

Form **990**  
Department of the Treasury  
Internal Revenue Service

# Return of Organization Exempt From Income Tax

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

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

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No 1545-0047  
**2018**  
Open to Public Inspection

**A For the 2019 calendar year, or tax year beginning 01-01-2018, and ending 12-31-2018**

- B** Check if applicable
- Address change
  - Name change
  - Initial return
  - Final return/terminated
  - Amended return
  - Application pending

**C** Name of organization  
Young Men's Christian Association of Northwest North Carolina (4626)

Doing business as  
YMCA of Northwest North Carolina

Number and street (or P O box if mail is not delivered to street address) Room/suite  
301 N Main St 1900

City or town, state or province, country, and ZIP or foreign postal code  
Winston Salem, NC 271013890

**D** Employer identification number  
56-0530015

**E** Telephone number  
(336) 777-6232

**G** Gross receipts \$ 34,474,426

**F** Name and address of principal officer  
Stanley Law  
301 N Main St 1900  
Winston Salem, NC 271013890

**H(a)** Is this a group return for subordinates?  Yes  No

**H(b)** Are all subordinates included?  Yes  No  
If "No," attach a list (see instructions)

**H(c)** Group exemption number ▶

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

**J** Website: ▶ www.ymcanwnc.org

**K** Form of organization  Corporation  Trust  Association  Other ▶

**L** Year of formation 1888

**M** State of legal domicile NC

**Part I Summary**

**1** Briefly describe the organization's mission or most significant activities  
Helping people reach their God-given potential in spirit, mind and body See Schedule O for values, areas of focus, and other pertinent information

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

<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	25
<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	25
<b>5</b> Total number of individuals employed in calendar year 2018 (Part V, line 2a)	2,631
<b>6</b> Total number of volunteers (estimate if necessary)	3,173
<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	0
<b>7b</b> Net unrelated business taxable income from Form 990-T, line 34	0

	Prior Year	Current Year
<b>8</b> Contributions and grants (Part VIII, line 1h)	5,446,023	4,496,544
<b>9</b> Program service revenue (Part VIII, line 2g)	27,667,557	28,514,683
<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	344,974	481,679
<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	206,844	218,063
<b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	33,665,398	33,710,969
<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	73,800	66,200
<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	0	0
<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	17,810,985	18,124,064
<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	0	0
<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,116,183		
<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	14,459,427	14,619,105
<b>18</b> Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	32,344,212	32,809,369
<b>19</b> Revenue less expenses Subtract line 18 from line 12	1,321,186	901,600
	Beginning of Current Year	End of Year
<b>20</b> Total assets (Part X, line 16)	49,323,606	48,183,587
<b>21</b> Total liabilities (Part X, line 26)	12,851,209	11,022,710
<b>22</b> Net assets or fund balances Subtract line 21 from line 20	36,472,397	37,160,877

**Part II Signature Block**

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

**Sign Here**

Signature of officer \_\_\_\_\_ Date 2019-06-07

Stanley Law President & CEO  
Type or print name and title

**Paid Preparer Use Only**

Print/Type preparer's name \_\_\_\_\_ Preparer's signature \_\_\_\_\_ Date \_\_\_\_\_

Check  if self-employed PTIN P01057495

Firm's name ▶ Butler Burke LLP Firm's EIN ▶ 56-1138530

Firm's address ▶ 100 Club Oaks Court Suite A  
Winston Salem, NC 27104 Phone no (336) 768-2310

**Part III Statement of Program Service Accomplishments**Check if Schedule O contains a response or note to any line in this Part III **1** Briefly describe the organization's mission

Helping people reach their God-given potential in spirit, mind and body. The Y strives to strengthen the foundations of the communities we serve through programs and services that promote youth development, healthy living, and social responsibility for all. See Schedule O for values and other pertinent information.

