FEES	276,894
	REGULAR 1 MEMBERSHIP	2,572,059
32 1103		15,127
33 1108	SILVER SNEAKERS JOIN FEE	30,465
	EXPIRED MBSHP CREDITS	1,983
	ADULT MEMBERSHIP	1,158,030
36 1111	COMMUNITY WIDE ADULT MEMBERSHIP	1,746,958
	CORPORATE MEMBERSHIP	229,094
	SILVER SNEAKERS	272,774
	YOUTH MEMBERSHIP	43.673
40 1121	COMMUNITY WIDE YOUTH MEMBERSHIP	84,881
<u>41 </u> 1130 '	YOUNG ADULT MEMBERSHIP	118.893
12 1131 (COMMUNITY WIDE YOUNG ADULT MBSH	P 121,417
	FAMILY OF 2 MEMBERSHIP	1.167.771
<u>14 1141 (</u>	COMMUNITY WIDE FAMILY OF 2 MBSHP	1,764,293

	A	C
	YMCA of Greater Louisville	2017
1	As of Year-End	
45	1146 LOCKER RENTAL	Budget
	1150 FAMILY MBSHP	42,099
	1151 COMMUNITY WIDE FAMILY MBSHP	2,602,152
	1152 EMPLOYEE MBSHP UPGRADE FEE	8,076,290
	1160 GROUP MEMBERSHIP	84,503
	1170 SENIOR MEMBERSHIP	121,309
	1171 COMMUNITY WIDE SENIOR MBSHP	433,003
	1180 DAILY FEES	539,837
	1199 JOIN FEE CALYPSO COVE	88,289
	1303 TRANSPORTATION FEE	125,022
	1304 PARENT/CHILD EVENT	108,740
	1305 SPRING/FALL BREAK FEES	1,450
	1308 TURKEY DAY	210,020
	1309 EXPIRED PROGRAM CREDITS	70,026
	1310 ADULT PROGRAM FEE	6,856
	1311 ADULT CLASSES	182,509
	1313 ADULT TEAM SPORTS	51,296
	1314 PERSONAL TRAINING	25,810
	1315 GROUP TRAINING	3,100
	1316 LEAGUES - FLAG FOOTBALL	42,360
	1317 PRIVATE SWIM LESSONS	31,283
_	1318 YOUTH PRIVATE LESSONS	89,065
	1320 PROGRAM FEES	480
	321 YOUTH CLASSES	182,839
	322 CPR & FIRST AID CLASS	27,982
	323 T - BALL	13,607
	325 RACE	91,936
	326 KARATE	2,545
	328 ADULT PROGRAM FEE	2,250
	329 FITNESS	3,800
_		67,720
$\overline{}$	330 YOUTH PROGRAM FEES	456,602
	331 COMMUNITY PROGRAM	28,418
	332 PRESCHOOL SWIM LESSONS	235,808
	333 YOUTH TEAM SPORTS	124,531
	334 ADULT SWIM LESSONS	31,040
_	335 SWIM TEAM	64,465
02 1	337 PROGRESSIVE SWIM LESSONS	265,525
	338 SUMMER FEES	2,111,270
	339 AFTER SCHOOL	10,072,804
	340 POOL &/OR FACILITIES USAGE	197,595
	345 CORPORATE RELATIONS FEE	1,000
	347 PARENT/CHILD SWIM LESSONS	67,023
0/ [13	348 POOL DAILY FEES	17,960

Α	В	C
	YMCA of Greater Louisville	2017
1	As of Year-End	Budget
	LEAGUES - BASKETBALL	58,313
	RESID'T CAMP-OFF SEASON	116,755
	2 RESIDENT CAMP	479,900
	B HORSEBACK RIDING	117,872
	CAMP CRAFTERS	137,290
	TRAILBLAZERS	11,300
	B FITNESS TESTING	3,180
	DAY CAMP FEES	923,577
	ABC CAMP FEES	252,566
	SOCCER - YOUTH	539,019
	BASKETBALL - YOUTH	241,012
	POOL SEASON PASS	2,750
	PERMANENT RESIDENCE	6,000
	WINTER BREAK FEES	206,220
	REGISTRATION FEES	306,927
	Y WEIGHT LOSS	8,365
	LIFEGUARD CLASS	34,289
	PRESCH'L CHILD CARE FEE	1,389,740
	TRIPS & TOURS	15,520
	CIT PROGRAM FEES	25,446
	RETURNED DRAFTS	-300
	RETURNED CHECKS	26,832
110 1392		-592,709
	SERVICE FEE-RETURN	9,900
	COMMISSIONS (NON TXBLE)	6,830
	JUICE & WATER SALES-TAX	4,370
	MERCHANDISE SALES-TAXBL	26,591
	FOUNT.DRINK SALES-TAXBL	22,017
	PARKING NET FROM RIVERSIDE	85,000
	Y @ WORK NET FROM NORTON	159,974
	NON MBR PARKING & JCPS	117,000
	INTEREST INCOME INVESTMENT INCOME	42,386
	MISCELLANEOUS INCOME	202,687
	RENTAL INCOME	2,400
	MANAGEMENT SERVICE FEE	59,150
	SPECIAL ENDOWMT ALLOCATION	5,617,000
124 1809		-132,686
126	Revenue	53,847,750
	PROFESSIONAL SALARIES	7 500 147
	PROGRAM SALARIES	7,596,117
	LIFEGUARD SALARIES	1,026,571
	CHILD CARE SALARIES	874,763
.30/2122	OTHER OUNT SUPPLIES	5,222,730

	Α	В	С
			Jv
1 1		YMCA of Greater Louisville	2017
1		As of Year-End	Budget
		SPECIALIST SALARIES	181,727
		ATTENDANT SALARY	36,019
		SWIM INSTRUCTOR SALARY	250,796
		YOUTH PROGRAM SALARIES	182,676
		ADULT PROGRAM SALARIES	1,070,394
		FITNESS SALARIES	518,583
_		INSTRUCTOR SALARY	23,282
		DAY CAMP SALARIES	396,907
_		Y WEIGHT LOSS SALARIES	10,173
		KIDS CLUB SALARIES	1,016,079
		RESIDENT CAMP SALARIES	92,078
		HORSEBACK SALARIES	16,420
		CLERICAL SALARIES	2,512,880
		MAINTENANCE SALARIES	196,924
		HOUSEKEEPING SALARIES	308,844
_		COOK SALARIES	133,701
		OTHER SALARIES	756,021
		HEALTH INCENTIVE SALARY	4,576
		GROUP HEALTH INSURANCE	1,383,068
		RETIREMENT FUND	1,456,878
		GROUP LIFE INSURANCE	28,803
		RELOCATION EXPENSE	13,000
_		SOCIAL SECURITY	1,697,819
		UNEMPLOYMENT INSURANCE	172,972
		WORKER COMP INSURANCE	277,331
		LEGAL FEES	21,725
157 2	434	Y-PROG SAL (NSP) K SERVICES	-295,689
		AUDIT FEES	48,500
		Y-CLER SAL (NSP) K SERVICES	-25,482
		CONTRACT SERVICES	817,672
_		CONTRACT FEE REIMBURSABLES	2,000
		1-PROF SAL (NSP) K.SERVICES	-696,161
		/-HEALTH (NSP) K SERVICES	-64,541
		/-RETIR'MT (NSP) K SERVICES	-99,144
		/-LIFE (NSP) K SERVICES	-6,068
		/-FICA (NSP) K SERVICES	-77,826
		Y-UNEMPLMT (NSP) K SERVICES	-8,137
		Y-WORKCOMP (NSP) K SERVICES	-13,226
		CASUAL SERVICES	400
		ANITORIAL SERVICES	91,144
		COMPUTER SERVICES	862,920
		OFFICE SUPPLIES	125,897
1/3 2	575 H	ARDWARE COMPUTER SUPPLIES	40,317

	A B	
	В	C
	YMCA of Greater Louisville	2047
1 1	As of Year-End	2017
	2516 INK JET CARTRIDGES	Budget
	2517 SOFTWARE COMPUTER SUPPLIES	3,770
	2520 MAINTENANCE SUPPLIES	15,000
	2521 HOUSEKEEPING SUPPLIES	112,584
	2522 POOL SUPPLIES	304,524
	2523 LIGHT BULB SUPPLIES	199,798
	2524 TURKEY DAY SUPPLIES	8,752
	2525 COMMUNITY SUPPLIES	18,750
_	2530 MEDICAL SUPPLIES	296
	2540 PROGRAM SUPPLIES	16,746
	2541 CLASS SUPPLIES	1,220,250
	2543 SUPPLIES	23,202
	2545 FIELD TRIPS	29,920
	2547 Y WEIGHT LOSS SUPPLIES	272,247
	2550 FOOD SUPPLIES	2,430
	2551 FOOD SUPPLY-CHILD CARE	957,545
	2552 CHILDCARE PAPER PRODUCT	111,320
_	2555 TOGETHER 4 TEENS SUPPLY	3,515
	2560 LAUNDRY SUPPLIES	14,000
	2561 TOWEL SUPPLY	12,496
	2565 UNIFORMS	34,400
	2570 MERCHANDISE RESALE EXP	107,626
	2572 SUNDRY SUPPLIES	28,821
	2573 PERISHABLE SUPPLIES	8,398
	2574 CAFE SUPPLIES	4,525
	2578 GREETING CARD EXPENSE	15,519
200 2	2580 SUBSCRIPTIONS	50 49.056
	2590 OTHER SUPPLIES	48,056 41,224
	2600 TELEPHONE	165,481
	2601 TELEPHONE/DATA COMMUNIC	65,544
	2610 TELEPHONE EQUIPM'T/MTNE	2,696
	620 TELEPHONE/CELL	
_	700 POSTAGE	209,521 178,987
	720 FREIGHT EXPENSE	4,545
	810 RENT	382,618
_	820 LAWN/LANDSCAPING CARE	5,690
	830 LICENSE & PERMITS	38,710
_	831 ELECTRIC	1,351,455
_	832 GAS	277,914
	836 WATER/SEWER	397,644
	840 BLDG & GROUNDS MAINTEN.	646,636
	842 BLDG & GROUNDS PROJECTS	118,810
	843 BLDG & GROUNDS REPAIRS	289,560

	Α	В	С
		YMCA of Greater Louisville	2017
1		As of Year-End	Budget
		BLDG & GROUNDS CONTRACT	950,01
		MECHANICAL-NON CONTRACT	100,20
		HVAC MTNE & REPAIRS	94,19
_		ELECTRICAL MTNE & REPAI	25,95
		PLUMBING MTNE & REPAIR	7,28
		SNOW REMOVAL	54,23
		TAXES	2,15
		MORTGAGE PRINCIPAL	1,104,71
		INTERNAL LOAN PAYMENT	521,56
		MORTGAGE INTEREST	875,08
		ALLOC'TD DEBT SERV(P&I)	42,01
_		EQUIPMENT LEASE/RENTAL	123,98
		EQUIP MAINT/CONTRACTS	111,65
		PRINTING	253,16
_		PRINT-REIMBURSEABLE	6,00
		PROMOTION	252,07
233 3	3121	ADVERTISING/MEDIA BUY	392,88
234 3	3135	SPONSORSHIP PROMOTIONS	13,500
235 3	3140	PUBLIC RELATIONS	26,00
236 3	3150	ANN'L SUPPORT PROMO MAT	45,468
237 3	3155	ENDOWMENT PROMO MAT'L	5,000
238 3	3160	MEMBER RETENTION PROMO.	6,600
239 3	3165	ADVERTISING FOR STAFF	17,676
240 3	3210	Travel & Local Expense	221,996
241 3	3246	PRE-EMPLOYMENT SCREENINGS	2,406
		VEHICLE OPERATION	57,601
		VEHICLE MAINTENANCE	4,481
		VEHICLE LEASE/RENTAL	436,588
45 3	312	VOLUNTEER RECOGN./AWARD	4,000
_		STAFF RECOGNITION	59,705
_		STAFF TRAINING	279,731
48 3	316	CERTIFICATIONS	2,496
49 3	317 (COMMITTEE EXP	24,210
_		VOLUNTEER TRAINING	38,805
		NTERNATIONAL EXPENSE	500
		ASSOC'N MEETING EXPENSE	55,000
_		CONFERENCE REGISTRATION	5,782
		FAIR SHARE Y-USA	457,530
_		ASSOCIATION'S DUES	25,300
		NDIVIDUAL'S DUES	9,380
_		NETWORK DUES	2,700
		STIPENDS	10,000
_		SCHOLARSHIPS	10,000

	Α	В	С
		YMCA of Greater Louisville	2017
1		As of Year-End	Budget
260	3660	WORLD SERVICE SUPPORT	5,000
		BANK SERVICE CHARGES	9,400
		INSURANCE PREMIUMS	534,007
		AUTO INSURANCE PREMIUM	27,520
		MISCELLANEOUS EXPENSE	13,550
		BANQUET EXPENSE	46,000
		MGMT SERV FEE-FROM ASO	5,302,001
		BRANCH ADMIN-WITHIN BR.	-1
		BRANCH MAINT-WITHIN BR.	1
		HORSE LEASE	1,500
270 5	350	SMALL EQUIPM'T PURCHASE	38,613
		CAPITAL PURCHASES	654,500
272 5	355	OPERATING LEASE PMT EQM	1,341,981
		OPERATING RESERVE	1,109,307
		MAINTENANCE RESERVE	1,792,636
_		JCPS BOARD PAYMENT	308,000
276		Expense	53,847,750

Assoc by Major (in thousands) Period: 12 - December 2016

	Α	В	С	D	E	F	G	Н		l j	К	L
						YTD	YTD	·	YTD			
			Dec	Dec	\$ Var	Dec	Dec	\$ Var	Dec	\$ Var		
		YMCA of Greater Louisville	2016	2016	Actual	2016	2016	YTD Act	2015	YTD		2016
1		As of December	Actual	Budget	to Budget	Actual	Budget	to Budget	Actual	TY to LY	% Var	Budget
2		CONTRIBUTIONS	158	181	(24)	2,395	2,449	(55)		399	20	2,449
3	03	SPECIAL EVENTS	(21)	(38)	17	67	77	(10)	3	64	2,171	77
4		UNITED WAY	50	52	(3)	644	681	(37)	679	(35)	-5	681
5	10	GOVERNMENT GRANTS	448	377	71	3,501	3,056	444		511	17	3,056
6		MEMBERSHIPS	1,657	1,685	(28)	21,631	21,542	89		3,934	22	21,542
7		PROGRAM FEES	1,180	1,060	120	18,729	18,267		16,126	2,603	16	18,267
8	14	MERCHANDISE SALES	79	24	55	368	285	83	253	115	45	285
		INTEREST INCOME	23	22	1	232	227	5	216	16	7	227
_		MISCELLANEOUS	17	5	12	76	65	12	20	56	278	65
11	17	IN KIND DONATIONS									0	0,5
12	18	INTRA Y ALLOCATIONS	449	261	187	5,385	4,598	787	4,619	767	17	4,598
13		Revenue	4,041	3,630	410	53,028	51,248	1,780		8,429	19	51,248
14										-,		,
15	21	SALARIES & WAGES	2,997	2,786	(211)	21,660	21,794	134	17,788	(3,872)	-22	21,794
		EMPLOYEE BENEFITS	320	325	5	2,736	2,853	117	2,322	(414)	-18	2,853
17	23	PAYROLL TAXES	184	256	72	1,911	2,093	182	1,574	(337)	-21	2,093
18	24	PROFESSIONAL SERVICES	75	9	(66)	905	638	(268)	590	(316)	-54	638
19	25	SUPPLIES	358	290	(68)	3,857	3,656	(202)	3,424	(433)	-13	3,656
20	26	TELEPHONE	42	34	(9)	447	406	(41)	379	(68)	-18	406
		POSTAGE	39	56	16	159	210	51	188	29	16	210
22	28	OCCUPANCY	1,101	1,064	(37)	7,431	7,176	(255)	6,154	(1,277)	-21	7,176
_		EQUIPMENT	25	18	(6)	292	230	(62)	256	(36)	-14	230
24	31	PRINTING & PROMOTION	325	373	49	1,005	980	(25)	986	(20)	-2	980
25	32	TRAVEL & LOCAL EXPENSE	46	49	3	691	633	(58)	561	(129)	-23	633
26	33	ASSOC'N EVENTS/MEETINGS	47	34	(13)	530	474	(56)	445	(86)	-19	474
27	35	MEMBERSHIP DUES	(21)	52	73	426	486	60	385	(42)	-11	486
_	36	AWARDS & GRANTS	2	4	2	9	5	(4)	3	(6)	-222	5
29	37	FINANCING COST	1	7	6	12	91	79	36	24	68	91
30	38	INSURANCE PREMIUMS	128	37	(90)	561	468	(93)	379	(182)	-48	468
31	39	MISCELLANEOUS	(9)		10	135	45	(90)	26	(110)	-429	45
		INTRA Y ALLOCATION	422	422		5,070	5,069	(0	4,424	(646)	-15	5,069
33	53	F/A PURCHASES & RESERVE	288	360	72		4,464	(48)	4,180	(332)	-8	4,464
34 !	59 .	JCPS BD PAYMENT	25	25	()	302	302	()	299	(4)	-1	302
35		Expense	6,393	6,201		52,652	52,073		44,397	(8,254)	-19	52,073
36								(/	.,	(-,,		,0.0
37	- 1	YMCA of Greater Louisville	(2,353)	(2,571)	218	377	(825)	1,202	202	174	86	(825)

YMCA of Greater Louisville Branch Summary by Major December 2016

				9	į.		000 133	3 8	03,000	288,102	J / C		2.000	40,000	252	000	ם ה ה ת	232	21 815	84.739	16,570	5,075	910	2,500	200	164	750	747	260		980	¥ 8	2	107/10/
				2016	Budget		Ш				0/5/070		2.	40,	1,6	1 000 606	149 953	101 234	21 5	8	16,	5,(191,910	2,5	20,500	13,164	31,750	16,047	18,660		61,980	82.648	1.857.181	-
	_	ATO	Dec	2015	Actual		568 406			000,000			491	50,000	1,561,629	200 630	124 196	85.658	12,360	97,119	15,226	3,104	196,513	3,382	19,375	12,750	36,937	14,223	14,152	95	48,797	87,902	1,740,776	1-1-1-1
	Ŧ				\$ Var		(50 448)			169.2		37	(1,5		161,740	(60.868)	738	5.700	(11,499)	(38,233)	(1,492)	1,611	(7,063)	(1,205)	(21,843)	(465)	2,406	1,096	(4,498)	(217)	2	(1,207)	(137,037)	
	g	YTD	Dec	2016	Budget		661.000	63,000	751 997	620,255	010/030		2,000	40,000	1,648,252	1 038 636	149,953	101,234	21,815	84,739	16,570	5,075	191,910	2,500	20,500	13,164	31,750	16,047	18,660		61,980	85,648	1,857,181	
۵	ш	OTY	Dec	2016	Actual		610.552					37	491	40,000	1,809,992	1.099.504	149,215	95,534	33,314	122,972	18,062	3,464	198,973	3,705	42,343	13,629	29,344	14,951	23,158	217	61,978	83,855	1,994,218	
December 2010	E				\$ Var		(36,148)			72.221			(1,509)		32,591	(38,083)			(7,598)	(7,236)	(355)	(932)	635			(1,451)	(1,960)	932	(4,498)	(187)			(75,449)	
Dece	٥		Dec	2016	Budget		101,000		21.823				2,000	40,000	191,007	142,726			5,155		1,378	945	44,856			1,252	3,441	1,062	1,555		5,164	6,887	252,367	
	S		Dec	2016	Actual		64,852	(2,000)	21.823	98,405	. 28		491	40,000	223,598	180,809	21,307	12,465	12,753	16,859	1,733	1,877	44,221	429	8,808	2,703	5,401	130	6,053	187	5,164	6,887	327,816	
	8					SAFE PLACE SERVICES	CONTRIBUTIONS	SPECIAL EVENTS	UNITED WAY	GOVERNMENT GRANTS	MEMBERSHIPS	MERCHANDISE SALES	INTEREST INCOME	INTRA Y ALLOCATIONS	Revenue	SALARIES & WAGES	EMPLOYEE BENEFITS	PAYROLL TAXES	PROFESSIONAL SERVICES	SUPPLIES	TELEPHONE	POSTAGE	OCCUPANCY	EQUIPMENT	PRINTING & PROMOTION		ASSUC'N EVEN IS/MEETINGS	MEMBERSHIP DUES	INSURANCE PREMIUMS	MISCELLANEOUS		F/A PURCHASES & RESERVE	Expense	
	∀					8	0	8	8	10	11			188		21																52	- 1	5
						7	m	4	ı,	9	7	∞	6	의 :	1 5	13	4	13	19	17	22	51	3 2	7 5	3 5	3 2	₹ {	2 2	\neg	$\overline{}$	\neg	হা হ	3	1