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

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

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

If "Yes," describe these changes on Schedule O

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

<b>4a</b>	(Code )	(Expenses \$	20,496,187	including grants of \$	0	(Revenue \$	23,408,775 )
	See Additional Data						

<b>4b</b>	(Code )	(Expenses \$	7,223,538	including grants of \$	45,200	(Revenue \$	4,472,516 )
	See Additional Data						

<b>4c</b>	(Code )	(Expenses \$	612,826	including grants of \$	21,000	(Revenue \$	633,392 )
	See Additional Data						

<b>4d</b>	Other program services (Describe in Schedule O )						
	(Expenses \$		including grants of \$		(Revenue \$		)

<b>4e</b>	<b>Total program service expenses</b> ▶		28,332,551				
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Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1 through 22 regarding organizational requirements, such as political activities, lobbying, and financial reporting.

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

		Yes	No
<b>23</b>	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> . . . . .	Yes	
<b>24a</b>	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> . . . . .	Yes	
<b>24b</b>	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . .		No
<b>24c</b>	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .		No
<b>24d</b>	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . . .		No
<b>25a</b>	<b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> . . . . .		No
<b>25b</b>	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> . . . . .		No
<b>26</b>	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i> . . . . .		No
<b>27</b>	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> . . . . .		No
<b>28</b>	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
<b>28a</b>	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .		No
<b>28b</b>	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .		No
<b>28c</b>	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .		No
<b>29</b>	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . . . .	Yes	
<b>30</b>	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> . . . . .		No
<b>31</b>	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> . . . . .		No
<b>32</b>	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> . . . . .		No
<b>33</b>	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> . . . . .		No
<b>34</b>	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> . . . . .		No
<b>35a</b>	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		No
<b>35b</b>	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .		
<b>36</b>	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .		No
<b>37</b>	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		No
<b>38</b>	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .	Yes	

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

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

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable . . . . .		
<b>1b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . . . . .		
<b>1c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . .	Yes	

<b>2a</b> Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return . . . . .		<b>2a</b>	2,631		
<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		<b>2b</b>	Yes		
<b>3a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year? . . . . .		<b>3a</b>			No
<b>b</b> If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O . . . . .</i>		<b>3b</b>			
<b>4a</b> At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . . . . .		<b>4a</b>			No
<b>b</b> If "Yes," enter the name of the foreign country <b>▶</b> _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)					
<b>5a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . . .		<b>5a</b>			No
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		<b>5b</b>			No
<b>c</b> If "Yes," to line 5a or 5b, did the organization file Form 8886-T? . . . . .		<b>5c</b>			
<b>6a</b> Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? . . . . .		<b>6a</b>			No
<b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .		<b>6b</b>			
<b>7 Organizations that may receive deductible contributions under section 170(c).</b>					
<b>a</b> 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? . . . . .		<b>7a</b>	Yes		
<b>b</b> If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .		<b>7b</b>	Yes		
<b>c</b> Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .		<b>7c</b>	Yes		
<b>d</b> If "Yes," indicate the number of Forms 8282 filed during the year . . . . .		<b>7d</b>			
<b>e</b> Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		<b>7e</b>			No
<b>f</b> Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .		<b>7f</b>			No
<b>g</b> If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? . . . . .		<b>7g</b>			
<b>h</b> If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? . . . . .		<b>7h</b>			
<b>8 Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? . . . . .		<b>8</b>			
<b>9a</b> Did the sponsoring organization make any taxable distributions under section 4966? . . . . .		<b>9a</b>			
<b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . . . .		<b>9b</b>			
<b>10 Section 501(c)(7) organizations.</b> Enter					
<b>a</b> Initiation fees and capital contributions included on Part VIII, line 12 . . . . .		<b>10a</b>			
<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		<b>10b</b>			
<b>11 Section 501(c)(12) organizations.</b> Enter					
<b>a</b> Gross income from members or shareholders . . . . .		<b>11a</b>			
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them ) . . . . .		<b>11b</b>			
<b>12a Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?		<b>12a</b>			
<b>b</b> If "Yes," enter the amount of tax-exempt interest received or accrued during the year		<b>12b</b>			
<b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>					
<b>a</b> Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O		<b>13a</b>			
<b>b</b> Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans . . . . .		<b>13b</b>			
<b>c</b> Enter the amount of reserves on hand . . . . .		<b>13c</b>			
<b>14a</b> Did the organization receive any payments for indoor tanning services during the tax year? . . . . .		<b>14a</b>			No
<b>b</b> If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O . . . . .</i>		<b>14b</b>			
<b>15</b> Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N . . . . .		<b>15</b>			No
<b>16</b> Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O . . . . .		<b>16</b>			No

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



Section A. Governing Body and Management

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

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates?; 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?; 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done; 13 Did the organization have a written whistleblower policy?; 14 Did the organization have a written document retention and destruction policy?; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?; 15a The organization's CEO, Executive Director, or top management official; 15b Other officers or key employees of the organization; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?; 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

Table with 2 columns: Question, Answer. Rows include: 17 List the States with which a copy of this Form 990 is required to be filed; 18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. [ ] Own website [ ] Another's website [X] Upon request [ ] Other (explain in Schedule O); 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year; 20 State the name, address, and telephone number of the person who possesses the organization's books and records: YMCA of Northwest North Carolina 301 N Main St Ste 1900 Winston Salem, NC 271013890 (336) 777-6232







**Part VIII Statement of Revenue**

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1a</b> Federated campaigns . . . . .	<b>1a</b> 543,765			
	<b>b</b> Membership dues . . . . .	<b>1b</b> 0			
	<b>c</b> Fundraising events . . . . .	<b>1c</b> 73,009			
	<b>d</b> Related organizations . . . . .	<b>1d</b> 0			
	<b>e</b> Government grants (contributions) . . . . .	<b>1e</b> 491,547			
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above . . . . .	<b>1f</b> 3,388,223			
	<b>g</b> Noncash contributions included in lines 1a - 1f \$ <u>91,802</u>				
	<b>h Total.</b> Add lines 1a-1f . . . . .		4,496,544		

<b>Program Service Revenue</b>			Business Code				
	<b>2a</b> Healthy Living			23,408,775	23,408,775		
	<b>b</b> Youth Development			4,472,516	4,472,516		
	<b>c</b> Social Responsibility			633,392	633,392		
	<b>d</b> _____						
	<b>e</b> _____						
	<b>f</b> All other program service revenue			0	0	0	0
<b>g Total.</b> Add lines 2a-2f . . . . .			28,514,683				

<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts) . . . . .		110,727	0		110,727	
	<b>4</b> Income from investment of tax-exempt bond proceeds . . . . .		0	0	0	0	
	<b>5</b> Royalties . . . . .		0	0	0	0	
	<b>6a</b> Gross rents	(i) Real	(ii) Personal				
		0	0				
	<b>b</b> Less rental expenses	0	0				
	<b>c</b> Rental income or (loss)	0	0				
	<b>d</b> Net rental income or (loss) . . . . .			0	0	0	0
	<b>7a</b> Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		420,662	382,392				
	<b>b</b> Less cost or other basis and sales expenses	432,102	0				
	<b>c</b> Gain or (loss)	-11,440	382,392				
	<b>d</b> Net gain or (loss) . . . . .			370,952	0	0	370,952
	<b>8a</b> Gross income from fundraising events (not including \$ <u>73,009</u> of contributions reported on line 1c) See Part IV, line 18 . . . . .	<b>a</b>	437,475				
	<b>b</b> Less direct expenses . . . . .	<b>b</b>	270,524				
<b>c</b> Net income or (loss) from fundraising events . . . . .			166,951		0	166,951	
<b>9a</b> Gross income from gaming activities See Part IV, line 19 . . . . .	<b>a</b>	0					
<b>b</b> Less direct expenses . . . . .	<b>b</b>	0					
<b>c</b> Net income or (loss) from gaming activities . . . . .			0	0	0	0	
<b>10a</b> Gross sales of inventory, less returns and allowances . . . . .	<b>a</b>	111,943					
<b>b</b> Less cost of goods sold . . . . .	<b>b</b>	60,831					
<b>c</b> Net income or (loss) from sales of inventory . . . . .			51,112	0	0	51,112	
<b>Miscellaneous Revenue</b>		<b>Business Code</b>					
<b>11a0</b>							
<b>b</b> _____							
<b>c</b> _____							
<b>d</b> All other revenue . . . . .			0	0	0	0	
<b>e Total.</b> Add lines 11a-11d . . . . .			0				
<b>12 Total revenue.</b> See Instructions . . . . .			33,710,969	28,514,683	0	699,742	