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

Department of the Treasury Internal Revenue Service

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

-		Intermation about	t Form 900 and its instructions is a	Metanar Ive on	outtownoon		Inspec	tion							
A	For th	e 2015 calendar year, or tax year beginnin		and ending	OVITORINGO	4	1000	แอก							
В	Check	If applicable; C Name of organization THE YOUN	G MEN'S CHRISTIAN ASSOCIATION OF	CREATER I	OT HOLD I E	D Empless	, 20								
	Addres	s change Doing business as		GREATER	COPANITE	u cingioya	r identification n	umber							
	Name o		nail is not delivered to street address)	12											
	Initial re	sturn 545 SOUTH 2ND STREET	was not detacted to addet Bockess)	Room/sulte		E Tolephon									
			intry, and ZIP or foreign postal code			(502) 587-9622								
$\overline{\Box}$		ed return LOUISVILLE, KY 40202	way, and zie or toleigh postal code												
П				Managara		G Gross rec	eipts \$ 42	2,503,962							
L.,	Applica	tion pending F Name and address of principal office	er: S. KAY MANNING		H(a) is this a gro	up return for su	bordinates? Yes								
_	-	SAME AS C ABOVE					included? Yes								
÷		ampt status: 🗹 501(c)(3) ☐ 501(c) (() ◀ (insert no.) 4947(a)(1) or	527	if "No	," attach a li	ist. (see instructio	ns)							
<u>J</u>	Websit	(10) DESCRIPTION OF THE PARTY O			H(c) Group e										
N BP	Form of	organization: 🗸 Corporation 🗌 Trust 🔝 Associa	ation ☐ Other ► L Yea	r of formation	1853		f legal ciomicite:	KY							
¥.	art I	Summary				I III Otato o	regar con sone:	- 1/1							
	1	Briefly describe the organization's miss	sion or most significant activities	SEE SCH	EDINEO										
Š		Interly describe the organization's mission or most significant activities: SEE SCHEDULE 0													
ğ	1		to a mag a di di anango y pada anangi y y di a di a mag y y di anangi y y y di anangi y y y di anangi y y y y												
ě	2	Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.													
Governance	3	Number of voting members of the gove	ming book (Bort VI, time 4.)		nore than 2		s net assets.								
ağ	4	Number of independent voting momba	Frang body (Part VI, line 1a).	85	* * *	3		36							
8	5	Number of independent voting member	is of the governing body (Part VI,	line 1b) .		4		36							
Activities &	6	Total number of individuals employed in			36 36 -	5		2,669							
8	7a	Total number of volunteers (estimate if	necessary)		(e) (e) (e)	6		8,068							
-	, a	Total unrelated business revenue from I	Part VIII, column (C), line 12 .			7a		180,663							
	- B	Net unrelated business taxable income	from Form 990-T, line 34			7b		0							
	_	45			Prior Year		Current Yes								
4	8	Contributions and grants (Part VIII, line	6.6	36,023		300,375									
Revenue	9	Program service revenue (Part VIII, line :	87,675		891,828										
Sev	10	Investment income (Part VIII, column (A)	48.159												
Beta .	11	Other revenue (Part VIII, column (A), line	81,580		386,513										
	12	Total revenue—add lines 8 through 11 (m			1,570,29										
	13	Grants and similar amounts paid (Part D	53,437	41,149,01											
	14	Benefits paid to or for members (Part IX	62,200		34,800										
65	15	Salaries, other compensation, employee b	0												
Expenses	16a	Professional fundraising fees (Part IX, co	olumn (A), knes 5-	-10)	21,0	49,249	21,3	365,310							
ä	b	Total fundralsing expenses (Part IX, colu	AUTHOR (A), MITO (16)			0									
ă	17	Other expenses /Part IV column (A) III-	irrn (D), line 25) > 468,	571											
	18	Other expenses (Part IX, column (A), line	s 11a-11d, 11(-24e)	· •	17,90	04,468	18,4	36,820							
- 1	19	Total expenses. Add lines 13-17 (must e	equal Part IX, column (A), line 25)		39,0	15,917	39,8	36,930							
		Revenue less expenses. Subtract line 18	3 from line 12			37,520		12,082							
dances	20	Intal annala (Dart V "		Begin	uning of Curre	nt Year	End of Year								
38		Total assets (Part X, line 16)			74,83	9,577	70.7	40,524							
Fund Bal	21	Total liabilities (Part X, line 26)			26,44	2,144		93,538							
	22	Net assets or fund balances. Subtract lin	ne 21 from line 20			7,433		46,966							
	rtill	Signature Block													
Und	er penalt	ies of perjury, I declare that I have examined this re and complete. Declaration of preparer (other than o	turn, including accompanying schedules ar	nd statements	and to the h	net of my k	soularize and h	aliat is t							
thriat.	GOTTECT,	and complete. Declaration of preparer (other than o	officer) is based on all information of which	preparer has	ony knowledg	e.	comprise ments	nimi, ti is							
		2-EUNSTURIMIT	nX			4. 2	1 2011								
Sigi		Signature of officer			Dete	1-6	6-2016								
ler	e	S. KAY MANNING, VICE PRESIDENT	OF FINANCE/CEO		Petro										
		Type or print name and title	The state of the s												
aic	ч Т	Print/Type proparer's name	reparer's eignature	Date			POTRIAL								
	u parer	JEFFREY K. MCCAFFREY		Date		heck 🔲 i	PTIM								
			CAY & OCTOOR			elf-employe	d								
JSE	Only	Elmis address b. 0300 CHEI DOM I P NO.	ID CUTTE 4400 4 5		Firm's E	IN ►									
lav	the IRS	Firm's address > 9300 SHELBYVILLE ROA	AU, SUITE 1100, LOUISVILLE, KY 40	222-5187	Phone n	o.	(502) 426-9660								
or D		discuss this return with the preparer shark Reduction Act Notice	own above? (see instructions) .	4 4 4			· VYes	No							

Part IV	Checklist	of Red	quired	Schedules

			Ye	s N
1	is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A			- "
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	1	1	\perp
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	2	1	
	candidates for public office? If "Yes," complete Schedule C, Part I			
4	Section 501(c)(3) organizations Did the same to the section 501(c)(3) organizations Did the section 501(c)(3) organization 501(c	3	1	- √
	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			7-
-	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		1
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,		+	+
	assessments, or similar amounts as defined in Revenue Procedure 98-192 if "Ves " complete Schedule C		1	
	reaching a second and a second	5	1	1
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	- 3	+-	
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If	ł		j
	"Yes," complete Schedule D, Part I		J	١.
7		6	<u> </u>	1
	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		1	
8	Did the organization mulataly action of the structures? If "Yes," complete Schedule D, Part II	7		1
•	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		1	
_	Somptote General D., Fait III	8		1
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	 	一	Ť
	costocian for amounts not listed in Part X; or provide credit counseling, debt management, gradit reneir and			
	door negotiation services riffres, complete schedule D. Part IV	9		1
10	Did the organization, directly or through a related organization, hold accept in tomography matrix and the control of the cont	-3	 	 *
	choowinens, permanent endowments, or quasi-endowments? If "Yes." complete Schedule D. Part V.		,	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	10	1	
	VII, VIII, IX, or X as applicable.	± Å		g
а			Ţ.	1
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	-		
b	Did the organization report on amount for the	11a	<	1
~	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 120 K (V) and 100 K (V) and 10		ļ —	
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
Ų	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 160 K files 160 K fil			1
	of its local assets reported in Part A, life 167 // "Yes," complete Schedule D. Part VIII	11c		1
d	The transfer of the annual to the annual to the state of the state		_	1
	reported in Fart X, line 167 if "Yes," complete Schedule D, Part IX	11d		1
e	Did the organization report an amount for other liabilities in Part X, line 252, If "Van " complete Cabadida D. Davi V.	11e	7	
1	Did the organization's separate or consolidated financial statements for the tay year include a footboth that addresses		-	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes." complete Schedule D. Part V.	444	,	
12 a	Did the organization obtain separate, independent audited financial statements for the tay years # "Yes # and the	111	✓_	ļ
	Schedule D, Parts XI and XII			,
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If	12a		✓
	153, alig if the organization answered "No" to line 12s then completion Calculate to the extra visit of the contraction of the			l
13	Is the organization a school described in portion of Transvisualities of the organization as school described in portion of Transvisualities as the organization as school described in portion of Transvisualities as the organization as school described in portion of Transvisualities as the organization as school described in portion of Transvisualities as the organization as school described in portion of Transvisualities as the organization of the organization o	12b	✓_	L
14 a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
b	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
-	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	1		
-15	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b	- 1	1
19.	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	to any loreign organization in res, complete schedule F, Parts II and IV	15	l	1
16	Did the organization report on Part IX. column (A) line 3 more than \$5,000 of aggregate greats as at all 1	 †	 	
	assistance to or for foreign individuals? If "Yes," complete Schedule F. Parts III and IV	40		
17	DIG the organization report a total of more than \$15,000 of expenses for professional fundraining condenses on	16		<u> </u>
]	ļ	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	17		✓_
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	- 1		
19	Did the organization report more than \$15,000 of avens in a second	18	√	
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?		Ţ	
	If "Yes," complete Schedule G, Part III	19		✓
			000	

"Ра	Statements Regarding Other IRS Filings and Tax Compliance			rage
	Check if Schedule O contains a response or note to any line in this Part V			. г
1a	Enter the number concited in Day 2 - 6 E		Yes	No
Ł	Enter the number of Forms W-2G included in the start of the number of Forms W-2G included in the start of the number of Forms W-2G included in the start of the number of Forms W-2G included in the start of the number of Forms W-2G included in the start of the number of Forms W-2G included in the start of the number of Forms W-2G included in the start of the number of Forms W-2G included in the start of the number of Forms W-2G included in the start of the number of Forms W-2G included in the start of the number of Forms W-2G included in the start of the number of Forms W-2G included in the start of the number of Forms W-2G included in the start of the number of Forms W-2G included in the start of the number of Forms W-2G included in the start of the number of Forms W-2G included in the number of Forms W-2G include			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and		龙亚	
	reportable gaming (gambling) winnings to prize winners?			8.5
2a		1c	1	1 may 1
	Statements, filed for the calendar year and a with			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	3		E.J.
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	<u>2b</u>		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			1
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.	3a	∀	
4a	At any time during the calendar year, did the organization have an interest in or a signature or other side.	3b	•	-
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			
b	If "Yes," enter the name of the foreign country: ▶	4a	** - ×	√ 2-, 2
	See instructions for filing requirements for FInCEN Form 114, Report of Foreign Bank and Financial Accounts		7	
	r r			, 1, 3 ,
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	ut it.	2 .
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		<u></u>
C	in residence of one organization file Form 8886-T?	5c		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000 and did the			
L	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	J	1
В	The res," and the organization include with every solicitation an express statement that such contributions or			
_	girls were not tax deductible?	6b		
7 a	Organizations that may receive deductible contributions under section 170(c).			18
	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?			
ь		7a	1	
Ç	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7b	✓	
	redailed to the Folil ocuci.	_ [ſ	
d	If "Vas " indicate the number of Farmer gage (I) at 1	7c	63 HT 7133	✓_
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		1-5	: į.
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e		<u>√</u>
g		7f	_	<u> </u>
h	ill the organization received a contribution of cars, boats, airplanes or other vehicles, did the organization file a form 1999, on	7g 7h	-+	<u>/</u> _
8	opensoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	1	`.,##	V
_	sponsoring organization have excess business holdings at any time during the year?	R		
9	sponsoring organizations maintaining donor advised funds.		"生"	27.2
a	Did the sponsoring organization make any taxable distributions under section 49662	9a		`- - '-
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:	1	7. F	اِج اِ
a b	Initiation fees and capital contributions included on Part VIII, line 12			
11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b Section 501(c)(12) organizations. Enter:			
a	Gross income from march are as about 1			* - 7
b	Gross income from other sources (Do not net amounts due or paid to other sources	*	= =	
	ACRIEST REPORTS CITE OF POCALUOA from those 1	+		-:-
12a		9.	1. Ten 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	
b		2a		- to - 1
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			ŧ
a	Is the organization licensed to issue qualified booth plane in more than any transfer.			्र ग
	Note. See the instructions for additional information the organization must report on Cabachter	3a	W. C.	
b	Enter the amount of reserves the organization is required to maintain by the states in which	F		ģ
	the digarization is licensed to issue qualified health plans	4	74	7.4
	Enter the amount of reserves on hand		` <u>-</u>], `	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	1a	E. 112	FY U
b	IT "Yes." has it filled a Form 720 to report these permants 0 to the fill the second section of the section of the section of the section of the second section of the	lb	- *	

Form	990	(201	5)
------	-----	------	----

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

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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- · List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

☐ Check this box if neither the organizate (A) Name and Title	(B) Average hours per week (list any	(do r box, office	not cl unle: er an	Pos heck ss pe d a c	c) sition mor erson drect		one h an	(D) Reportable compensation	(E) Reportable compensation from	(F) Estimated amount of
	hours for related organizations below dotted line)	Individue or direct	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) BRAD SMITH CHAIR	1.0	1		/				0	0	
(2) TRICIA BURKE	1.0						\vdash		0	0
SECRETARY		1		1				0	0	
(3) COURTNEY GIESEL	1.0			Ė						0
VICE CHAIR		1	Ì	1				0	0	a
(4) JAMES R. ALLEN	1.0									
PAST CHAIR		1						o	٥	0
(5) DIANE BAILEY-BOULET	1.0									
DIRECTOR		1]	- 1	o	.: 0	0
(6) BILL BARBER	1.0		- 1	_	7		7	<u>_</u>		
DIRECTOR		✓		- 1		ı		0	a	0
(7) BARRY BARKER	1.0									
DIRECTOR		1		ĺ	-	Ì		o	اه	0
(8) HARLEY BUTLER	1,0			\neg	\neg					<u> </u>
DIRECTOR		1				ı	- 1	0	اه	0
(9) CHARLES CASH	1.0		\neg	\neg	7		_			
DIRECTOR		✓						اه	ol	0
(10) TRACY E. COCKERELL	1.0			7						
DIRECTOR		1	-					اه	اه	0
(11) TERESA COUTS	1.0		T	\dashv						
DIRECTOR		1			- [o	اه	0
(12) GREG DEMUTH	1.0			\top	7		_			
DIRECTOR		1	.					0	0	0
(13) CHRISTOPHER ECKEN	1.0	$-\dagger$	\neg		7		\top			
DIRECTOR		1		ĺ		-		o	o l	0
(14) GAYLEE GILLIM	1.0			7	+	_	\top	1		
DIRECTOR		1				ſ		o	٥	0

Pari	t VIII	Statement of Rev	/enue						
		Check if Schedule		a resp	onse or note	to any line in th	nis Part VIII		
jag.						Total revenue		(C)	(D)
						Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tar under sections
nounts	1a	· Tordiod odiripaigi	18 ,	1a	650,44	2	· 主要 连带点		512-514
0	b	Membership dues	. xo . [1b		o			
F	C	Fundraising events		1c	157,63	7	10 mm (** 59	HEE ON THE	Table Astro
ıllar Ar	ď	Related organization		1d		0 + 1 + 1			
댦	e	Government grants (co	ntributions)	1e	2,652,30	9			
and Other Similar Amounts		All other contributions, and similar amounts not in	icluded above	1f	1,839,98				
2	g h	Noncash contributions inclu	ided in lines 1a-1	lf: \$	(464,626	1 10 No. 20 17 17 18 18 19 18			
	- 11	Total. Add lines 1a-	<u> </u>	• •	Business Code	5,300,37	5	Carried March Street	。由于全国的
	2a	HEALTHY LIVING		-	813410				
riugiam service revenue	b	YOUTH DEVELOPME	NT	-	813410	19,070,817			
3	C	SOCIAL RESPONSIBI		-	813410	14,727,290 93,72°			
200	ď	,	7 7 8 9		V. V. IU	93,72	93,72	<u> </u>	
	е							 	·
5	f	All other program ser	vice revenue			(0	
-	g	Total. Add lines 2a-2			▶	33,891,828	1		
- 1	3	Investment income	(including d	lividen	ds, interest,		III I come limit to		表表とMac (ドル 新 三)
		and other similar amo				212,467	·	0	212,4
- 1	4	Income from investmen	it of tax-exemp	pt bond	d proceeds			0	
-	5	Royalties	Ø Dool	• •		0	(0	
	6a	Gross rents	(i) Real	707	(ii) Personal				2011年第三
	b	Less: rental expenses	/ ₁	797		。			
	C	Rental income or (loss)	7	797		中東中國語			
- [d	Net rental income or		191		7 707	id - tel		ALL ALL SUF
- [7a	Gross amount from sales of	(i) Securities	<u> </u>	(ii) Other	7,797	E Tagas a constant	0	7,79
		assets other than inventory	1,091,0	094	346,878				运法 (建化)
- 1	b	Less: cost or other basis		_	-,,,,,,,				
		and sales expenses .	930,8	848	333,078				声音,并是是这些
	C	Gain or (loss)	160,2	246	13,800				
	d	Net gain or (loss) .		35 11		174,046	0	0	174,04
	0-	Owner to a second				12. 18.44 4.15.		新发生 医热血剂	11 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
	8a	Gross income from fu events (not including \$	_			ज्ञानाची, पेन्हें	l vi della della		
		of contributions reporte	157,637				是 经 重点 140		
		See Part IV, line 18	-		04.00=	45			
	b	Less: direct expenses	Fi fi fi fi	a	34,605	Problem Comments			
		Net income or (loss) fr		שַעַם פּער	54,793	(20.489)			1 THE TO THE THE THE
	9a	Gross income from ga	ming activities	s.	, DINCO .	(20,188)	As The Control of	0	(20,188
		See Part IV, line 19 .		а	0				
	Ъ	Less: direct expenses	ar tyring it vi	b	0				de An Idaren
	C	Net income or (loss) fr	om gaming a	ctivitie	es >	0	লৈ এলংগ্ৰেছিট 0i	ar very a series of	· 进口严重和1000年 1000
1	10a	Gross sales of inv	ventory, less	s			2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
		returns and allowance		а	61,893	The Control of the Co		表现 经销售证据	
		Less: cost of goods so		b	36,231			美国、新疆、新疆、	
-	C	Net income or (loss) from Miscellaneous Re				25,662	0	0	25,662
1	11a			B	usiness Code	6F. 3			4-72-75 - 4-8-75
	b	CONTRACT SERVICES PARKING LOT			561000	1,353,060	0	. 0	1,353,060
		MISCELLANEOUS		-	531190	191,552	0	180,663	10,889
		All other revenue .			900099	12,413	0	0	12,413
		Total. Add lines 11a-1	en e	L		1,557,025	0		
IJ.	e '	rotal, Add lines 11a-1	Id .		🕨				等自由导致整个企 位。

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Pa	art X		
			(A) Beginning of year	Ė	(B) End of year
	1	Cash—non-interest-bearing	5,595	1	5,64
	2	Savings and temporary cash investments	18,042,487	2	18,406,961
	3	Pledges and grants receivable, net	2,051,642	3	2,229,251
	4	Accounts receivable, net	279,837	4	370,038
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L			等。 第一章 第一章 第一章 第一章 第一章 第一章 第一章 第一章
ts	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		5	C
Assets	7	Notes and loans receivable, net	0	7	0
As	8	Inventories for sale or use	0		0
	9	Prepaid expenses and deferred charges	432,541		070.070
	10a	Land, buildings, and equipment: cost or	432,341	3	272,278
		other basis. Complete Part VI of Schedule D 10a 84,510,836			
	b		49,789,607	100	45 400 040
	11	Investments—publicly traded securities	4,237,868		45,402,949
	12	Investments-other securities. See Part IV, line 11	0		4,053,403
	13	investments—program-related. See Part IV, line 11	0	13	0
	14	Intangible assets	0		0
	15	Other assets. See Part IV, line 11	0		0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	74,839,577	16	70,740,524
	17	Accounts payable and accrued expenses	2,177,948	17	1,273,718
	18	Grants payable	0	18	0
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities	19,422,722	20	18,927,286
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.	0	21	0
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	621,631	23	695,479
	24	Unsecured notes and loans payable to unrelated third parties	0	24	000,479
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	4,219,843		297,055
	26	Total liabilities. Add lines 17 through 25	26,442,144	25	01 100
Ses		Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 27 through 29, and lines 33 and 34.	20,442,144	26	21,193,538
ğ	27	Unrestricted net assets	10 470 044	000	
	28	Temporarily restricted net assets	43,479,644	27	44,070,823
모	29	Permanently restricted net assets .	3,573,506 1,344,283	28	4,133,945
or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34.	1,044,203	29	1,342,218
Si	30	Capital stock or trust principal, or current funds	(14년 - 17년 - 17년 - 14년 - 1 이	30	
en I	31	Paid-in or capital surplus, or land, building, or equipment fund		31	- 0
Ä	32	Retained earnings, endowment, accumulated income, or other funds.		32	0
	33	Total net assets or fund balances		33	49,546,986
	34	Total liabilities and net assets/fund balances		34	70,740,524
					Form 990 (2015)

(A) Name and Title	(B) Average hours	age hours (C) Position week (Check all that apply)					(D) Reportable (E) Reportable (F) Estin			
	per week (list any hours for related organizations below dotted line)	Individual trustae or director	nstitutional trustes	BCK all Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(25) STEVE LARIMORE	1.0	1						0	0	0
DIRECTOR										<u> </u>
(28) REBECCA MATHENY	1,0	1						o	_	
DIRECTOR		•							0	0
(27) PAT NORTHAM	1.0		ı			:				
DIRECTOR		▼.				!		0	0	0
(28) MARTIN PADGETT	1.0	[./								_
DIRECTOR		Y]				0	0	0
(29) DOUG PHILLIPS	1.0	1						_		
DIRECTOR		•		_		_		0	0	0
(30) STEVE SEXTON	1.0	1								
DIRECTOR		•	_	1				0	0	· O
(31) TRACEE TROUTT	1.0									
DIRECTOR		.						0	0	0
(32) MARK TRUMAN	1.0			Ĭ						
DIRECTOR	M-2						i	0	0	0
(33) DEBBIE WESSLUND	1.0									
DIRECTOR		1						0	0	0
(34) JAMES WILLIAMSON	1.0									
DIRECTOR		1						0	0	0
(35) HALA ZIADY	1.0			\exists						
DIRECTOR		1	- 1			- 1		0	0	0
(36) SCOTT ZOPOTH	1,0									
DIRECTOR		1				ļ	ĺ	0	0	0
(37) R. STEPHEN, TARVER	45.0	7	_		\neg					
PRESIDENT	5.0		- 1	Y				263,007	0	41,360
(38) DAVID W. HEARD	50,0									
SENIOR VICE PRESIDENT OF OPERATIONS	70,0			✓			ļ	183,716	0	28,393
(39) S. KAY MANNING	45.0		\neg	1				400 000		
VICE PRESIDENT OF FINANCE	5.0	_]		٧.				120,896	0	27,340
(40) BECKY GAMM " ····	50.0		\neg	\neg		/			1 100	
VICE PRESIDENT OF OPERATIONS		[_	_	_	Ā,		156,494	0	23,732
(41) LAURIE JACKSON	45.0		\neg	7	\neg					
BRANCH EXECUTIVE DIRECTOR	5,0	_			_	V		115,918	0	20,052
(42) RONNIE V. MC KIERNAN	50.0									
BRANCH EXECUTIVE						/		111,238	0	18,518
(43) WILLIAM A. PIERCE, JR.	50.0				\neg					
VICE PRESIDENT OF PLANNING AND DEVELOPMENT						1		108,722	0	15,731
(44) KENNETH E. HOERTER, JR.	50.0	T	T	T		1	T	4.00		
BRANCH EXECUTIVE DIRECTOR								107,527	0	18,289

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ,

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

OMB No. 1545-0047

2015

Open to Public Inspection

Name of the organization Employer identification number THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER LOUISVILLE Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 9 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.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. ☐ Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. ☐ Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see Instructions). You must complete Part IV, Sections A and D, and Part V. ☐ Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations . Provide the following Information about the supported organization(s). (i) Name of supported organization (ii) EIN (iii) Type of organization (v) Amount of monetary (Iv) is the organization (vi) Amount of (described on lines 1-9 listed in your governing support (see other support (see above (see instructions)) document? instructions) instructions) Yes No. (A) **(B)** (C) (D) (E)

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.)

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

	tion A. Public Support		DIO MOLOGI DOL	ow, ploase ci	omplete Part	и.)	
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(a) 004E	40
1	Gifts, grants, contributions, and membership fees		(G) 2012	(0) 2013	(a) 2014	(e) 2015	(f) Total
_	received. (Do not include any "unusual grants.")	7,365,438	6,663,320	6,315,390	6,636,023	E 200 275	
2	Gross receipts from admissions, merchandise		-100000	0,010,000	0,030,023	5,300,375	32,280,54
	sold or services performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose	28,691,790	29,939,949	32,565,260	24 000 450	00 00 00 00	
3	Gross receipts from activities that are not an	100,000	20,000,040	02,000,200	34,003,452	33,905,099	159,105,550
	unrelated trade or business under section 513	29,569	33,344	45,850	25 404	20.000	
4	Tax revenues levied for the		00,044	40,000	35,464	23,302	167,529
	organization's benefit and either paid	ł i			ĺ		
	to or expended on its behalf	0	٥	0	0		_
5	The value of services or facilities					0	0
	furnished by a governmental unit to the					i	
	organization without charge	0	o	٥	0		_
6	Total. Add lines 1 through 5	36,086,797	36,636,613	38,926,500	40,674,939	39,228,776	404 555 005
7a	michaela of mica (, Z, and a			05,020,000	70,017,808	39,220,776	191,553,625
	received from disqualified persons .	30,688	27,000	23,950	31,100	44 500	457.000
b	Amounts included on lines 2 and 3		- 1000		31,100	44,560	157,298
	received from other than disqualified						
	persons that exceed the greater of \$5,000			ĺ			
	or 1% of the amount on line 13 for the year	o	o	0	0		
C	Add lines 7a and 7b	30,688	27,000	23,950	31,100	0	0
8	Public support. (Subtract line 7c from			20,300	31,100	44,560	157,298
	line 6.)						454 000 000
Sect	ion B. Total Support		<u> </u>	<u> (g. 15. 14.44)</u>	ar depart	Teners -	191,396,327
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	60 T - 1 1
9	Amounts from line 6 ,	36,086,797	36,636,613	38,926,500	40,674,939	39,228,776	(f) Total
10a	Gross income from interest, dividends,			00,020,000	40,074,839	39,220,770	191,553,625
	payments received on securities loans, rents.	J	- 1	i			
	royalties and income from similar sources .	211,611	136,814	131,857	197,423	212,467	900 470
b	Unrelated business taxable income (less				107,720	212,401	890,172
	section 511 taxes) from businesses	ļ			j		
	acquired after June 30, 1975	o	o	0	0		
C	Add lines 10a and 10b	211,611	136,814	131,857	197,423	212,467	890,172
11	Net income from unrelated business				701,120	212,707	030,172
	activities not included in line 10b, whether				- 1	i	
	or not the business is regularly carried on	0	11,833	0	ol	0	11,833
12	Other income. Do not include gain or						11,033
	loss from the sale of capital assets						
40	(Explain in Part Vi.)	0	0	o	ol	o	0
13	Total support. (Add lines 9, 10c, 11,					 +	
44 -	and 12.)	36,298,408	36,785,260	39,058,357	40,872,362	39,441,243	192,455,630
14	First five years. If the Form 990 is for the	organization's	first, second,	third, fourth,	or fifth tax year	r as a section	501(c)(3)
Casti	- a- and all all all all all all		<u> </u>	<u> </u>			▶ □
3 6 CH	on C. Computation of Public Support	Percentage				·	
15	Public support percentage for 2015 (line 8,	column (f) divid	ded by line 13,	column (f)) .		15	99.45 %
16	Public support percentage from 2014 Sche	edule A. Part III	line 15	<u> </u>		16	99.51 %
30CU	on D. Computation of investment inco	ome Percent	age				70
17	Investment Income percentage for 2015 (lin	ne 10c, column	(f) divided by I	ine 13, column	ı (f))	17	0.46 %
18	investment income percentage from 2014 s	Schedule A. Pa	rt III. lina 17			18	
19a	93.3% Support tests-2015, it the organiza	ation did not ch	ieck the hov a	n line 14 and	line de la man	e than 331/3%.	
	The first thore than do 7370, Check this box at	iu stop nere, jr	ie organization	qualifies as a r	urblicky euroports	ad arganization	K
b	45 % % Support tests—2014. If the organizat	ion did not cha	ck a hoy on lin	a 1/1 ar lina 10:	مناهة مسئل لمحم		
	mie 16 ie net meie than 36 /3/6, theth Bils De	ix and stop hen	3. The organiza	tion qualifies as	s a publich cup	norted areasing	Allera De Cor
20	Private foundation. If the organization did	not check a bo	x on line 14, 1	9a, or 19b, che	ck this box an	d see instructio	ns 🕨 🗀

	dule A (Form 990 or 990-EZ) 2015			_
₽ā	t IV Supporting Organizations (continued)			Page
11	Has the organization accepted a gift or contribution from		Yes	No
1	Has the organization accepted a gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			fw£ i
	a supported organization?	44-	密禁	300
	A family member of a person described in (a) above?	11a 11b		-
Con	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		-
360	tion B. Type I Supporting Organizations			
1	Did the directors, trustees, or membership of one or more supported organizations have the power to	- Car	Yes	No
	· · · · · · · · · · · · · · · · · · ·		7	Br.
	Take Joseph 11 190, Upschild in Fall VI now the supported organization(s) official and the support of the suppo	* 42 in		
	TO THE PROPERTY OF THE PROPERT			
	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	H	- (f)
2	Did the organization operate for the benefit of any supported organization other than the supported	10,75	25	P. At
	organization(g) that opticated, supervised, or controlled the comporting organizations it in the state of the	: it.		
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	34		Y.,,
Sec	tion C. Type II Supporting Organizations	2		
			V I	N.
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 executive in 100 (100 to 100 to 1	V 6	Yes	No
	The state of the s	5		
	or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		7	
Sect	ion D. All Type III Supporting Organizations	1	* =	- Lv
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	- W-4	/es	No
	organization Stax year, the written notice describing the type and amount of support and approximated the type	, 2		اعد پد احدردار
	your, by a copy of the four 300 that was most recently filed so at the data of politication, and the contraction of			
2	again a governing documents in effect on the date of notification, to the extent not previously provided?	1		and the
~	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported		3 B 3	25
	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).		-	ſĒ.
3	By reason of the relationship described in (2), did the organization's augmented organization.	2	-17	
	organization to the organization's investment policies and in directing the use of the examination is	, _ '	<u>.</u> .	
	moonte of assets at all times during the tax year? If "yes " describe in Part VI the role the amenimation is			-]
Santi	supported organizations played in this regard.	3	* \$80 P	f'".
	on E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	nstruct	ions).	:
a b	☐ The organization satisfied the Activities Test, Complete line 2 below.			
c	The organization is the parent of each of its supported organizations. Complete line 3 below.			
2	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (s	ee instr	uction	7S).
2 a	Activities Test. Answer (a) and (b) below.	Y	es l	No
q	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 the organization was responsive.	M. 1. 22	4-1	
	THOW THE CHYMINIAUUT WAS TESPOTISIVE TO THOSE STIDDOITED DIGENTIATIONS, and how the expeniention of the second state of the completion of the second state of the seco		18' 'Y	
_	that those activities constituted substantially all of its activities.	28	u da	<u>'d'</u> ,
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more		1	1E 4
	The organization of Supported Organizationis) Would have been engaged in 2 if IVan II Avaide in Dank M. the			
	reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
3	Parent of Supported Organizations. Answer (a) and (b) below.	2b		
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3-	5. C.	1
b	Did the organization exercise a substantial degree of direction over the policies, programs, and said the set of the set	3a		F., . 1
	of its supported organizations? if "Yes," describe in Part VI the role played by the organization in this regard.	3b		4.

	Type III Non-Functionally Integrated 509(a)	(3) Supporting Organ	nizations (continued)	rage
_	- DISTRIBUTIONS			Current Year
	Paris para to edoported organizations to accomplish			
2	organizations, in excess of income from activity			
3		rposes of supported org	anizations	
4	Amounts paid to acquire exempt-use assets			
5		d)		
6	all all all all all all all all al	S.		
7	Total annual distributions. Add lines 1 through 6.			
8	(provide details in Part VI). See instructions.	ich the organization is re	sponsive	
9	Distributable amount for 2015 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount	 		
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1	Distributable amount for 2015 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2015 (reasonable cause required-see instructions)	er ingrafer onlar i state of		
3	Excess distributions carryover, if any, to 2015:			
a			Let Wager a large A	
b				A STATE OF THE STA
C		· "是我们"。"是我们是		
d	From 2013			
e	From 2014			
f	Total of lines 3a through e			
9_	Applied to underdistributions of prior years			
h	Applied to 2015 distributable amount			
-	Carryover from 2010 not applied (see instructions)		第 14 带 17 PB 20 PB 20 PB 20 PB	
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2015 from Section D, line 7: \$	[4] [基 位列] [4] [4] [4] [4] [4] [4] [4] [4] [4] [4		
a	Applied to underdistributions of prior years			神 诗"去""诗"
b	Applied to 2015 distributable amount			
C	Remainder, Subtract lines 4a and 4b from 4.			4. 第 10 编码 图像 第二
5	Remaining underdistributions for years prior to 2015, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6	Remaining underdistributions for 2015. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			And the second s
7	Excess distributions carryover to 2016. Add lines 3 and 4c.			
8	Breakdown of line 7:	Parties and the second		
а				19 May 12 19 19 19 19 19 19 19 19 19 19 19 19 19
b			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	15 TO 1 14 THE T LEW TO
C	Excess from 2013			
d	Excess from 2014			
_ e	Excess from 2015			
			Colonial and the second	where the stand the standard of the second of

Name of organization	Page
THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER LOUISVILLE	Employer identification number

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total cont		(d) Type of cor	ntribution		
1		\$	257,379	Person Payroll Noncash (Complete Pa	☑ □ □		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contr	ibutions	(d) Type of con	tribution		
2 (a)		\$	126,159	Person Payroll Noncash (Complete Per	☑ □ □ t II for ibutions.)		
No.	(b) Name, address, and ZIP + 4	(c) Total contr	ibutions	(d) Type of con	tribution		
3 (a)		\$	90,000	Person Payroll Noncash (Complete Parl	[/]		
No.	(b) Name, address, and ZIP + 4	(c) Total contri	butions	(d) Type of cont	ribution		
4		\$	50,006	Person Payroll Noncash (Complete Part noncash contrib	I for putions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contrib	outions	(d) Type of contr	ibution		
5		 \$	43,500	Person Payroll Noncash (Complete Part noncash contrib	I for utions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contrib	outions	(d) Type of contr	ibution		
6		**	42,655	Person Payroll Noncash (Complete Part II noncash contribu	I for utlons.)		

Page 2

Schedule B (Form 990, 990-EZ, or 990-PF) (2015) Name of organization Employer identification number THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER LOUISVILLE Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (b) (c) (d) No. Name, address, and ZIP + 4 Total contributions Type of contribution 13 Person 7 **Payroll** \$ 22,950 Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 14 Person 1 **Payroll** \$ 20,100 Noncash \Box (Complete Part II for noncash contributions,) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 15 Person **Payroll** \$ 20,000 Noncash П (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 16 Person \square **Payroli** \$ 17,195 Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 17 Person 1 **Payroll** \$ 16,500 Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 18 Person **Payroll** 15,404 Noncash

(Complete Part II for noncash contributions.)

Name of organization
THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER LOUISVILLE

Employer identification number

HE STATE OF THE	0 1 11 1		
Part I	Contributors (see instructions). Use duplicate cop	pies of Part I if additional space	
No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25		\$ 14,500	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
26		\$ 14,500	Person Payroll Noncash (Complete Part If for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
27		\$ 12,500	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
28		\$ 12,000	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
29 -		\$ 12,000 = = 12	Person
No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
30		\$ 12,000	Person Payroll Noncash (Complete Part it for noncash contributions.)

Schedule	В	(Form	990,	990-EZ,	or	990-PF)	(2015
----------	---	-------	------	---------	----	---------	-------

Page 2

Name of organization
THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER LOUISVILLE

				1 490
Emplo	ver ic	lentifi	cation	number
	,			rain (OC)

Part	Contributors (and instructions)				
(a)		pies of Part I if add	ditional space is	s needed.	
No.	(b) Name, address, and ZIP + 4	Total c	(c) ontributions	(d) Type of cor	tribution
37 (a)	;	\$	10,000	Person Payroli Noncash (Complete Pal	T T t II for ributions.)
No.	(b) Name, address, and ZIP + 4	Total co	(c) ontributions	(d) Type of con	tribution
38		\$	10,000	Person Payroll Noncash (Complete Par	I li for ibutions.)
(a) No.	(b) Name, address, and ZIP + 4	Total co	(c) nt ributions	(d) Type of conf	ribution
39		\$	10,000	Person Payroll Noncash (Complete Part noncash contri	☑ □ □ If for butlons.)
(a) No.	(b) Name, address, and ZIP + 4	Total co	(c) ntributions	(d) Type of cont	ribution
40 .		 \$	16,000	Person Payroll Noncash (Complete Part noncash contrik	☑ □ □ Il for outlons.)
(a) No.	(b) Name, address, and ZIP + 4	Total cor	(c) ntributions	(d) Type of conti	ibution
41		\$	10,000	Person Payroli Noncash (Complete Part noncash contrib	
(a) No.	(b) Name, address, and ZIP + 4	Total con	c) tributions	(d) Type of contr	ibution
42		\$	10,000	Person Payroll Noncash (Complete Part I	[]

Schedule B (Form 990, 990-EZ, or 990-PF) (2015) Page 2 Name of organization Employer identification number THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER LOUISVILLE Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. Part I (a) (C) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 49 Person 1 **Payroll** \$ 7,100 Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 50 Person 1 **Payroli** \$ 7,000 Noncash П (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Total contributions Type of contribution 51 Person 1 **Payroll** \$ 6,600 Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 52 **V** Person Payroll \$ 6,500 Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 53 Person ✓ **Payroll** \$ 6,500 Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 54 Person 1 **Payroll** \$ 6,500 Noncash

(Complete Part II for noncash contributions.)