**Part IX Statement of Functional Expenses**

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

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

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>				
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	3,650	3,650		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22.	41,550	41,550		
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.	21,000	21,000		
<b>4</b> Benefits paid to or for members.	0	0		
<b>5</b> Compensation of current officers, directors, trustees, and key employees.	717,738	106,495	494,824	116,419
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	0	0	0	0
<b>7</b> Other salaries and wages.	14,002,289	12,154,442	1,277,304	570,543
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	999,282	757,504	212,231	29,547
<b>9</b> Other employee benefits.	1,207,798	946,544	207,986	53,268
<b>10</b> Payroll taxes.	1,196,957	1,041,953	122,297	32,707
<b>11</b> Fees for services (non-employees)				
<b>a</b> Management.	0	0	0	0
<b>b</b> Legal.	39,677	15,878	23,799	0
<b>c</b> Accounting.	27,500	0	27,500	0
<b>d</b> Lobbying.	3,995	3,995	0	0
<b>e</b> Professional fundraising services. See Part IV, line 17.	0			0
<b>f</b> Investment management fees.	26,670	0	0	26,670
<b>g</b> Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	1,000,604	537,825	446,386	16,393
<b>12</b> Advertising and promotion.	473,477	371,090	0	102,387
<b>13</b> Office expenses.	1,961,219	1,861,542	45,548	54,129
<b>14</b> Information technology.	840,392	529,558	275,464	35,370
<b>15</b> Royalties.	0	0	0	0
<b>16</b> Occupancy.	6,840,054	6,748,596	84,923	6,535
<b>17</b> Travel.	357,148	270,222	47,074	39,852
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials.	0	0	0	0
<b>19</b> Conferences, conventions, and meetings.	155,283	96,201	41,856	17,226
<b>20</b> Interest.	284,042	284,042	0	0
<b>21</b> Payments to affiliates.	401,816	396,982	4,834	0
<b>22</b> Depreciation, depletion, and amortization.	2,034,149	1,999,979	24,624	9,546
<b>23</b> Insurance.	133,426	120,071	12,815	540
<b>24</b> Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
<b>a</b> Dues.	33,065	18,945	11,170	2,950
<b>b</b> Volunteer recognition.	2,897	796	0	2,101
<b>c</b> Recruitment.	3,691	3,691	0	0
<b>d</b>				
<b>e</b> All other expenses.	0	0	0	0
<b>25</b> Total functional expenses. Add lines 1 through 24e.	32,809,369	28,332,551	3,360,635	1,116,183
<b>26</b> Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).	0	0	0	0