Schedule	В	(Form	990,	990-EZ,	or 990-	-PF)	(2015)
----------	---	-------	------	---------	---------	------	--------

Page 2

Name of organization Employer identification number THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER LOUISVILLE

Part I	Contributors (see instructions) the deallest				
(a)	The state of the s	es of Part I if addit ————	ional space is	needed.	
No.	(b) Name, address, and ZIP + 4	Total con	c) tributions	(d) Type of con	tribution
61		\$	5,000	Person Payroll Noncash (Complete Par	☑ □ □ t II for ibutions.)
(a) No.	(b) Name, address, and ZIP + 4	(c Total cont) ributions	(d) Type of con	tribution
62 (a)		\$	5,000	Person Payroll Noncash (Complete Par	Il for butions.)
No.	(b) Name, address, and ZIP + 4	(c) Total cont	ributions	(d) Type of cont	ribution
63 (a)		\$	5,000	Person Payroll Noncash (Complete Part noncash contril	Il for puttions.)
No.	(b) Name, address, and ZIP + 4	(c) Total contr	ibutions	(d) Type of conti	ribution
64 (a)		 \$	5,000	Person Payroli Noncash (Complete Part noncash contrib	Il for butlons.)
No.	(b) Name, address, and ZIP + 4	(c) Total contr	butions	(d) Type of contr	ibution
65		\$	5,000	Person Payroli Noncash (Complete Part I	I for utlons,)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contri	butions	(d) Type of contri	bution
66		. \$	5,000	Person Payroll Noncash (Complete Part II noncash contribu	for utions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2015) Page 2 Name of organization Employer Identification number THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER LOUISVILLE Contributors (see Instructions). Use duplicate copies of Part I if additional space is needed. Part I (a) (b) (C) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 79 Person 1 **Payroll** \$ 5,000 Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 80 Person **V Payroll** \$ Noncash 5,000 (Complete Part II for noncash contributions,) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 81 Person 1 **Payroll** 5,000 Noncash (Complete Part II for noncash contributions.) (a) (b) (c)
Total contributions (d) No. Name, address, and ZIP + 4 Type of contribution 82 Person V **Payroll** \$ 149,273 Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 83 Person V Payroll \$ 170,223 Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** \Box

\$

Noncash (Complete Part II for noncash contributions.) THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER LOUISVILLE

Employer identification number

Part II	Noncash Property (see Instructions). Use duplicate co	opies of Part II if additional sp	ace is needed.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
N-t-G-day		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

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

OMB No. 1545-0047

Department of the Treasury Internal Revanue Service

Open to Public Inspection

THE	YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER	Employer Identification number
	ort I Organizations Maintaining Donor Ad	vised 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	(5) I didd and other accounts
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4 5	Aggregate value at end of year	
J	funds are the organization inform all donors and donor	advisors in writing that the assets held in donor advised
6	Did the examination information subject to the	ne organization's exclusive legal control? Yes . No
•	Only for charitable purposes and not for the bane	and donor advisors in writing that grant funds can be used
	conferring impermissible private benefit?	fit of the donor or donor advisor, or for any other purpose Yes No
Pa	Conservation Easements.	Yes No
	Complete if the organization answered	"Yes" on Form 990, Part IV, line 7
1	Purpose(s) of conservation easements held by the	organization (check all that apply)
	Preservation of land for public use (e.g., recreat	tion or education) Preservation of a historically important land area
	- Fototici of flattial flabitat	Preservation of a certified historic structure
•	☐ Preservation of open space	
2	Complete lines 2a through 2d if the organization he	old a qualified conservation contribution in the form of a conservation
_	and the table day of the tax year.	Held at the End of the Tax Year
a b	Total number of conservation easements	2a
C	Total acreage restricted by conservation easement	S
ď	Number of conservation easements on a certified h	istoric structure included in (a) 2c
	Number of conservation easements included in historic structure listed in the National Register .	
3	Number of conservation easements modified, trans	ferred, released, extinguished, or terminated by the organization during the
	tax year ►	residence, extinguished, or terminated by the organization during the
4	Number of states where property subject to conser	vation easement is located ▶
5	Does the organization have a written policy req	arding the periodic monitoring imposting benefity of
_	Applications, and empresentation the conservation ess	sements it holds?
6	Start and volunteer hours devoted to monitoring, inspecti	ng, handling of violations, and enforcing conservation easements during the year
7		
- 1	S s and the control of expenses incurred in monitoring, inspecting	g, handling of violations, and enforcing conservation easements during the year
8	- T	
	and section 170(h)(4)(B)(ii)?	2(d) above satisfy the requirements of section 170(h)(4)(B)(i)
9		onservation easements in its revenue and expense statement, and
	walls look, and include, it applicable, the text of	THE TOOTHOTE TO The Organization's financial statements that describes up
	g according for conservation easemer	its.
Parl		of Art, Historical Treasures, or Other Similar Assets.
	Complete it the organization answered ":	Yes" on Form 990 . Part IV line 9
12	" The organization elected, as permitted under SFA	S 116 (ASC: 958) not to report in its retreate at the second
	The state of the s	ASSETS DEID TOY DUDIES AVAILABLE advantion on an annual to the
b	If the organization elected, as permitted and a committed	ornote to its financial statements that describes these items.
	works of art, historical treasures, or other similar	AS 116 (ASC 958), to report in its revenue statement and balance sheet assets held for public exhibition, education, or research in furtherance of
	public service, provide the following amounts relating	a to these items.
	(i) Revenue included on Form 990, Part VIII, line 1	
	till Assets included in Form 990, Part X	▶ ♦
2	in the diganization received of neighborks of art. I	distorical treasures or other similar access for financial action in the
	rememing anyoning reduited to be teholica numbt 25	AS 116 (ASC 958) relating to these items:
2	Revenue included on Form 990, Part VIII, line 1	
<u>b</u>	Assets included in Form 990, Part X	• • • • • • • • • • • • • • • • • • •

	Complete if the organization ans	swered "Yes" on Form	990 Part IV lir	ne 11b. See Form 990, Part X,	line 4
	(a) Description of security or catego (including name of security)	ry	(b) Book value	(c) Method of valuation: Cost or end-of-year market val	
	derivatives	N P M V		The state of the s	
2) Closely-h	neld equity interests				
3) Other					
(A)					
(B)		<u> </u>			
(C)		<u> </u>			
(D)		 			
(E)		<u></u>			
(F)					
(G)		<u> </u>			
(H)					
	i music and a second as the second	<u> </u>			
Par VIII	must equal Form 990, Part X, col. (B) line 12.)				1.30
L'SER AIII	Investments—Program Related	d.			- 11
	Complete if the organization ans	wered "Yes" on Form 9	990, Part IV, lin	e 11c. See Form 990, Part X, li	ne 1
	(a) Description of Investment		(b) Book value	(c) Method of valuation: Cost or end-of-year market valu	
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
tal. (Column fb)	must equal Form 990, Part X, col. (B) line 13.)				
					* prod 1 100 100
	Other Assets.			The state of the s	
Part IX	Other Assets.	Wered "Yes" on Form 9	90 Part IV line	alld See Form 200 Park II	
Part IX	Other Assets. Complete if the organization answ	wered "Yes" on Form 9	90, Part IV, line		
Part IX	Other Assets. Complete if the organization answ	Wered "Yes" on Form 9	90, Part IV, line	e 11d. See Form 990, Part X, lii (b) Book va	
Part IX	Other Assets. Complete if the organization answ	Wered "Yes" on Form 9 Description	90, Part IV, line		
Part IX 1) 2)	Other Assets. Complete if the organization answ	Wered "Yes" on Form 9) Description	90, Part IV, line		
Part IX 1) 2) 3)	Other Assets. Complete if the organization answ	wered "Yes" on Form 9) Description	90, Part IV, line		
Part IX 1) 2) 3)	Other Assets. Complete if the organization answ	wered "Yes" on Form 9 Description	90, Part IV, line		
Part IX 1) 2) 3) 4)	Other Assets. Complete if the organization answ	wered "Yes" on Form 9	90, Part IV, line		
Part IX 1) 2) 3) 4) 5)	Other Assets. Complete if the organization answ	wered "Yes" on Form 9	90, Part IV, line		
Part IX 1) 2) 3) 4) 5)	Other Assets. Complete if the organization answ	wered "Yes" on Form 9	90, Part IV, line		
Part IX 1) 2) 3) 4) 5)	Other Assets. Complete if the organization answ	wered "Yes" on Form 9	90, Part IV, line		
Part IX 1) 2) 3) 4) 5) 8)	Other Assets. Complete if the organization answ	J Description	90, Part IV, line		
Part IX 1) 2) 3) 4) 5) 6) 7) B) O)tal. (Column	Other Assets. Complete if the organization answar (a	J Description	90, Part IV, line		
Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) Otal. (Column	Other Assets. Complete if the organization answar (a (a) (b) must equal Form 990, Part X, co Other Liabilities.	I. (B) line 15.)		(b) Book va	lue
Part IX 1) 2) 3) 4) 5) 6) 7) 3) otal. (Column	Other Assets. Complete if the organization answer (a (b) must equal Form 990, Part X, co Other Liabilities. Complete if the organization answer	I. (B) line 15.)		(b) Book va	lue
Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) otal. (Column	Other Assets. Complete if the organization answers (a in (b) must equal Form 990, Part X, co Other Liabilities. Complete if the organization answers line 25.	I. (B) line 15.)		(b) Book va	lue
Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) Part X	Other Assets. Complete if the organization answers. (a) In (b) must equal Form 990, Part X, co. Other Liabilities. Complete if the organization answers. (a) Description of liability	I. (B) line 15.)		(b) Book va	lue
Part IX 1) 2) 3) 4) 5) 3) 7) 8) 9) otal. (Column	Other Assets. Complete if the organization answers in (b) must equal Form 990, Part X, co Other Liabilities. Complete if the organization answers ine 25. (a) Description of liability ome taxes	I. (B) line 15.)		(b) Book va	lue
Part IX 1) 2) 3) 4) 5) 8) 9) otal. (Column	Other Assets. Complete if the organization answers. (a) In (b) must equal Form 990, Part X, co. Other Liabilities. Complete if the organization answers. (a) Description of liability	I. (B) line 15.)		(b) Book va	lue
Part IX 1) 2) 3) 4) 5) 3) 7) btal. (Column Part X.	Other Assets. Complete if the organization answers in (b) must equal Form 990, Part X, co Other Liabilities. Complete if the organization answers ine 25. (a) Description of liability ome taxes	I. (B) line 15.)		(b) Book va	lue
Part IX 1) 2) 3) 4) 5) 3) 7) Stal. (Column Part X.) Federal Inco	Other Assets. Complete if the organization answers. (a) In (b) must equal Form 990, Part X, co. Other Liabilities. Complete if the organization answers. (a) Description of liability. Ome taxes. VE FINANCIAL INSTRUMENT	I. (B) line 15.)		(b) Book va	lue
Part IX 1) 2) 3) 4) 5) 3) 7) btal. (Column Part X.) Federal Inco) DERIVATIV) CUSTODIA) REAL EST	Other Assets. Complete if the organization answers. (a) In (b) must equal Form 990, Part X, co. Other Liabilities. Complete if the organization answers. (a) Description of liability. Ome taxes. VE FINANCIAL INSTRUMENT. AL LIABILITIES.	I. (B) line 15.)		(b) Book va	lue
Part IX 1) 2) 3) 4) 5) 3) Otal. (Column Part X.) Federal Inco) DERIVATIV) CUSTODIA) REAL EST.	Other Assets. Complete if the organization answers. (a) In (b) must equal Form 990, Part X, co. Other Liabilities. Complete if the organization answers. (a) Description of liability. Ome taxes. VE FINANCIAL INSTRUMENT. AL LIABILITIES.	I. (B) line 15.)		(b) Book va	lue
Part IX 1) 2) 3) 4) 5) 6) 7) 3) Part X Part X) Federal Inco) DERIVATIV) CUSTODI/) REAL EST.)	Other Assets. Complete if the organization answers. (a) In (b) must equal Form 990, Part X, co. Other Liabilities. Complete if the organization answers. (a) Description of liability. Ome taxes. VE FINANCIAL INSTRUMENT. AL LIABILITIES.	I. (B) line 15.)		(b) Book va	lue
Part IX 1) 2) 3) 4) 5) 3) 7) 3) Part X) Federal Incc) DERIVATIV) CUSTODIA) REAL EST.)	Other Assets. Complete if the organization answers. (a) In (b) must equal Form 990, Part X, co. Other Liabilities. Complete if the organization answers. (a) Description of liability. Ome taxes. VE FINANCIAL INSTRUMENT. AL LIABILITIES.	I. (B) line 15.)		(b) Book va	lue
Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) otal. (Column Part X) Federal Inco) DERIVATI) CUSTODIA) REAL EST.)	Other Assets. Complete if the organization answers. (a) In (b) must equal Form 990, Part X, co. Other Liabilities. Complete if the organization answers. (a) Description of liability. Ome taxes. VE FINANCIAL INSTRUMENT. AL LIABILITIES.	I. (B) line 15.)		(b) Book va	lue
Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) otal. (Column Part X 1) Federal Inco 2) DERIVATI 3) CUSTODIA 1) REAL EST. 1) 1)	Other Assets. Complete if the organization answers. (a) In (b) must equal Form 990, Part X, co. Other Liabilities. Complete if the organization answers. (a) Description of liability. Ome taxes. VE FINANCIAL INSTRUMENT. AL LIABILITIES.	I. (B) line 15.)		(b) Book va	lue

Part XIII

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

Return Reference - Identifier	Explanation	
SCHEDULE D, PART XI, LINE 2(D) - OTHER REVENUES IN AUDITED FINANCIAL STATEMENTS NOT IN FORM 990	CHANGE IN FAIR VALUE OF DERIVATIVE FINANCIAL INSTRUMENT SPECIAL EVENT EXPENES COST OF GOODS SOLD	(b) Amount 276,584 20,188 36,231

Part XIII

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

!

Return Reference - Identifier	Explanation	
SCHEDULE D, PART XII, LINE 4(B) - OTHER EXPENSES		

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

OMB No. 1545-0047

Department of the Treasury internal Revenue Service ➤ Attach to Form 990 or Form 990-EZ.

Name of the organization

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

THE	YOUNG MEN'S CHRISTIAN ASSOCI	ATION OF COEA	TED LOURS	/II		Employer identit	ication number
	Fundraising Activities	Complete if the	TER LOUIS	/ILLE	1.85 5 11		
Pa	Fundraising Activities Form 990-EZ filers are	not required to	complete	ation ansi	wered "Yes" on I	Form 990, Part TV	line 1/.
1	Indicate whether the organization	or reised funds	through an	unis part.	and a self-date of		
а	☐ Mail solicitations	an raised fulles i	urrough any	Y OF THE TOIL	owing activities, C	heck all that apply.	
ь	and a second sec	200	e L	_ Solicitat	ion of non-govern	ment grants	
c	Phone solicitations	110			ion of government	grants	
d	In-person solicitations		g L] Special	fundraising events		
2a	Did the organization have a sumi	Mana and a 1					
	Gaine and a Mil	cen or oral agre	ement with	any indivi	dual (including offi	cers, directors, trus	stees
b	or key employees listed in Form	1980, Part VIII O	entity in c	onnection v	with professional f	undraising services	? 🗌 Yes 🔲 No
-	If "Yes," list the ten highest paid compensated at least \$5,000 by	individuals or e	entities (fun	draisers) p	ursuant to agreem	ents under which ti	ne fundraiser is to be
	our portocion at isast \$5,000 D	r the organizatio	rı.				
	(i) Name and address of individual	****	(iii) Did fun	draiser have	(1-2)	(v) Amount paid to	(vi) Amount paid to
	or entity (fundralser)	(îi) Activity	custody o	r control of Jutions?	(Iv) Gross receipts from activity	(or retained by) fundraiser listed in	(or retained by)
					<u> </u>	col. (i)	organization
			Yes	No			
1							1
	<u> </u>						
2							
3							
4							
5							
6							
7							
8							
			ĺ				
9							
		ĺ		ļ			
10							
Total	List all states in which the organ				ļ		
3	List all states in which the organ	ization is registe	ered or lice	nsed to so	licit contributions	or has been notifie	d it is avarant from
	registration or licensing.	•				or ride boort flottine	a it is exempt from
	, , , , , , , , , , , , , , , , , , , ,	. ,		*			

				*************			, na 1227, na 222 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
	**************************************				*****************		
	- # # # # # # # # # # # # # # # # # # #						**************************************
	k u nuar 7 km sa awa kuna s r					\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
	r				a		
	pp = 축했 위위단단도 및 하는 녹스스는 나상 는용도로로스를 드용한 때문에 등 및 모임단단단도 등 누는는	**********			2		· 44 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