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	42,247	<b>1</b>	42,331
	<b>2</b> Savings and temporary cash investments . . . . .	7,821,465	<b>2</b>	6,209,588
	<b>3</b> Pledges and grants receivable, net . . . . .	967,729	<b>3</b>	508,246
	<b>4</b> Accounts receivable, net . . . . .	697,157	<b>4</b>	959,937
	<b>5</b> Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L . . . . .	0	<b>5</b>	0
	<b>6</b> 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 . . . . .		<b>6</b>	0
	<b>7</b> Notes and loans receivable, net . . . . .	0	<b>7</b>	0
	<b>8</b> Inventories for sale or use . . . . .	0	<b>8</b>	0
	<b>9</b> Prepaid expenses and deferred charges . . . . .	400,355	<b>9</b>	421,175
	<b>10a</b> Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	<b>10a</b> 77,294,598		
	<b>b</b> Less accumulated depreciation	<b>10b</b> 39,477,398	36,994,744	<b>10c</b> 37,817,200
	<b>11</b> Investments—publicly traded securities . . . . .	2,399,909	<b>11</b>	2,225,110
	<b>12</b> Investments—other securities See Part IV, line 11 . . . . .	0	<b>12</b>	
	<b>13</b> Investments—program-related See Part IV, line 11 . . . . .	0	<b>13</b>	
	<b>14</b> Intangible assets . . . . .	0	<b>14</b>	0
	<b>15</b> Other assets See Part IV, line 11 . . . . .	0	<b>15</b>	0
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .		49,323,606	<b>16</b>	48,183,587
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	1,687,337	<b>17</b>	1,236,911
	<b>18</b> Grants payable . . . . .	0	<b>18</b>	0
	<b>19</b> Deferred revenue . . . . .	1,101,198	<b>19</b>	1,411,541
	<b>20</b> Tax-exempt bond liabilities . . . . .	8,963,815	<b>20</b>	7,706,406
	<b>21</b> Escrow or custodial account liability Complete Part IV of Schedule D . . . . .	0	<b>21</b>	0
	<b>22</b> 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 . . . . .		<b>22</b>	0
	<b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .	623,384	<b>23</b>	467,532
	<b>24</b> Unsecured notes and loans payable to unrelated third parties . . . . .	0	<b>24</b>	0
	<b>25</b> 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 . . . . .	475,475	<b>25</b>	200,320
	<b>26 Total liabilities.</b> Add lines 17 through 25 . . . . .		12,851,209	<b>26</b>
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets	32,580,013	<b>27</b>	33,993,445
	<b>28</b> Temporarily restricted net assets . . . . .	2,434,092	<b>28</b>	1,731,750
	<b>29</b> Permanently restricted net assets . . . . .	1,458,292	<b>29</b>	1,435,682
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds . . . . .	0	<b>30</b>	0
	<b>31</b> Paid-in or capital surplus, or land, building or equipment fund . . . . .	0	<b>31</b>	0
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds . . . . .	0	<b>32</b>	0
<b>33</b> Total net assets or fund balances . . . . .		36,472,397	<b>33</b>	37,160,877
<b>34</b> Total liabilities and net assets/fund balances . . . . .		49,323,606	<b>34</b>	48,183,587

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	33,710,969
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	32,809,369
<b>3</b>	Revenue less expenses Subtract line 2 from line 1	<b>3</b>	901,600
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	36,472,397
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	-213,120
<b>6</b>	Donated services and use of facilities	<b>6</b>	0
<b>7</b>	Investment expenses	<b>7</b>	0
<b>8</b>	Prior period adjustments	<b>8</b>	0
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	0
<b>10</b>	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	37,160,877

**Part XII Financial Statements and Reporting**

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

- 1** Accounting method used to prepare the Form 990  Cash  Accrual  Other \_\_\_\_\_  
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?  
 If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?  
 If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- c** If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
<b>2a</b>		No
<b>2b</b>	Yes	
<b>2c</b>	Yes	
<b>3a</b>		No
<b>3b</b>		

## Additional Data

**Software ID:** 18007697

**Software Version:** 2018v3.1

**EIN:** 56-0530015

**Name:** Young Men's Christian Association of Northwest North  
Carolina (4626)

Form 990 (2018)

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### **Form 990, Part III, Line 4a:**

Healthy Living-The Y is a leading voice on health and well-being. We bring families closer together, encourage good health, and foster connections through fitness, sports, fun, and shared interests. As a result, 156,547 people in our community received the support, guidance, and resources they needed to achieve greater health in spirit, mind, and body. This support is particularly important as our nation struggles with an obesity crisis and increasingly high rates of preventable diseases, families struggle with work/life balance, and individuals search for personal fulfillment. The Y is a place for people of all ages to pursue wellness goals, whether it is young children learning lifelong healthy habits, adults working to prevent chronic disease through exercise and nutrition, or seniors maintaining a high quality of life through physical activity and friendship. Our programs are accessible, affordable, and open to all faiths, backgrounds, abilities, and income levels. In 2018, we provided \$2,251,671 of direct financial assistance to people who otherwise would have faced economic barriers to participation. For additional details regarding these critical programs and their impact, see Schedule O.

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**Form 990, Part III, Line 4b:**

Youth Development - Our YMCA is committed to nurturing the potential of every child and teen. We believe that all kids deserve the opportunity to discover who they are and what they can achieve. That's why we help young people cultivate the values, skills, and relationships that lead to positive behaviors, better health, and educational achievement. Our YMCA programs (such as Child Care, Camping, Youth and Government, Summer Learning Academies, and Black and Latino Achievers) offer a range of experiences that enrich cognitive, social, physical, and emotional growth. Expenses include subsidies and direct financial assistance that make participation possible for many of the young people we engage. For additional details regarding these critical programs and their impact, see Schedule O.

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### **Form 990, Part III, Line 4c:**

Social Responsibility - Our YMCA believes in giving back and supporting our neighbors. We have been listening and responding to our communities' most critical social needs for 130 years. In 2018, we provided \$2,251,671 of direct financial assistance to people who otherwise would have faced economic barriers to participation. Y programs, such as our literacy initiative, English as a second language, outdoor education, and partnerships with under-served communities are examples of how we deliver training, resources, and support that empower our neighbors to effect change, bridge gaps, and overcome obstacles. In 2018, we engaged over 13,000 YMCA members, participants, and volunteers in activities that strengthen our community and pave the way for future generations to thrive. For additional details regarding these critical programs and their impact, see Schedule O.

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Edie Holland Chief Volunteer Officer	4 0 .....	X		X				0	0	0
Chris Parker Vice Chair/CVO Elect	3 0 .....	X		X				0	0	0
Jim Smoak Treasurer/Finance Committee Chair	3 0 .....	X		X				0	0	0
Simpson (Skip) Brown Secretary	3 0 .....	X		X				0	0	0
David Hinton Audit Committee Chair	2 0 .....	X						0	0	0
Max Smith HR Committee Chair	2 0 .....	X						0	0	0
Gayle Anderson Director	2 0 .....	X						0	0	0
Susan Bachmeier Director	2 0 .....	X						0	0	0
Barbara Carter Director	2 0 .....	X						0	0	0
Michael Clements Director	2 0 .....	X						0	0	0



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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Instructional Trustee	Officer	Key employee	Highest compensated employee	Former			
Galen Craun Director	20 .....	X						0	0	0
J Wesley Davis Director	20 .....	X						0	0	0
The Honorable Chester Davis Director	20 .....	X						0	0	0
Rob Davis Director	20 .....	X						0	0	0
Victor Isler Director	20 .....	X						0	0	0
Ashley Kohlrus Director	20 .....	X						0	0	0
Molly Kremdas Director	20 .....	X						0	0	0
Duane Long Director	20 .....	X						0	0	0
Jay Luke Director	20 .....	X						0	0	0
Sylvia Oberle Director	20 .....	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
David R Plyler Director	20 .....	X						0	0	0
Norman D Potter Director	20 .....	X						0	0	0
David Spross Director	20 .....	X						0	0	0
Fred Trivette Director	20 .....	X						0	0	0
Linda Wood Director	20 .....	X						0	0	0
Stan Law President/CEO	550 .....			X				275,208	0	44,312
Donna Rodgers Senior VP/CFO	550 .....			X				168,049	0	32,267
Darryl Head Senior VP/COO	550 .....				X			161,317	0	36,586
Carrie Collins VP/CMO/CDO	500 .....				X			133,203	0	15,343
Sherry Lee VP/CHRO	500 .....				X			104,301	0	25,396

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Rosemary Suess VP of Operations	50 0 .....					X		102,336	0	17,890

**SCHEDULE A**  
**(Form 990 or**  
**990EZ)**

**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.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**2018**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

**Name of the organization**

Young Men's Christian Association of Northwest North Carolina (4626)

**Employer identification number**

56-0530015

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

The organization is not a private foundation because it is (For lines 1 through 12, check only one box.)