							&&&&&
	· · · · · · · · · · · · · · · · · · ·						

Schedu	lle G (Form 990 or 990-EZ) 2015
11 12	Does the organization conduct gaming activities with nonmembers?
13 a	Indicate the percentage of gaming activity conducted in: The organization's facility
b	An outside facility
14	Enter the name and address of the person who prepares the organization's gaming/special events books and
	records:
	Name >
	Address ►
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the
c	amount of gaming revenue retained by the third party ► \$ If "Yes," enter name and address of the third party:
	Name ►
	Address►
16	Gaming manager Information:
	Name ►
	Gaming manager compensation ► \$
	Description of services provided ►
	□ Director/officer □ Employee □ Independent contractor
17 a	Mandatory distributions: Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year > \$
gă n	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).
SEE N	EXT PAGE
~~~~~	

Schedule G (Form 990 or 990-EZ) 2015

SCHEDULEI (Form 990) Department of the Treasury Internal Revenue Service Name of the organization

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

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

► Attach to Form 990, Information about Schedule I (Form 990) and its instructions is at www.lrs.gov/form990.

OMB No. 1545-0047	OMB No. 1545-0047	2015	Open to Public Inspection
-------------------	-------------------	------	------------------------------

Employer identification number

THE YOU	THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER LOUISVILLE	OCIATION OF GRE	ATER LOUISVILLE				-	Enjuoyer Identification number
Part	General Information on Grants and Assistance	on Grants and	l Assistance					
Š \$ ►	Does the organization maintain records to substantiate the an the selection criteria used to award the grants or assistance?	ain records to sub award the grants	stantiate the amou or assistance?	int of the grants or	r assistance, the c	grantees' eligibility f	le amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	
2 De	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States,	nzation's procedu	res for monitoring	the use of grant fu	inds in the United	States.		Kyes No
Lear	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization ans 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	ssistance to Do	mestic Organiz that received m	ations and Dorr ore than \$5,000.	nestic Governm Part II can be d	nents. Complete i uplicated if additi	f the organization	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.
1 (a) Nar	<ul> <li>(a) Name and address of organization or government</li> </ul>	(p) EIN	(c) IRC section If applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal,	(g) Description of	(h) Purpose of grant
Ξ						(Jeung		
8								
(S)								
(4)								
( <u>D</u>								
(9)								
E								
(8)								
(6)								
(10)								
(11)				- Andrews				
(12)								
3 CE	Enter total number of section 501 (o)(3) and government organizat Enter total number of other organizations listed in the line 1 table	501 (c)(3) and gov	emment organizati	ganizations listed in the line 1 table	ne 1 table			<b>A</b> .
or Paperv	or Paperwork Reduction Act Notice, see the instructions for Form 890.	see the instructions	for Form 990.	•		Cat. No. 50055P		Schedule ( Porm son) (2015)

P		

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

Return Reference - Identifier	Explanation
MONITORING USE OF GRANT FUNDS.	THE CRITERIA USED FOR THE SCHOLARSHIP PROGRAM ARE: RECIPIENT MUST HAVE A MINIMUM GPA OF 2.5. MUST BE A HIGH SCHOOL GRADUATE. MUST ATTEND 80% OF CLUSTER ACTIVITIES, AND PREPARE AN ESSAY ON WHAT BLACK ACHIEVERS MEANT TO THEM. THE PACKET IS SUBMITTED TO THE COMMITTEE WHICH IS MADE UP OF VOLUNTEERS. RECIPIENT IS INTERVIEWED BY THE COMMITTEE AND SELECTION IS PERFORMED AFTER THE INTERVIEW PROCESS. RECIPIENT IS REQUIRED TO SUBMIT COLLEGE TRANSCRIPTS FOR TRACKING PURPOSES. THANK YOU LETTERS MUST BE WRITTEN BY THE RECIPIENT AND PROVIDED TO THE CORPORATION PROVIDING THE SCHOLARSHIP.

......

Schedule J (Form 990) 2015

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

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

Note: The sum of columns (B)(I)-(ii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line

	(B) Breakdown of W-2 and/or 1099-MISC compensation		(B) Breakdown o	(B) Breakdown of W-2 and/or 1099-MISC compensation	C compensation	it vii, section A, line	a, applicable columi	n (D) and (E) amounts	for that individual,
PRESIDENT TAYER 60 282,007 0 0 0 22,530 8,830 8,04367  DAVID W. HEARD  BECKNOWNE PRESIDENT OF OPERATIONS (0) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(III) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nortaxable benefits		(F) Compensation in column (B) reported as deferred on prior Form 990
Mathematical Control of Head	WER	e E	263,007		0 0	32,530	8,830	304,367	0
PECKY CAMMIN   10   158,404   0   0   18,906   1,707   180,220   1,707   180,220   1,707   1,90,220   1,707   1,90,220   1,707   1,90,220   1,707   1,90,220   1,707   1,90,220   1,707   1,90,220   1,707   1,90,220   1,707   1,90,220   1,707   1,90,220   1,707   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220   1,90,220	T OF OPERATIONS	<b>e</b> .E	183,716		000	22,298	6,095	212,109	0
	IT OF OPERATIONS	ë §	156,494		0	18,965	4,767	180,226	0 0
		<b>E</b>			0	0	0	0	0
		€				-			
		E E							
		€ €							
		: 6							
		3		_		_			
		© 5							
		) E							
		E					-		
		8							
		\$. <b>\$</b> .							
		<u> </u>						_	
		E				_			
		8 8							
		E							
		(0)							
		E						_	

275 270

Schedule J (Form 990) 2015

SCHEDULEK (Form 990)

Supplemental Information on Tax-Exempt Bonds

201

OMB No. 1545-0047

Open to Public Inspection

(f) Pooled financing

Yes No Yes No Yes No Employer Identification number (g) Defeased (h) On behalf of issuer INDUSTRIAL REV. BOND WITH PNC 8,000,000 BANK | INDUSTRIAL REV. BOND WITH PNG 4,000,000 BANK INDUSTRIAL REV. BOND WITH PNC BANK (f) Description of purpose Complete if the organization answered "Yes" on Form 980, 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. SEE STATEMENT) 10,000,000 4,119,143 (e) Issue price (d) Date issued 05/22/2015 12/14/2007 12/14/2007 12/16/2011 002570634 (c) CUSIP# 603427647 603427624 605277551 THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER LOUISVILLE (b) Issuer EIN 61-0662393 61-0662393 61-0197400 61-0662393 CITY OF LYNDON CULTURAL AND RECREATIONAL DEVELOPMENT REVENUE DEPARTMENT CITY OF LYNDON CULTURAL AND EDUCATIONAL REVENUE DEPARTMENT RECREATIONAL REVENUE REFUNDING CITY OF LYNDON CULTURAL AND EDUCATIONAL REVENUE DEPARTMENT (a) Issuer name **Bond Issues** Part Proceeds Name of the organization Department of the Treasury Internal Revenue Service BOND Part

O

Ω

							i	
1 Amount of hands agained	4			<b>~</b>		O		ا ا
	3	8,000,000		4,000,000	     	10.000,000		
		o						7
3 Total proceeds of issue		000		2		٥		0
4 Gross proceeds in reserve funds		0,000,000		4,000,000		10,000,000		4,119,143
5 Capitalized interest from proceeds		5		0		0		0
6 Proceeds in refunding account		0		0		28,582		C
7 Issiance costs from property		0		0		0		0
8 Credit enhancement from proceeds		0		0		0	   	0
9 Working capital expenditures to a second		٥		0		0		0
1		0		0		C		4 110 1/13
	8	8,000,000		4,000,000		10.000.000		
Culled spellit proceeds		0		C				
				0		>		٥
13 Year of substantial completion		7		2		0		0
		1888		2008		2013		2015
14 Ware the bonds is all and so part of a support with the	Yes	No	Yes	No	Yes	Š	Yes	2
ı		>		^		,		
-		,		,				
ł	,	$\uparrow$	,		Ĭ,	•		>
17 Does the organization maintain adequate books and records to support the	-		•		>		,	
final allocation of proceeds?	`		•	-	,		-	
Part III Private Business Use	•		•		,		,	
The state of the s								
We the commentation and the second	Ą		8		O			
which commend a partner in a partnership, or a member of an LLC,	Yes	No	Yes	Q.	Yer	1		

Schedule K (Form 990) 2015

Cat. No. 50193E

ž

**%** 

ŝ

Yes

ş

¥es

Are there any lease arrangements that may result in private business use of

which owned property financed by tax-exempt bonds?

For Paperwork Reduction Act Notice, see the Instructions for Form 890.

bond-financed property?. .

(Form 990) 2015	Arbitrage (Continued)
Schedule K	Partin

Paralle N (rom 860) 2015 Paralle N Arbitrage (Continued)								Page 3
		A		œ				
	Yes	No	Yes	å	Yes	S S	X	2
b Name of provider		<b>,</b>		>		,		\$ \
_		>		,		,		
Were any gross proceeds invested beyond an available temporary period?		>			-	•  -		
nas the organization established written procedures to monitor the requirements of section 148?								>
ke Col		<b>&gt;</b>		`		>		,
	٧			9		C		
Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified.	Yes	Š	Yes	N _O	Yes	No	Yes	⁸
2 5 44 1		``			· 			
For VI supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions)	onses to o	destions of	on Sched	ule K (see i	nstruction	) (S		>
- Constitution - Cons								
						S	Schedule K (Form 990) 2015	rm 990) 2015
							•	

Ç	Ų
•	ø
3	9
ċ	Ľ

Schedule K (Form 990) 2015  Rant III Private Business Use (Continued)			:				į	Page 2
		A		В		O		0
3a Are there any management or service contracts that may result in private	Yes	No	Yes	No	Yes	No	Yes	No
		<b>&gt;</b>		`>		`		>
o ii res to line sa, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c Are there any research agreements that may result in private business use of bond-financed property?		`		`		`		\
d if "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government. ▶		0.00 %		% 00.0		70 UU 07		2000
		% 00:0		% 00.0		% 00 0		% 00 0
		0.00 %		0.00		% 00 0		% 00 0
- !		>		>		,		
8a Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501 (c)(3) organization since the bonds were issued?		>		,				
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of		9		1				
<u>R</u> g		8		ę.		ę.		8
9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1 141-12 and 1 145-22		,						
Parciv Arbitrage		<b>,</b>		>		>		<b>&gt;</b>
	A		æ		S			
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	2	Yes	S.	Yes	No	Yes	2
2 If "No" to line 1, did the following apply?		>		>		`>		>
a Rebate not due yet?		>		,		1,		
b Exception to rebate?	>		,		>		,	-
He Word to line on the state of		>		>		`		>
performed computation was								
ı	>		>		>		,	
4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?	>		,		,			
ľ	REPUBLIC BAN	KAND TRUST	REPUBLIC BAN	REPUBLIC BANK AND TRUST REPUBLIC BANK AND TRUST REPUBLIC BANK AND TRUST	REPUBLIC BANK	KAND TRUST R	EPUBLIC BAN	REPUBLIC BANK AND TRUST
	7.5		10.5		15.5	2	20.0	
Was the hedge superintegrated?		,		<b>,</b>		,		>
אמס חום וופתחם ופווווו וקופת		<b>\</b>		`		^		*
						Ö	chedule K (Fo	Schedule K (Form 990) 2015

12		98	-	т
	MCI	,,,,,	ш	и.

Supplemental information. Supplemental Information Complete this part to provide additional Information for responses to questions on Schedule K (see Instructions).

Return Reference - Identifier	Explanation
SCHEDULE K, PART I - BOND ISSUES	(A) ISSUER NAME: CITY OF LYNDON CULTURAL AND EDUCATIONAL REVENUE DEPARTMENT (F) DESCRIPTION OF PURPOSE: INDUSTRIAL REV. BOND WITH PNC BANK
	(A) ISSUER NAME: CITY OF LYNDON CULTURAL AND EDUCATIONAL REVENUE DEPARTMENT (F) DESCRIPTION OF PURPOSE: INDUSTRIAL REV. BOND WITH PNC BANK
	(A) ISSUER NAME: CITY OF LYNDON CULTURAL AND RECREATIONAL DEVELOPMENT REVENUE DEPARTMENT (F) DESCRIPTION OF PURPOSE: INDUSTRIAL REV. BOND WITH PNC BANK
SCHEDULE K, PART I, COLUMN (F) - DESCRIPTION OF PURPOSE ISSUER NAME: RECREATIONAL REFUNDING REVENUE BOND	RECREATIONAL REVENUE REFUNDING BOND WITH REPUBLIC BANK AND TRUST
SCHEDULE K, PART I, COLUMN (F) - DESCRIPTION OF PURPOSE ISSUER NAME: RECREATIONAL REFUNDING REVENUE BOND	RECREATIONAL REFUNDING REVENUE BOND WITH REPUBLIC BANK AND TRUST
SCHEDULE K, PART I, COLUMN (F) - DESCRIPTION OF PURPOSE ISSUER NAME: RECREATIONAL REFUNDING REVENUE BOND	RECREATIONAL REFUNDING REVENUE BOND WITH REPUBLIC BANK AND TRUST
SCHEDULE K, PART I, COLUMN (F) - DESCRIPTION OF PURPOSE ISSUER NAME: RECREATIONAL REVENUE REFUNDING BOND	RECREATIONAL REFUNDING REVENUE BOND WITH REPUBLIC BANK AND TRUST

HANDY TO XI KING III DEL AND HERE & TO SEE

Return Reference - Identifier	Explanation
FORM 990, PART III LINE 4C.	SPIRITUAL ACTIVITIES AND LIFE SKILLS LEADNING SESSIONS THAT ANALYSIS AND LIFE SKILLS LIFE
PROGRAM SERVICE DESCRIPTION	SPIRITUAL ACTIVITIES, AND LIFE SKILLS LEARNING SESSIONS THAT AIM AT HEALING AND RE-UNITING FAMILIES. STREET OUTREACH AND PROGRAMS DIRECTED TOWARD CHILDREN OF PRISONERS -YNOW (YMCA'S NEW OUTLOOK WITHIN) PROVIDE MENTORS AND PEER EDUCATION GROUPS THAT STRESS PROBLEM PREVENTION AND PERSONAL FITNESS TO FAMILIES IN CRISIS. YMCA SAFE PLACE DOES NOT CHARGE A FEE FOR ANY OF THE SERVICES THAT ARE PROVIDED TO YOUTH FROM THE GREATER LOUISVILLE AREA, OR FROM ACROSS THE STATE OR NATION AS KIDS MAY RUN ACROSS STATE BORDERS. EXPENSES OF \$1.7 MILLION ANNUALLY ARE OFFERED AS A FORM OF FINANCIAL ASSISTANCE TO ASSIST THESE TROUBLED YOUTH SINCE YMCA SAFE PLACE IS THE ONLY 24 HOUR FREE, NON SYSTEM CRISIS SHELTER FOR TEENS AND THE ONLY FREE CARE-BASED INTENSIVE CASE MANAGEMENT AND FAMILY MEDIATION PROGRAM FOR TEEN AND THEIR PARENTS IN THIS COMMUNITY. RESULTS ARE NOTEWORTHY AS 91% OF YOUTH WHO STAY AT SAFE PLACE SHELTER REPORT LEARNING AT LEAST ONE LIFE SKILL TO HELP THEM BE SUCCESSFUL IN FAMILY REUNIFICATION (428 YOUTH SURVEYED) WHILE 90% OF YOUTH WHO STAY AT SHELTER HOUSE REPORT THEY ARE BETTER EQUIPPED TO TAKE CONTROL OF THEIR SAFETY AND SECURITY AND IMPROVE THEIR HOME SITUATION.
	THE YMCA IS A WORLDWIDE MOVEMENT, INTERNATIONAL INVOLVEMENT OF TEENS HELP PROMOTE CROSS CULTURAL UNDERSTANDING THROUGH EDUCATIONAL DEVELOPMENT, OVERSEAS OPPORTUNITIES AND LEADERSHIP TRAINING WITH COOPERATION WITH YMCA'S IN A POTENTIAL OF OVER 130 COUNTRIES, LOUISVILLE YOUTH HAVE ENCOUNTERED SPECIFIC EXPERIENCES IN GERMANY AND INDIA, PARTICIPATING YOUTH RAISE SOME OF THEIR FINANCIAL SUPPORT THROUGH VARIOUS PROJECTS AND THE YMCA PROVIDES SCHOLARSHIPS AND ADULT SUPERVISION TO MAKE UP THE DIFFERENCE FOR THE OVERSEAS EXPERIENCE.
(i)	IN 2015 WE ENGAGED NEARLY 168,000 YMCA MEMBERS, PARTICIPANTS, VOLUNTEERS AND DONORS IN ACTIVITIES THAT STRENGTHEN OUR COMMUNITY AND PAVE THE WAY FOR FUTURE GENERATIONS TO THRIVE (Y-USA ANNUAL CONSTITUENCY REPORT).
FORM 990, PART VI, LINE 4 - SIGNIFICANT CHANGES TO ORGANIZATIONAL DOCUMENTS	THE BYLAWS WERE AMENDED NOVEMBER 23, 2015 WITH AN EFFECTIVE DATE OF JANUARY 1, 2016 FOR THE MERGER OF THE YMCA OF GREATER LOUISVILLE WITH THE YMCA OF SOUTHERN INDIANA.
FORM 990, PART VI, LINE 11B - REVIEW OF FORM 990 BY GOVERNING BODY	FORM IS EMAILED (OR HAND DELIVERED) TO BOARD AND ASKED FOR ANY QUESTIONS OR CLARIFICATIONS BY DUE DATE. HAVING DUE DATE PASSED WITH NO QUESTIONS OR CONCERNS, FORM 990 IS FILED.
FORM 990, PART VI, LINE 12C - CONFLICT OF INTEREST POLICY	THE BOARD MINUTES DETAILS WHEN A MEMBER IS ABSTAINING FROM VOTING DUE TO A CONFLICT OF INTEREST.
FORM 990, PART VI, LINE 15A - PROCESS TO ESTABLISH COMPENSATION OF TOP MANAGEMENT OFFICIAL	THE EXECUTIVE COMMITTEE (EC) OF THE ASSOCIATION BOARD SERVES AS THE REVIEW AND COMPENSATION COMMITTEE. THERE IS NO INDEPENDENT COMPENSATION CONSULTANT OTHER THAN WHAT THE YMCA NORTH AMERICAN NETWORK (YNAN) USES AND OUR EC DOES NOT USE THAT RESOURCE AT ANY SIGNIFICANT LEVEL HERE. THE EC IS PROVIDED WITH COMPARATIVE DATA FROM THE YNAN INCLUDING THEIR INDEPENDENT CONSULTANT REVIEW AND THE SOUTH METRO GROUP AND ANY LOCAL COMPARATIVE STUDIES PURCHASED THROUGH LOCAL MEANS. THE COMMITTEE THEN FILTERS THROUGH THEIR OWN EXPERIENCES FOR LOCAL BENCHMARKING. THERE IS NO WRITTEN EMPLOYMENT CONTRACT, THE CEO SERVES "AT-WILL". MODIFICATIONS TO COMPENSATION TO CEO ARE ACCOMPANIED BY DOCUMENTATION FROM BOARD CHAIR AND PASSED TO PERSONNEL FILES. THE EC ALSO REVIEWS SALARIES AND MAKES RECOMMENDED MERITS FOR SR. MGMT TEAM. THE EC REVIEWS AN EXECUTIVE LETTER FROM THE CEO AND USES A 360 DEGREE TOOL COMPILED BY THE BOARD CHAIR. THE EC MAKES THE FINAL REVIEW AND COMPENSATION DECISIONS IN "EXECUTIVE SESSION" ABSENT OF ANY STAFF. THE BOARD CHAIR REVIEWS THE RESULTS OF THE EVALUATION WITH THE CEO.
COMPENSATION OF OTHER EMPLOYEES	THE EXECUTIVE COMMITTEE (EC) OF THE ASSOCIATION BOARD SERVES AS THE REVIEW AND COMPENSATION COMMITTEE. THERE IS NO INDEPENDENT COMPENSATION CONSULTANT OTHER THAN WHAT THE YMCA NORTH AMERICAN NETWORK (YNAN) USES AND OUR EC DOES NOT USE THAT RESOURCE AT ANY SIGNIFICANT LEVEL HERE. THE EC IS PROVIDED WITH COMPARATIVE DATA FROM THE YNAN INCLUDING THEIR INDEPENDENT CONSULTANT REVIEW AND THE SOUTH METRO GROUP AND ANY LOCAL COMPARATIVE STUDIES PURCHASED THROUGH LOCAL MEANS. THE COMMITTEE THEN FILTERS THROUGH THEIR OWN EXPERIENCES FOR LOCAL BENCHMARKING. THERE IS NO WRITTEN EMPLOYMENT CONTRACT, THE CEO SERVES "AT-WILL", MODIFICATIONS TO COMPENSATION TO CEO ARE ACCOMPANIED BY DOCUMENTATION FROM BOARD CHAIR AND PASSED TO PERSONNEL FILES. THE EC ALSO REVIEWS SALARIES AND MAKES RECOMMENDED MERITS FOR SR. MGMT TEAM. THE EC REVIEWS AN EXECUTIVE LETTER FROM THE CEO AND USES A 360 DEGREE TOOL COMPILED BY THE BOARD CHAIR. THE EC MAKES THE FINAL REVIEW AND COMPENSATION DECISIONS IN "EXECUTIVE SESSION" ABSENT OF ANY STAFF. THE BOARD CHAIR REVIEWS THE RESULTS OF THE EVALUATION WITH THE CEO.
FORM 990, PART VI, LINE 19 - REQUIRED DOCUMENTS AVAILABLE TO THE PUBLIC	THE GOVERNING DOCUMENTS OF THE ORGANIZATION AND THE CONFLICT OF INTEREST POLICY IS AVAILABLE TO THE PUBLIC UPON REQUEST. THE ARTICLES OF INCORPORATION ARE ALSO AVAILABLE THROUGH THE SECRETARY OF STATE'S WEBSITE. THE ANNUAL FINANCIAL STATEMENT AUDIT AND FORM 990 AND 990T ARE PROVIDED TO THE PUBLIC THROUGH THE ORGANIZATION'S WEBSITE.
FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS OR FUND BALANCES	(a) Description (b) Amount  CHANGE IN FAIR VALUE OF DERIVATIVE FINANCIAL INSTRUEMENT - 276,584

(k) Percentage ownership (i) Section 512(b)(13) controlled entity? 2 Part IV, Yes Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year. (i) General or managing partner? Yes No Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year. (h) Percentage ownership Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) (g) Share of end-of-year assets (h)
Disproportionate
altocations? Ŷ ·(f) Share of total Income Yes (g)
Share of end-of-(e)
Type of entity
(C corp, S corp, or trust) (f) Share of total Income (d)
Direct controlling
entity (e)
Predominant
income (related,
unrelated,
excluded from
tax under
sections 512-514) (c)
Legal domicite
(state or foreign country) (d)
(Direct controlling entity (b) Primary activity (c)
Legal
domicile
(state or
foreign
country) (b) Primary activity (a) Name, address, and EIN of related organization (a) Name, address, and EIN of related organization Part IV Partill  $\mathbf{\epsilon}$ Ñ <u>න</u> 妾 9 <u>©</u>  $\mathbf{\epsilon}$ £ Ø ල ₹  $\epsilon$ 

Schedule R (Form 990) 2015

# Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, Ilne 37. Part VI

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

	Primary activity	Legal domicile (state or foreign	Predominant Income (related,	Are all partners section	Share of total income	(g) Share of end-of-year	(h) Disproportionate allocations?	ta Code V—UBI	General or managing	
		country)	unrelated, excluded from tax under sections 512-514)	organizations?		assets Seis	Yes	of Schedule K-1 (Form 1065)		
(1)						t				
(2)										
(2)										
(4)										
(9)										
(9)										1
(3)										
(8)										1
(6)										1
(10)										1
(11)										1
(12)					4					1
(13)					,					1
(14)										ł
(15)										
(16)										

1

(Rev. December 2014)

• Form 1099-S (proceeds from real estate transactions)

Form 1099-K (merchant card and third party natwork transactions)

# Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not

Interna	send to the IRS.						
	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.						
	YOUNG MEN'S	OUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER LOUISVILLE, THE					
તાં	2 Business name/disregarded entity name, if different from above						
page	YMCA OF GREATER LOUISVILLE, INC. (YMCA Safe Place Services)						
ם	3 Check appropriate box for federal tax classification; check only one of the following seven boxes:  4 Exemptions (codes apply only to						
5	I □ locitate estado e e e estado e e e e e e e e e e e e e e e e e e e				l certain entit	etoko entitles, not kralivirkusis; see	
8 S	single-member LLC					on page 3):	
₹ ¥	Limited liability company. Enter the tax classification (C=C cerporation, S=S corporation, P=partn					Exempt payee code (if any)	
Ö E	Note. For a sin	ngle-mamber LLC that is disregarded, do not check LLC; cl cation of the single-mamber owner.	heck the appropriate box in	the line above for	Exemption from FATCA reporting code (if any)		
Print or type Instructions	Other (see inst					) ints maintainad outside the U.S.)	
F (2)		r. street, and apt. or suite no.)		Requester's name and addre			
Print or type Specific instructions on	545 2nd St.			indocorn a ratific e	aid sociesa (	optionen	
Ø	6 City, state, and Z	IP code					
See	Louisville, KY	40202					
	Company of the Manager of the Control of the Contro	ber(s) here (optional)					
		to the second					
Par	Rart II Taxpayer Identification Number (TIN)						
		propriate box. The TIN provided must match the name	no obton oo llaa 1 ta awa	Social soc	curity numbe		
backu	p withholding. For	individuals, this is generally your social security nuc	pher (SSN), However, for	a T	only manage	<u>-                                    </u>	
reside	nt alien, sole propr	rietor, or digregarded entity, see the Part Linstruction	ns on page 3. For other		-	-	
TIN or	e, it is your employ i page 3,	er identification number (EIN). If you do not have a r	number, see How to get				
		more than one name, see the instructions for line 1	Canadala alamatan da	Or Employee	klentificatio	number	
guideli	nes on whose nun	nber to enter.	allo the chart on page 4	TOP SIMPLEYS!			
(Ang	Certific	ation	<del></del>	<del></del>			
- Belleview and	penalties of perjur						
	1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and						
	2. I am not subject to backup withholding because: (a) I am exempt from backup withholding or (b) I have not been notified by the Internal Revenue						
Ser	Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am						
no longer subject to backup withholding; and							
3. I am a U.S. citizen or other U.S. person (defined below); and							
	4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.						
Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding							
because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage							
Interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IFA), and							
generally, payments other than interest and dividends, you are not rejuited to sign the certification, but you must provide your correct TIN. See the instructions on page 3.							
Sign	Signature of						
Here	U.S. person >	The state of the s	Date	Septer	nber 15	, 2016	
Oor.	aval luatura	tions	Form 1098 (home mort)	naga interesti 100a	E faturiant to	an internal 1050 T	
	eral Instruct		(Inition)	ыда инспезу, тово:	-E (Stodelik ic	animitelest, luxe-i	
Section references are to the internal Revenue Code unless otherwise noted.			Form 1099-C (canceled debt)				
Future developments, information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.			<ul> <li>Form 1099-A (acquisition or abandonment of secured property)</li> </ul>				
Purpose of Form			Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TiN.				
Purpose or Porm  An individual or entity (Form W-9 requester) who is required to file an information  If you do not return Form W-9 to the requester with a TIN, you might be subject.							
return with the IRS must obtain your correct taxpayer identification number (TIM)			to backup withholding. See What is backup withholding? on page 2.				
		curity number (SSN), İndividual taxpayer identification ayer klentification number (ATIN), or employer	By signing the littled-out form, you:				
identific	ation number (EIN), to	o report on an information return the amount paid to	<ol> <li>Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),</li> </ol>				
you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:  2. Cartify that you are not subject to backup withhold					p withholding	), or	
• Form	1099-INT (interest ear	rned or paid)	3. Claim exemption from				
_		including those from stocks or mutual funds)	any partnership income in	applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the			
		ypes of Income, prizes, awards, or gross proceeds)	withholding tax on foreign	withholding tax on foreign partners' share of effectively connected income, and			
• Form 'brokers)		ual fund sales and certain other transactions by	4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See What is FATCA reporting? on				

4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See What is FATCA reporting? on page 2 for further information.

Department of State

# Office of Secretary of State

GEORGE GLENN HATCHER, SECRETARY

# CERTIFICATE OF AMENDMENT

I, GEORGE GLENN HATCHER, Secretary of State, do hereby certify that the triplicate originals of the articles of amendment of

The Young Men's Christian Association of Louisville, Kentucky changing name to:

THE YOUNG MIN'S CHRISTIAN ASSOCIATION OF LOUISVILLE AND DEFFERSON COUNTY KENTUCKY.

delivered to me are found to be duly signed and acknowledged according to law; that all taxes, fees and charges have been paid; and one original copy is filed and recorded in this office.

This certificate with two original articles of amendment indorsed with the fact and time of recording in this office have been returned to the corporation. The amendment, certifying the time and manner of the adoption thereof, statement of the purposes of said amendment and the changes to be effected, signed and acknowledged according to law by the proper officials of said corporation, and the issuance of this certificate, is evidence of the fact that the above named corporation articles have been amended.

IN HTTNESS WHEREOF, I have hereunto set my hand and affixed my

******** AF 51.42)

Department of State



# Office of Secretary of State

THELMA L. STOVALL, SECRETARY

ARTICLES OF AMENDMENT

I, THELMA L. STOVALL, Secretary of State of the Commonwealth of Kentucky, do hereby certify that Articles of Incorporation of

THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF LOUISVILLE AND JEFFERSON COUNTY KENTUCKY, Louisville, Kentucky changing name to:
THE YOUNG MENS CHRISTIAN ASSOCIATION OF GREATER LOUISVILLE,

have been amended pursuant to Articles of Amendment, duly signed and acknowledged according to law, this day filed in my office by said corporation, and that all taxes, fees and charges payable upon the filing of said Articles of Amendment have been paid.

Witness my official signature this 27th day

SECRETARY OF STATE

of December, 19 66

Luma Secretary of State

Laures M. Marris

Assistant Secretary of State

# THE YOUNG HIMS CHTICHYAN ALCOHATION CF LOUISVILLE AND JEFFERSCH COUNTY, KENTUCKY

# APPRICIPE OF STRUCTURE

23

# ARTICVES OF MUCCHECULATION

The undersigned being more than two-thirds of the directors of The Young Mens Christian Association of Lauisville and Jefferson County, Kentucky, a comparation ereated by a openful set of the Camerel Associaty of Mentucky on April 3, 1978, howeby certify that pursuent to the provisions of Section 273.050 of the Mentucky Revised Statutes, the Charter as amended of said comparation is hereby further amended as follows:

(1) That Article 1 be arended to read as follows:

# MARKICIN 1.

### no B

The name of the corporation shall be THE YOUNG MEHS CHRISTIAN ASSOCIATION OF GREATUR LOUISVILLE".

WITNESS our signatures this 28th day of November, 1966.

Millai Kalaid Praise	Tenn Hence
J. Calvin Hiel	Millia Mifaire
fan frame	- Yilmir . U. Celibrar
Yand CRESTERY	Oscar 19, St. 10
Newy Shariot	Lacron Marion
Garrin W. Guth	1 1100 11
	. · · · · · · · · · · · · · · · · · · ·

Doyce F. Sautin John Dinn/ Clifford Chital In Dinn/ Etalilaerunan Minter Warner Anthur Erawa de John la Barra

ORIGINAL COPY

Jec 27 1966

SECONDE LA STATE OF LOGICALINATION OF MORE

, V

+

STATE OF KENTUCKY SS: COUNTY OF JEFFERSON )

I, a Notary Public, in and for the state and county aforesaid, hereby cortify that the Foregoing Articles of Assendment to Articles of Incorporation were this day produced to me in cald state and county by William Kendrick Ewing, Les K. Broceker, J. Calvin Rieb, Dave Laurence, Paul Ahlstedt, Dillman A. Rash, Henry Scheirich, Lauren C. Guth, James H. Fence, Villiam Haybourn II, William M. Marvin, James M. Caldwell, John F. Rabbitt, Oscar G. Stoll, Larry D. Jones, Franklin F. Catario, Jr., J. Fryor Wise, Boyce F. Martin, Jr., Clifford C. Vetter, Jr., R. A. Silverman, Arthur P. Evans, Jr., Gayle C. Bush, H. R. Peterson, L. M. Benn, Marace H. Catinna III, and John W. Barr III, Directors, who selversladged the same to be the set and deed of each who acknowledged the some to be the act and deed of each of them and of said corporation.

WITHESS my signature this 23th day of November, 1966.

My commission expires: April.2, 1969.

Motory Fublic, Jefferson Co., Ky.

This instrument prepared by:

Oldham Clarke

1112 Kentucky Home Life Eldg.,

Louisville, Kentucky

JAN 23 1967

JAMES HALLAHAM, Clerk

THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF LOUISVILLE AND JEFFLESON COUNTY KENTUCKY

### AMENDED AND STEPTITUTED ARTICLES OF INCORPORATION

The undersigned, being more than two-thirds of the directors of The Young Men's Christian Association of Louis-ville Mentucky, a corporation created by a special act of the general Assembly of Mentucky on April 3, 1678, hereby cortify that pursuant to the provisions of Section 273.050 of the Mentucky Nevised Statutes, the charter, as amended, of said corporation is hereby amended by deleting the same in its cativaty and by substituting therefor the following amended and substituted Articles of Incorporation:

### ARTICLE 1

### HALFE

The name of the corporation shall be THE YOUNG FER'S CERISTIAN ASSOCIATION OF LOUISVILLE AND JEFFERSON COUNTY SENSUCIA.

### ARTICLE 2

### CORPORATE PURPOSE

The corporation shall have no capital stock and it shall serve religious, educational and charitable purposes from which no private pecuniary profit shall be derived.

The purpose of the corporation is to help people develop Christian personality and build a Christian Society, and to promote these ends through religious training, education, charitable enterprise, and such other means as may help to attain these purposes.

The corporation shall have all powers conferred upon corporations of this character by the laws of the Commonwealth

of Kontucky, and all powers not forbidden by the laws of the Commonwealth of Kentucky, including but not limited to the power to acquire by gift, purchase, or otherwise, property, real, personal or mixed, and to use and dispess of same by sale, lease, or otherwise, and it shall have the power to berrow memory and to secure the payment of same by mortgage upon any, or all of its property, or otherwise.

### ANTICLE 3

### MOISSTAND TEATORSON

The corporation shall have perpetual existence.

### AREXOLS L

### REGISTERED OFFICE AND RESIDENT AGENT

The registered office of the corporation in Kentucky is located at 231 West Broadway, Louisville, Jofferson County, Montucky. The resident agent of the corporation is Frank T. Dillon, 231 West Broadway, Louisville 2, Kentucky.

### ARTICLE 5

The management of the corporation shall be vested in a Motropolitan Board of Directors of not loss than nine nor more than twenty-seven, who shall be elected as provided for in the rules for the government and operation of the corporation. The Board shall prescribe the quilifications for membership in said rules. These rules, which may be called Constitution and by-Laws, may be adopted, repealed or amended by the Board of Directors, with the approval of two-thirds of the members of the corporation present at a mosting duly called for the purpose of considering said matter.

### ARTICLE 6

No director or officer of the corporation shall be personally liable for any debt or liability of the corporation.
WITHESS our signatures this lith day of December,

COUNTY OF JEFFERSON :

I, a Notary Public in and for the State and County aforecaid, hereby certify that the foregoing Amended and Substituted Articles of Incorporation were this day produced to me. in said State and County by Charles W. Allen, Tr., John F. Eabbitt, Oldham Clarke, William C. Embry, William G. Frederick, Hennett Hikes, Larry D. Jones, Fred A. Eratch, Dulancy Legia, David A. McGandless, Hugh L. Novin, Son V. Moe, Charles B. Price, John Ransom, Dillman A. Rash, Robert W. Rounsevell, Jr., Gradio R. Rowntree, Ralph H. Ruch, Henry J. Schoirich, Robert L. Schmitt, Wm. S. Wacker, Henry W. Wales and W. Gavin Whitsott, Directors, who admovledged the same to be the act and doed of each of thom and of said corporation.

WITNESS my signature this lith day of December,

1950.

My Commission Empires: My commission expires Capt. 27, 1.03

### YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER LOUISVILLE, INC. AND AFFILIATE

### CONSOLIDATED FINANCIAL STATEMENTS AND SUPPLEMENTARY INFORMATION

Years Ended December 31, 2015 and 2014



### Independent Auditors' Report

To the Board of Directors Young Men's Christian Association of Greater Louisville, Inc. and Affiliate Louisville, Kentucky

### Report on the Financial Statements

We have audited the accompanying consolidated financial statements of Young Men's Christian Association of Greater Louisville, Inc. (YMCA) and National Safe Place, Inc. (Affiliate) (not-for-profit organizations), which comprise the consolidated statements of financial position as of December 31, 2015 and 2014, and the related consolidated statements of activities, functional expenses and cash flows for the years then ended, and the related notes to the consolidated financial statements.

### Management's Responsibility for the Consolidated Financial Statements

Management is responsible for the preparation and fair presentation of these consolidated financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of the consolidated financial statements that are free from material misstatement, whether due to fraud or error.

### Auditors' Responsibility

Our responsibility is to express an opinion on these consolidated financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audits to obtain reasonable assurance about whether the consolidated financial statements are free of material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the consolidated financial statements. The procedures selected depend on the auditors' judgment, including the assessment of the risks of material misstatement of the consolidated financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the Organizations' preparation and fair presentation of the consolidated financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Organizations' internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the consolidated financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

### YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER LOUISVILLE, INC. AND AFFILIATE

### CONSOLIDATED STATEMENTS OF FINANCIAL POSITION

December 31, 2015 and 2014

Assets	2015	2014
Cash and cash equivalents	\$ 17.732.455	
Grants and accounts receivable	+,,.00	\$ 17,349,463
Pledges receivable	1,079,261	1,171,055
Prepaid expenses and inventories	1,714,238	1,396,237
Certificates of deposit	295,434	453,434
Investments	1,057,191	1,056,151
Property and equipment, net	4,053,403 45,410,571	4,237,868
Real estate held for others	43,410,371	46,553,523
<del>-</del>	<del></del>	3,261,554
Total assets	\$ 71,342,553	\$ 75,479,285
Liabilities and Net Assets		
Accounts payable and accrued expenses	·\$ 1,295,460	<b>.</b>
Custodial liabilities	,,	\$ 2,198,747
Debt	20,691	88,025
Capital lease obligations	18,927,286	19,422,722
Real estate held for others	695,479	621,631
Derivative financial instruments	276,364	3,261,554 870,264
Total liabilities	21,215,280	26,462,943
Net Assets		
Unrestricted:		
Board designated reserves		
Board designated endowment	17,915,935	15,949,402
Undesignated Undesignated	2,959,816	3,134,261
Ondesignated	23,762,543	<u>24,998,616</u>
Tomporoviles market d	44,638,294	44,082,279
Temporarily restricted	4,146,761	3,589,780
Permanently restricted	1,342,218	1,344,283
Total net assets	50,127,273	49,016,342
Total liabilities and net assets	\$ 71,342,553	\$ 75,479,285

See Notes to Consolidated Financial Statements.

			2	014				
		1	emporarily	I	Permanent	ly		
	Inrestricted	_	Restricted		Restricted	<u>_</u>		Total
\$	965,003	\$	1,146,098	\$	7,15	0	\$	2,118,251
	34,669							
	4,513,436							34,669
	329,074		9 550					4,513,436
	141,949		8,550					337,624
	310,514		615,303					757,252
		_		_		-	_	310,514
_	6,294,645	_	1,769,951	_	7,150	<u>)</u>		8,071,746
	19 800 100							
	18,800,126						1	8,800,126
	16,658,124						1	6,658,124
	96,669							96,669
	199,172							199,172
	129,193							129,193
	227,521							227,521
	230,531							230,531
	69,464							69,464
_	16,294					_		16,294
_3	6,427,094					_	30	5,427,094
_	1,422,962	(1	<u>,422,962</u> )	_		_		
4	4,144,701		346,989	_	7,150		44	,498,840
3.	5,521,904						35	,521,904
5	5,007,844							007,844
_	457,995					_	_	457,995
_40	) <u>,9</u> 87 <u>,743</u> _					_	40	987,743
3	,156,958	<u>:</u>	346,989		7,150		3,	511,097
40	,925,321	3.2	242,791	12	37,133		15	505,245

<u>\$ 44,082,279</u> <u>\$ 3,589,780</u> <u>\$ 1,344,283</u> <u>\$ 49,016,342</u>

### YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER LOUISVILLE, INC. AND AFFILIATE

### CONSOLIDATED STATEMENTS OF CASH FLOWS

Years Ended December 31, 2015 and 2014

<b>.</b>	_ 2015	2014
Cash Flows from Operating Activities		
Cash received from contributions and grants	\$ 7,587,614	\$ 7,238,346
Cash received from services	35,283,073	35,810,798
Cash paid to suppliers and employees	(37,986,692)	
Interest paid	(588,470)	(648,981)
Interest received	216,149	197,688
Net cash provided by operating activities	4,511,674	5,279,300
Cash Flows from Investing Activities		
Purchase of property and equipment	(2,537,347)	(4,107,620)
Proceeds from sale of property and equipment	13,800	
(Decrease) increase in custodial accounts	(67,334)	82,344 17,954
Proceeds from sale of investments	1,091,094	•
Purchase of investments	(1,058,244)	990,540
Reinvested earnings from certificates of deposit	(1,040)	(983,916) (2,572)
Net cash used in investing activities	(2,559,071)	(4,003,270)
Cash Flows from Financing Activities		
Proceeds from debt Contributions for long-term purposes	19,300,000	
Payments on debt	(10 505 400	7,150
Payments on derivative financial instruments	(19,795,436)	(743,654)
Payments on capital leases	(870,264)	(1 41 404)
_	(203,911)	(141,121)
Net cash used in financing activities	(1,569,611)	(877,625)
Net increase in cash and cash equivalents	382,992	398,405
Cash and cash equivalents at beginning of year	17,349,463	16,951,058
Cash and cash equivalents at end of year	\$ 17,732,455	17,349,463

See Notes to Consolidated Financial Statements.

### YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER LOUISVILLE, INC. AND AFFILIATE

### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

### Note 1. Nature of Operations and Summary of Significant Accounting Policies

### Nature of operations:

Young Men's Christian Association of Greater Louisville, Inc. (YMCA) is a not-for-profit, charitable organization dedicated to providing services that are based on Judeo-Christian principles and that enable all persons, regardless of race, religion, income, gender, or physical ability, to achieve their full potential in spirit, mind and body. Within available resources, the YMCA provides services for any youth or adult who desires to participate, regardless of their ability to pay the established membership, class or program fees. As of December 31, 2015, the YMCA operated thirteen chartered branches throughout Jefferson, Bullitt, Meade, and Oldham counties in Kentucky, plus 2 extension centers as well as a School Age Child Care operational unit. As of January 1, 2016 the YMCA of Greater Louisville and the YMCA of Southern Indiana merged their staffs, strengths and services to meet the growing need across Kentuckiana, representing the growing concept of regionalism. The name of the merged entities will be maintained as the YMCA of Greater Louisville. As a result of the merger the YMCA has added two additional branch units; one in Clark County and one in Floyd County, Indiana.

National Safe Place, Inc. is a not-for-profit, charitable organization that is a controlled affiliate of the YMCA. National Safe Place, Inc. services teens in crisis and shelters nationally for runaway teens through the implementation of the Safe Place Program. Their primary activities include promotional efforts to help shelters seek local businesses to serve as a Safe Place location and as sponsors of the program, training of those business employees as volunteers in the Safe Place program, training shelter staff in understanding best practices in communicating the availability of the concept to teens both in and out of school systems, providing support services to shelters in expanding the local knowledge of the shelter services provided and helping secure accessibility to shelters by teens in crisis. National Safe Place has also undertaken the activity of providing training and technical assistance, through funding from a federal grant, to all federally funded runaway and homeless youth service programs across the United States and its territories. This training is in the form of national grantee meetings, technical assistance clinics, one day trainings, web based training and on-site training visits.

### Investments and credit risk:

Investments are stated at fair value as of the date of the consolidated statements of financial position, which is determined based upon the most recent quoted price of the security.

The YMCA has significant investments in equity securities held by an investment manager and is, therefore, subject to concentrations of credit risk. Due to the level of risk associated with certain investment securities, it is reasonably possible that changes in the value of investments will occur in the near term and that such changes could materially affect the financial condition of the Organizations. Investments are made by the investment manager and the investments are monitored by the Board of Directors. Though the market value of investments is subject to fluctuations on a year-to-year basis, management believes the investment policy is prudent for the long-term welfare of the Organizations.

### Property and equipment:

Property and equipment are stated at cost if purchased, or in the case of donated property and equipment, at fair value at the date of donation. The YMCA's policy is to capitalize expenditures greater than \$5,000 with an estimated life greater than one year. Depreciation is recorded on a straight-line method over the following estimated useful lives:

	Years
Buildings	10-40
Furniture and equipment	5-10
Vehicles	.3-6
Leasehold improvements	3
Software	3

### Designation of unrestricted net assets:

It is the policy of the Board of Directors of the Organizations to designate appropriate sums of unrestricted net assets for future maintenance and operations.

### Derivative financial instruments:

The YMCA makes limited use of derivative instruments for the purpose of managing interest rate risks. Interest rate swap agreements are used to convert the YMCA's floating rate long-term debt to a fixed rate (see Note 8). The differentials paid or received on interest rate swap agreements are accrued and recognized as adjustments to interest expense; gains and losses realized upon settlement of these agreements are deferred until the underlying hedged instrument is settled.

At December 31, 2015, the YMCA's derivative financial instruments consisted of five interest rate swap agreements entered into with Republic Bank. At December 31, 2014, the YMCA's derivative financial instruments consisted of three interest rate swap agreements entered into with PNC Bank. Both the Republic Bank and the PNC Bank interest rate swap agreements were for the purpose of hedging against the risk of interest rate increases on certain variable rate bonds. These derivative financial instruments are recorded on the consolidated statements of financial position at their fair value. The fair value represented on the consolidated statements of financial position is the estimated amount the YMCA would have to pay to cancel the swap agreements. The difference between the floating rate and the swap rate is recognized as a component of interest expense on the consolidated statements of activities. If these interest rate swap agreements are held to maturity, as management intends to do, the cumulative effect of this recognized liability on the change in net assets will be zero.

### Compensated absences:

Compensated absences for sick pay and vacation time have not been accrued since they are not accumulated past their calendar year end. The YMCA's policy is to recognize these costs when actually paid.

### Income tax status:

The YMCA and National Safe Place, Inc. are exempt from federal, state and local income taxes as not-for-profit corporations as described under Internal Revenue Code Section 501(c)(3). The YMCA and National Safe Place, Inc. file informational tax returns in the U.S. federal jurisdiction and with the Kentucky Office of the Attorney General. However, income from certain activities not directly related to the YMCA and National Safe Place, Inc.'s tax-exempt purpose may be subject to taxation as unrelated business income.

Pledge receivables due after one year from date of pledge were discounted using interest rates ranging from four to five percent. The pledges receivable related to the campaigns and contracts for future use of facilities as of December 31, 2015 and 2014 were as follows:

	<u>2015</u>	<u>2014</u>
Due less than one year Due one to five years	\$ 1,254,251 548,585	\$1,333,020 107,925
Less discount to net present value Less allowance for doubtful accounts	1,802,836 (60,005) <u>(28,593</u> )	1,440,945 (32,970) <u>(11,738</u> )
Net unconditional promises to give	<u>\$1,714,238</u>	<u>\$1,396,237</u>

In January 2015, the YMCA committed to a 5-year lease with Simons Publishing Company for land and building located at 409 Joe B. Hall Avenue, Shepherdsville, Kentucky 40165. The lease payments are \$1 per year. The lease fair value has been determined to be \$735,000 and has been recorded in the consolidated statements of financial position as a pledge receivable and discounted accordingly over the term of the lease.

Future in-kind lease expense related to the pledges receivable included above are as follows:

Year ending December 31, 2016	\$147,000
2017	147,000
2018	147,000
2019	147,000

### Note 4. Certificates of Deposit

Certificates of deposit for the YMCA and National Safe Place, Inc. are with financial institutions located in Kentucky, with original maturities greater than three months. The interest rates on the certificates of deposit range from of 0.50% to 1.02% and maturity dates vary from January 2016 to May 2017.

Louisville Community Foundation - valued at net asset value per share based on quoted prices for assets held by the fund.

In-kind assets and liabilities – valued based on independent appraisal reports or on similar like assets.

The preceding methods described may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Organizations believe their valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The following table sets forth the level, within the fair value hierarchy, the Organizations' investments at fair value as of December 31, 2015 and 2014:

	m	2015	
	<u>Cost</u>	Fair <u>Value</u>	Unrealized Appreciation (Depreciation)
Level 1 investments:			
Cash equivalents	\$ 41,008	\$ 41,008	
Common stocks Mutual funds:	4,600	400	\$ (4,200)
Fixed income funds	060.056		
Equity funds	960,956 <u>2,731,443</u>	932,789 _3,015,805	(28,167)
	2,131,413	3,013,603	<u>284,362</u>
Total level 1 investments	3,738,007	3,990,002	251,995
Level 2 investments:			ŕ
Louisville Community Foundation	66,315	63,401	(0.01.4)
-		03,401	(2,914)
Total investments	\$3,804,322	<u>\$4,053,403</u>	\$249.081

The endowment net asset composition by type of fund and changes in endowment net assets as of and for the years ended December 31, 2015 and 2014 are as follows:

		2015	
	Unrestricted – Board Designated <u>Endowment</u>	Donor Permanently <u>Restricted</u>	Total
Endowment net assets, beginning of year Contributions Investment income Unrealized loss Realized gain Transfers to operations Endowment net assets, end of year	\$3,134,261 10,020 182,776 (311,861) 160,246 (215,626) \$2,959,816	\$1,344,283 (2,065)	\$4,478,544 7,955 182,776 (311,861) 160,246 (215,626)
· •		2014	<u>\$4,302,034</u>
	Unrestricted – Board Designated Endowment	Donor Permanently <u>Restricted</u>	<u>Total</u>
Endowment net assets, beginning of year Contributions Investment income Unrealized gain Realized gain Transfers to operations	\$3,011,691 179,113 47,921 81,272 	\$1,337,133 7,150	\$4,348,824 7,150 179,113 47,921 81,272 (185,736)
Endowment net assets, end of year	<u>\$3,134,261</u>	<u>\$1,344,283</u>	<u>\$4,478,544</u>

### Spending policy and how investment objectives relate to spending policy:

The YMCA has a policy of appropriating for distribution an amount each year as deemed necessary to support their mission. In establishing this policy, the YMCA has considered the long term expected return on its Endowment. Accordingly over the long term, the YMCA expects the current spending policy to allow its Endowment to grow at a rate to cover the annually approved spending policy plus an amount that allows assets over time to keep pace with the long term inflation rate. This is consistent with the YMCA's objective to maintain the purchasing power of the endowment assets held in perpetuity or for a specified term as well as to provide additional real growth through new gifts and investment returns.

### Note 7. Property and Equipment, Net

A summary of property and equipment and accumulated depreciation at December 31 is as follows:

	<u>2015</u>	<u>2014</u>
Land and improvements Buildings Furniture and equipment Vehicles Leasehold improvements Construction in progress (Note 12)	\$ 8,313,285 63,222,294 9,796,949 288,972 189,545 2,798,532 84,609,577	\$ 8,672,638 62,174,286 9,481,619 310,212 189,545 2,101,740 82,930,040
Less accumulated depreciation	<u>39,199,006</u> \$45,410,571	36,376,517 \$46,553,523

Propositional Defending D		
Recreational Refunding Revenue Bond (Sub-note 5), with Republic Bank, due June 1, 2035. Semi-annual principal payments of \$577,750 begin on June 1, 2021, with a payment escalation of 2.15% per payment. Interest payments on the note are due monthly. The note has an effective interest rate of 4.211%. The note is collateralized by substantially all of the YMCA's property and equipment. The bond agreement requires the YMCA to comply with certain covenants and financial ratios.	5,670,677	
Industrial Revenue Bond (Note A) with PNC Bank, which was paid in full in May 2015. The note had a monthly payment of \$43,205 that included principal and interest, with an effective swap interest rate of 4.22%. Collateralized by a mortgage on real estate located on Mill Brook Road, Crittenden Drive, S. Second Street, and Quality Place.		\$ 6,525,287
Industrial Revenue Bond (Note B) with PNC Bank, which was paid in full in May 2015. The note had a monthly payment of \$22,042, which included principal and interest, with an effective swap interest rate of 4.22%. Collateralized by a mortgage on real estate located on Mill Brook Road		3,353,397
Industrial Revenue Bond (Note C) with PNC Bank, which was paid in full in May 2015. The note had a monthly payment of \$53,357, which included principal and interest, with an effective swap interest rate of 2.5%. Collateralized by a mortgage on real estate located at Norton Commons and the personal property located or pertaining to the property. Also collateralized by the gross revenues of the YMCA.		, ,
		<u>9,544,038</u>

In 2015, the YMCA entered into an interest rate swap agreement with Republic Bank concerning the Recreational Refunding Bonds, (Sub-note 1), with a remaining notional amount as of December 31, 2015, of approximately \$3,746,000. Under this swap agreement, a fixed swap interest rate of 2.474% is charged instead of a floating rate of 1.18% plus the Bank's Index rate. The swap agreement has an asset of \$2,901 recognized on the consolidated statements of financial position at December 31, 2015. The swap agreement matures on December 1, 2020.

\$18,927,286

\$19,422,722

In 2007, the YMCA entered into an interest rate swap agreement with PNC Bank concerning the City of Lyndon, Kentucky Cultural and Educational Development Revenue Bonds, Series 2007 (Note A). Under this swap agreement, a fixed swap interest rate of 4.22% was charged instead of a floating rate of 65% of the Bank's Index Rate plus 1.28%. The swap agreement had a liability of \$473,963 recognized on the consolidated statements of financial position at December 31, 2014. This swap agreement was paid in full in May 2015.

In 2007, the YMCA entered into an interest rate swap agreement with PNC Bank concerning the City of Lyndon, Kentucky Cultural and Educational Development Revenue Bonds, Series 2007 (Note B). Under this swap agreement, a fixed swap interest rate of 4.22% was charged instead of a floating rate of 65% of the Bank's Index Rate plus 1.28%. The swap agreement had a liability of \$246,594 recognized on the consolidated statements of financial position at December 31, 2014. The swap agreement was paid in full in May 2015.

In 2011, the YMCA entered into an interest rate swap agreement with PNC Bank concerning the City of Lyndon, Kentucky Cultural and Recreational Development Revenue Bonds, Series 2011 (Note C). Under this swap agreement, a fixed interest rate of 2.5% was charged instead of a floating rate of 65% of the Libor-Bloomberg Index rate plus 1.1375%. The swap agreement had a liability of \$149,707 recognized on the consolidated statements of financial position at December 31, 2014. The swap agreement was paid in full in May 2015.

The above interest rate swaps are considered derivative financial instruments and are classified as level 2 (fair value hierarchy as described in Note 5) and are included in liabilities on the consolidated statements of financial position. The fair value represents the estimated amount the YMCA would have to pay to cancel the swap agreements. The fair values of the derivatives have been estimated by a third party. The third party estimates are based upon models and forward rate assumptions in order to predict future cash flows on the floating side. The cash flows are then compared to the cash flows on the fixed side. The model then takes the net of the future payment amounts and uses the net present value to derive all values. Losses relating to their swap contracts totaled \$219,070 and \$351,693 for the years ended December 31, 2015 and 2014, respectively. The losses are included in interest expense and are reported in the consolidated statements of functional expenses.

As the YMCA makes its monthly installment payments, if the bank's rate is below the swap rate, then the YMCA pays the difference. If the bank's rate exceeds the swap rate, the YMCA is reimbursed from the bank. These arrangements effectively provide a fixed rate component of the total interest rate charged on these loans.

The future annual minimum lease payments and their net present value are as follows:

Year ending December 31, 2016	\$243,863
2017	219,226
2018	137,329
2019	105,433
2020	_ 35,217
Total minimum lease payments	741,068
Less amount representing interest	<u>(45,589</u> )
Present value of minimum lease payments	\$695,479

The following is an analysis of the leased assets included in property and equipment:

Equipment	\$1,061,460
Accumulated amortization	<u>(376,051</u> )

<u>\$ 685,409</u>

Note 11. Changes in Temporarily and Permanently Restricted Net Assets

Temporarily restricted:				
	Balance		Released from	Balance
Program	<u>12-31-14</u>	Revenues	Restrictions	<u>12-31-15</u>
Comprehensive Youth Development (MUW)	\$ 60,305		f ((0.705)	
Day Care Programs (MUW)	+ 00,000	e co 10c	\$ (60,305)	* ****
	69,489	\$ 69,426	(104,201)	\$ 34,714
Housing Programs (MUW)	139,700	249,358	(264,380)	124,678
Berrytown After School Program (MUW)	6,322		(6,322)	
Oldham County summer camp (MUW)	6,600		(6,600)	
Black Achievers (MUW)	4,527	8,347	(8,700)	4,174
Project NOW (MUW)	20,709	38,189	(39,804)	19,094
Out of School Time (MUW)	-	197,825	(98,912)	98,913
Y-Now Mentoring		100,000	()/	100,000
Bullitt Co. capital	16,322	•		16,322
Black Achiever program	6,375			6,375
Annual Giving Campaign	611,098	683,102	(611,098)	683,102
Safe Place Services	35,000	25,000	(39,859)	20,141
West Louisville project	2,500,000	·	` , ,	2,500,000
Berrytown - In-kind use of facility	113,333	22,667	(136,000)	_,,
Bullitt County - In-kind use of facility	-	686,248	<u>(147,000</u> )	539,248
	<u>\$3,589,780</u>	\$2,080,162	<u>\$(1.523,181</u> )	\$4,146,761

Program	Balance 12-31-13	Contributions	Balance 12-31-14
Endowments	\$1,234,924	\$7,150	\$1,242,074
Bob Hook, Sr. Memorial	11,779		11,779
Bill Ewing Memorial	7,000		7,000
Safe Place Services:	•		,,,,,,
Joan Cralle Day Fund	41,000		41,000
Joyce Skees Memorial	8,101		8,101
Camp Piomingo:	5,252		3,101
Boyce Greer Memorial	30,715		30,715
Roy Griffin Fund	870		870
William Early Fund	1,211		
Chestnut Street:	1,2,11		1,211
Robert Lee Christman Fund	300		200
Reela O. Alexander Fund	1,233		300
The state of the s	1,233	<del></del>	1,233
	<u>\$1,337,133</u>	<u>\$7,150</u>	<u>\$1,344,283</u>

The majority of the permanent endowments have no specific use restrictions; therefore, the interest income from these assets is utilized for general operations of the YMCA. Gains and losses (net appreciation and depreciation) on permanent endowment fund investments will be recorded as an increase (decrease) in unrestricted board designated endowment net assets unless the donor has explicitly restricted the use of the net appreciation and depreciation.

### Note 12. Construction in Progress

At December 31, 2015, the YMCA had expended approximately \$2,137,000 in planning and demolition costs for a new facility located in West Louisville. For the years ended December 31, 2015 and 2014, \$42,200 and \$42,055, respectively, of interest was capitalized for this project. Total costs for the project, are estimated to be approximately \$26 million and construction is anticipated to begin once potential new market tax credits are identified. It is anticipated that the credits will be allocated late 2016. The project will be financed with \$4 million in donations, \$6 million in cash provided by the YMCA, and the remainder from other sources. The estimated completion period for finalizing plan design and construction is 18-24 months.

### Note 15. Concentration of Cash

The YMCA and National Safe Place, Inc. maintain cash balances at several financial institutions located in the Louisville, Kentucky area. Accounts at each institution are insured by the Federal Deposit Insurance Corporation up to \$250,000. At December 31, 2015, the YMCA and National Safe Place, Inc.'s uninsured cash balances totaled approximately \$17.8 million. Cash balances fluctuate based upon operating needs and the timing of deposit and check clearing activity. Management believes that these financial institutions are of sufficient size to provide financial security of uninsured balances and does not believe the Organizations are exposed to any significant credit risk.

### Note 16. Operating Leases

In November 2004, the YMCA committed to a long-term lease for space located at the Middletown Plaza, 12330 Shelbyville Road, Middletown, Kentucky 40243. In February 2013, the term of lease was extended for an additional three years, however the amount of square footage was reduced from 12,900 square feet to approximately 11,500 square feet. The monthly lease payments are \$8,000. The facility is used for health, fitness, and youth services. In February 2016 the lease term was extended through September 2016.

In December 2001, the YMCA entered into a contract with Jefferson County Fiscal Court, whereby the YMCA operates a facility located in Berrytown Park as a YMCA branch. The land and building is owned by Jefferson County and will be leased to the YMCA for a term of three years at a cost of \$1 per year with three five-year renewal options. The YMCA supplied equipment and furnishings for this facility at an estimated cost of \$187,000. The lease agreement was effective November 1, 2002 and the second five-year renewal option was exercised on November 1, 2010. The lease matured in November 1, 2015. The building continued to be leased until March 31, 2016 at which time the lease was discontinued. The lease fair value of \$136,000 has been recorded in the consolidated statements of activities as occupancy expense for 2015 and 2014.

In January 2010, the YMCA committed to a five-year lease with Simons Publishing Company for land and building located at 409 Joe B. Hall Avenue, Shepherdsville, Kentucky 40165. The lease payments are \$1 per year. The facility is used for health, fitness and youth services. The lease fair value of \$147,000 has been recorded in the consolidated statements of activities as occupancy expense for 2015 and 2014. In January 2015, the YMCA renewed this lease for a five-year period, with no changes in the terms of the lease.

In January 2014, National Safe Place, Inc. committed to a 45 month lease with Country Road Properties, for a building located at 251 South Peters Road, Knoxville, Tennessee to be utilized for offices. Monthly lease payments were \$995 for the years ended 2015 and 2014.

The YMCA has committed to eight leases for fitness equipment to be used at various facilities. The leases start dates range from January 2013 through August 2015 and are over periods ranging from 24 to 37 months. The leases are structured as operating leases with monthly payments ranging from \$758 to \$20,224 per lease.

Following is the future minimum operating lease payments pertaining to the leases described above:

December 31,	2016	\$983,397
	2017	352,629
	2018	142,090
	2019	6,000

### Note 17. Litigation

The YMCA is a defendant in litigation relating to three personal injury claims. While the final outcome cannot be determined at this time, management is of the opinion that the ultimate liability, if any, from the final resolution of these matters will not have a material effect on the Organizations' consolidated financial statements.

### Note 18. Long-Term Grant for Runaway and Homeless Youth Program

National Safe Place, Inc. was awarded a five year grant from the U.S. Department of Health and Human Services in September 2012 not to exceed \$10.5 million to conduct the Runaway and Homeless Youth Training and Technical Assistance Center program. The grant will be payable to the Organization over a five year period of up to \$2.1 million a year. As part of the grant agreement National Safe Place, Inc. is required to provide 10% a year in non-federal matching contributions to the program. For the years ended December 31, 2015 and 2014, \$2,150,675 and \$1,900,073, respectively, were recognized in grant revenue.

Liabilities	(Unaudited)
Line of credit	\$ 200,000
Accounts payable and accrued expenses	385,000
Deferred income	127,000
Mortgage payable	5,832,000
Capital leases	290,000
Total liabilities	_6,834,000
Net Assets	
Unrestricted	7,271,000
Temporarily restricted	538,000
Total net assets	<u> 7,809,000</u>
Total liabilities and net assets	<u>\$14,643,000</u>

### YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER LOUISVILLE, INC. AND AFFILIATE

### CONSOLIDATING STATEMENT OF FINANCIAL POSITION December 31, 2014

	YMCA of Greater	National Safe		
Assets	Louisville, Inc.	Place, Inc.	Eliminations	Consolidated
Cash and cash equivalents	\$ 17,294,503	\$ 54,960		\$ 17,349,463
Grants and accounts receivable	981,301	320,160	\$ (130,406)	1,171,055
Pledges receivable	1,350,178	46,059		1,396,237
Prepaid expenses and inventories	432,541	21,293	(400)	453,434
Certificates of deposit	753,579	302,572		1,056,151
Investments	4,237,868			4,237,868
Property and equipment, net	46,528,053	25,470		46,553,523
Real estate held for others	3,261,554			3,261,554
Total assets	<u>\$ 74,839,577</u>	<u>\$ 770,514</u>	\$ (130,806)	\$ 75,479,285
Liabilities and Net Assets				
Accounts payable and accrued expenses	\$ 2,177,948	\$ 18,645	\$ 2,154	\$ 2,198,747
Due to YMCA		132,960	(132,960)	
Custodial liabilities	88,025			88,025
Debt	19,422,722			19,422,722
Capital lease obligations	621,631			621,631
Real estate held for others	3,261,554			3,261,554
Derivative financial instruments	870,264		-	870,264
Total liabilities	26,442,144	151,605	(130,806)	26,462,943
Net Assets				
Unrestricted:				
Board designated reserves	15,559,032	390,370		15,949,402
Board designated endowment	3,134,261			3,134,261
Undesignated	24,786,351	212,265	-	24,998,616
- N	43,479,644	602,635		44,082,279
Temporarily restricted	3,573,506	16,274		3,589,780
Permanently restricted	1,344,283			1,344,283
Total net assets	48,397,433	618,909	-	49,016,342
Total liabilities and net assets	\$ 74,839,577	\$ 770,514	\$ (130,806)	\$ 75,479,285

## YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER LOUISVILLE, INC. AND AFFILIATE

### CONSOLIDATING STATEMENT OF ACTIVITIES Year Ended December 31, 2014

Net assets at end of year	Net assets at beginning of year	Increase (decrease) in total net assets	Expenses Program services Management and general Fund-valuing Total expenses	Total public support, revenues, and gains	Net assets released from restriction	Total teaching and Same	Misignature	Can on sale of property and equipment	Carage and rental income	instrument	Change in thir value of derivative financial	Net realized and unrealized gains on investments	Management fees	Investment income	Sales of merchandise	Programs	Membership dues	Revenues and gains:	Total public support	Other grants	Metro United Way grant	In-kind donstrons	Government grants	donors of \$88,666)	Special events (not of cost of direct benefits to	Public support: Contributions	Public Support, Revenues and Gains		
\$43,479,644	40,389,839	3,089,805	34,013,613 4,898,462 448,055 39,360,130	42,449,935	1,412,120	37,302,417	10,204	69,464	230,531	227,521		129,193	1,235,272	197,423	60,706	16,557,082	18,638,941		3,675,398	310,514	141,949	33,358	2,613,363	34,669		\$ 541,545		Unrestricted	Y
\$3,573,506	3,231,949	341,557		341,557	(1,412,120)														1,753,677		615.303	8,550				\$1,129,824		Temporarily Restricted	MCA of Great
\$1,344,283	1,337,133	7,150		7,150															7,150							\$ 7,150		Permanently Restricted	YMCA of Greater Louisville, Inc.
\$48,397,433	44,958,921	3,438,512	34,013,613 4,898,462 448,055 39,360,130	42,798,642		37,362,417	16,284	69,464	230,531	227,521		129,193	1,235,272	197,423	60,706	16,557,082	18,638,94;		5,436,225	310,514	757.252	41.908	2,613,363	34,669	•	\$ 1.678.519		Total	e,
\$ 602,635	535,482	67,153	2,405,781 422,843 52,231 2,880,855	2,948,008	10,842	300,749	10	i						1,749	35,963	101,042	161,985		2,636,417			312.886	1,900,073			\$ 423,458		Unrestricted	Nat
\$ 16,274	10,842	5,432		5,432	(10,842)														16,274							\$ 16.274		Temporarily Restricted	National Safe Place, Inc.
\$ 618,909	546,324	72,585	2,405,781 422,843 52,231 2,880,855	2,953,440		300,749	10	;						1,749	35,963	101,042	161,985		2,652,691		Jaco	312 886	1.900.073			\$ 439.732		Total	Inc.
<b>*</b>			(897,490) (313,461) (42,291) (1,253,242)	(1,253,242)		(1,236,072)							(1,235,272)				(B00)		(17,170)			\$ (17.170)						Eliminations	
\$ 44,082,279	40,925,321	3,156,958	35,521,9 <b>04</b> 5,007,844 457,995 40,987,743	44,144,701	1,422,962	36,427,094	16,294	69,464	230,531	227,521		129,193		199,172	96,669	16,658,124	18,800,126		6,294,645	310.514	141 040	720 07d	4.513.436	34.669	8	965.003		Unrestricted	
\$ 3,589,780	3,242,791	346,989		346,989	(1,422,962)														1,769,951	Conference	e0e 519	2 440			4	\$ 1 146 008		Temporarily Restricted	Cons
\$1,344,283	1,337,133	7,150		7,150			V												7.150							\$ 7.150		Permanently Restricted	Consolidated
\$ 49,016,342	45,505,245	3,511,097	35,521,904 5,007,844 457,995 40,987,743	44,498,840		36,427,094	16,294	69,464	230,531	227,521	•	129,193		199,172	96,669	16,658,124	18.800,126		8.071,746	310.514	757 757	703 CEE	4.513.436	34.669		\$ 2118251		Total	

# YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER LOUISVILLE, INC. AND AFFILIATE

## CONSOLIDATING STATEMENT OF FUNCTIONAL EXPENSES Year Ended December 31, 2014

	ដ	YMCA of Greater Louisville, Inc.	Louisville, ir	ř.		National Sar	National Safe Place, Inc.				Consolidated	alica.	
	Program	Management	Fund -		Program	Menagement	Fund -			Program	Management	Fund -	
	Services	and General	Raising	Total	Services	and General	Raising	Total	Eliminations	Sorvices	and General	Raising	Total
alaries and wages	\$ 14,889,013	\$ 2,601,179	\$ 168,852	\$ 17,659,044						\$ 14.889.013		\$ 168,852	\$ 17.659.044
imployee benefits	1,575,862	425,170	30,169	2,031,201						1,575,862	425,170		2,031,201
ayroll taxes	1,157,831	181,501	19.671	1 359 003						1.157.831			1.359.003
fanagement fees				,	\$ 879.520	\$ 79.057	42.291	\$ 1,000,868	\$(1.000.868)				
rofessional fees and contract services	1,060,533	447,624	43,215	1,551,372	492,256	306,566		798,822	(236,786)	1,552,789	517,404		2,113,408
upplies	3,506,212	148,883	22,966	3,678,061	54,980	2,462	1,231	57,773		3,560,292	151,345	24,197	3,735,834
elephone	290,729	76,344		367,073	11,679	1,374	687	13,740		302,408	77,718		380,813
ostage	149,914	53,724	2,005	205,643	9,957	70	141	10,168		159,871	53,794		215,811
besipancy	4,908,526	65,928	471	4,974,925	64,248	7,532	3,766	75,546		4,972,774	73,460		5,050,471
quipment rental and maintenance	1,016,351	64,270	456	1,081,077	2,215	261	130	2,606		1,018,566	64,531		1,083,683
rinting and promotion	573,406	263,257	96,037	932,700	33,531			33,531		606,937	263,257		966,231
havel and employee expenses	524,394	14,946	962	540,302	173,407	9,127		182,534		697,801	24,073		722 _, 836
lonferences, conventions and meetings	251,346	123,734	57,476	432,556	474,838	7,606	3,745	486,189		726,184	131,340		918,745
conference stipends					185,017			185,017		185,017			185,017
sembership dues	298,774	71,813	275	370,862	1,085	5,903		886,8	(800)	299,059	77,716		377,050
nsurance	536,164	33,792	1,000	570,956	4,280	480	240	4,800		540,244	34,272		575,756
nterest	583,373	66,061		649,434						583,373	66,061		649,434
Alscellaneous	40,482	33,507		73,989	2,020	2,405		4,425	(14,788)	25,332	38,294		63,626
epreciation	2,650,703	226,729	4,500	2,881,932	17,848			17,848		2,668,551	226,729	4,500	2,899,780
Total functional expenses	\$ 34,013,613	\$ 4,898,462	\$ 448,055	\$ 39,360,130	\$ 2,405,781	\$ 422,843	\$ 52,231	\$ 2,880,855	\$ (1,253,242)	\$ 35,521,904	\$ 5,007,844	\$ 457,995	\$ 40,987,743

Sale
Enoi
Pay
Mae
Pro
Sup
Tele
Pos
Occ
Equ
Prir
Cor
Cor
Cor
Mae
Mise
Dog

### YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER LOUISVILLE, INC. AND AFFILIATE

### NOTES TO SCHEDULES OF EXPENDITURES OF FEDERAL AWARDS

### Note 1. Basis of Presentation

The accompanying schedules of expenditures of federal awards (the "Schedules") include the federal grant activity of YMCA of Greater Louisville, Inc. (YMCA) and National Safe Place, Inc. (Affiliate) under programs of the federal government for the years ended December 31, 2015 and 2014. The information in these schedules are presented in accordance with the requirements of Title 2 U.S. Code of federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance). Because the schedules present only a selected portion of the operations of YMCA and Affiliate, it is not intended to and does not present the financial position, changes in net assets, or cash flows of the YMCA and Affiliate.

### Note 2. Summary of Significant Accounting Policies

Expenditures reported on the Schedule are reported on the accrual basis of accounting. Such expenditures are recognized as applicable, either the cost principles in OMB Circular A-122, or the cost principles contained in Title 2 U.S. Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, wherein certain types of expenditures are not allowable or are limited as to reimbursement.

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

### Compliance and Other Matters

As part of obtaining reasonable assurance about whether the YMCA and Affiliate's consolidated financial statements are free of material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts and grant agreements, noncompliance with which could have a direct and material effect on the determination of consolidated financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit and, accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

### Purpose of this Report

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the result of that testing, and not to provide an opinion on the effectiveness of the entity's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the entity's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

Dening, Malone, Swagy & Ostroff

Louisville, Kentucky June 21, 2016

We believe that our audit provides a reasonable basis for our opinion on compliance for each major federal program. However, our audit does not provide a legal determination for YMCA and Affiliate's compliance.

### Opinion on Each Major Federal Program

In our opinion, YMCA and Affiliate complied, in all material respects, with the types of compliance requirements referred to above that could have a direct and material effect on each of its major federal programs for the year ended December 31, 2015.

### Report on Internal Control Over Compliance

Management of YMCA of Greater Louisville, Inc. and Affiliate is responsible for establishing and maintaining effective internal control over compliance with the types of compliance requirements referred to above. In planning and performing our audit of compliance, we considered YMCA and Affiliate's internal control over compliance with the types of requirements that could have a direct and material effect on each major federal program to determine the auditing procedures that are appropriate in the circumstances for the purpose of expressing our opinion on compliance for each major federal program and to test and report on internal control over compliance in accordance with Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, we do not express an opinion on the effectiveness of YMCA and Affiliate's internal control over compliance.

A deficiency in internal control over compliance exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with a type of compliance requirement of a federal program on a timely basis. A material weakness in internal control over compliance is a deficiency, or combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal program will not be prevented, or detected and corrected, on a timely basis. A significant deficiency in internal control over compliance is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance.

Our consideration of the internal control over compliance was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies. We did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

### YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER LOUISVILLE, INC. AND AFFILIATE

### SCHEDULE OF FINDINGS AND QUESTIONED COSTS

Year Ended December 31, 2015

### Section I - Summary of Auditors' Results

1.	The auditors' report expresses an unmodified opinion on the consolidated financial statements of the YMCA and Affiliate for the year ended December 31, 2015.
2.	Internal control over financial reporting:
	Material weakness identified?  Yes X No  Yes X No
	Significant deficiency identified?  Yes X None reported
3.	The audit did not disclose any noncompliance which is material to the consolidated financial statements of the YMCA and Affiliate.
4.	Internal control over major programs:
	<ul> <li>Material weakness identified?</li> <li>Yes X No</li> </ul>
	Significant deficiency identified? Yes X None reported
	D.
5.	An unmodified opinion was issued on compliance for the major federal program of the YMCA and Affiliate for the year ended December 31, 2015.
6.	The audit disclosed no audit findings required to be reported in accordance with 2 CFR 200.516(a).
7.	The program audited as a major program was:
	Federal CFDA Number Name of Major Federal Program
	U.S. Department of Health and Human Services:
	93.623 Basic Center Program
8.	The threshold used to distinguish between Type A and Type B programs was \$750,000.

9. The auditee did qualify as a low-risk auditee.

### LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND SUPPLEMENTAL DISCLOSURE REQUIRED FOR REQUESTS BY CHURCHES, RELIGIOUS OR FAITH-BASED ORGANIZATIONS

It is the policy of the Louisville/Jefferson County Metro Council that no appropriation to a Church, to a religious or faith-based organization, or to any organization whose activities support a Church or religious or faith-based organization will be approved unless the prospective grantee clearly demonstrates, in writing, that it is committed to compliance with each of the following conditions and requirements.

### Legal Name of Applicant Organization:

Young Men's Christian Association of Greater Louisville

As in the case of all legislative enactments, the appropriation must be for a public purpose. In other words, the appropriation must have a secular legislative purpose to support a program which benefits the public, and which has been, or could be undertaken by the government.

The appropriation must be totally and demonstrably earmarked for the beneficiary activity or program with no tangible or significantly intangible benefit inuring to the organization. Specifically, the appropriation may not fund equipment used by the organization, nor may it be used for improvements to real or personal property owned by the grantee church or organization.

The beneficiary activity or program must be open to the public as opposed to being restricted to church or organization members or affiliates.

The grantee church or organization may not use public funds in any way that involves worship, religious instruction, or religious practice.

Public funds involved in the grant may not be used to support a school or any program of instruction operated by the grantee church or organization, or in its name.

The grantee organization may not use public funds in any way that involves proselytization or self-promotion of the organization.

The grantee church or organization must establish and maintain a system of recordkeeping which clearly and completely documents its use of the public funds involved in the grant.

### **SIGNATURE**

I agree under the penalty of law to comply with all the items in this disclosure. I am aware my organization will not be eligible for funding if investigation at any time shows falsification. If falsification is shown after funding has been approved, any allocations already received and expended are subject to be repaid. I further certify that I am legally authorized to sign this disclosure for the applying organization.

Signature of Legal Signatory:	Math	Date:	February 2, 2017
Legal Signatory (please print).	Matt Reed	Title: E	Executive Director, YMCA Safe Place Services
Phone: (502) 635-44	-03 Extension:	Email:	mreed@ymcalouisville.org