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2  A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ) )
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state \_\_\_\_\_
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II )
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II )
- 8  A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II )
- 9  An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture See instructions Enter the name, city, and state of the college or university \_\_\_\_\_
- 10  An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III )
- 11  An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 12  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 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g
  - a  **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**
  - b  **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**
  - c  **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**
  - d  **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**
  - e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization
  - f Enter the number of supported organizations \_\_\_\_\_
  - g Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
<b>Total</b>						

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv), 170(b)(1)(A)(vi), and 170(b)(1)(A)(ix)**

(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶		(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
<b>1</b>	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant.")	5,345,909	5,035,248	4,816,697	5,446,023	4,496,544	25,140,421
<b>2</b>	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0		0
<b>3</b>	The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0		0
<b>4</b>	<b>Total.</b> Add lines 1 through 3	5,345,909	5,035,248	4,816,697	5,446,023	4,496,544	25,140,421
<b>5</b>	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						508,088
<b>6</b>	<b>Public support.</b> Subtract line 5 from line 4						24,632,333

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶		(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
<b>7</b>	Amounts from line 4	5,345,909	5,035,248	4,816,697	5,446,023	4,496,544	25,140,421
<b>8</b>	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	85,173	83,994	74,351	100,931	110,727	455,176
<b>9</b>	Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	0	0	0
<b>10</b>	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	0	0	0	0	0	0
<b>11</b>	<b>Total support.</b> Add lines 7 through 10						25,595,597
<b>12</b>	Gross receipts from related activities, etc. (see instructions)					<b>12</b>	137,959,220

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

**Section C. Computation of Public Support Percentage**

<b>14</b>	Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	<b>14</b>	96.24 %
<b>15</b>	Public support percentage for 2017 (Schedule A, Part II, line 14)	<b>15</b>	96.46 %

**16a 33 1/3% support test—2018.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization  ▶

**b 33 1/3% support test—2017.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization  ▶

**17a 10%-facts-and-circumstances test—2018.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization  ▶

**b 10%-facts-and-circumstances test—2017.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization  ▶

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

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►		(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
<b>1</b>	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
<b>2</b>	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
<b>3</b>	Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b>	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b>	The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6</b>	<b>Total.</b> Add lines 1 through 5						
<b>7a</b>	Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</b>	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
<b>c</b>	Add lines 7a and 7b						
<b>8</b>	<b>Public support.</b> (Subtract line 7c from line 6)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►		(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
<b>9</b>	Amounts from line 6						
<b>10a</b>	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b>	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b>	Add lines 10a and 10b						
<b>11</b>	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b>	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
<b>13</b>	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)						

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

**Section C. Computation of Public Support Percentage**

<b>15</b>	Public support percentage for 2018 (line 8, column (f) divided by line 13, column (f))	<b>15</b>	
<b>16</b>	Public support percentage from 2017 Schedule A, Part III, line 15	<b>16</b>	

**Section D. Computation of Investment Income Percentage**

<b>17</b>	Investment income percentage for <b>2018</b> (line 10c, column (f) divided by line 13, column (f))	<b>17</b>	
<b>18</b>	Investment income percentage from <b>2017</b> Schedule A, Part III, line 17	<b>18</b>	

**19a 33 1/3% support tests—2018.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ►

**b 33 1/3% support tests—2017.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ►

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

**Part IV Supporting Organizations**

(Complete only if you checked a box on line 12 of Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

		Yes	No
<b>1</b>	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
	<b>1</b>		
<b>2</b>	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
	<b>2</b>		
<b>3a</b>	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
	<b>3a</b>		
<b>b</b>	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.		
	<b>3b</b>		
<b>c</b>	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.		
	<b>3c</b>		
<b>4a</b>	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.		
	<b>4a</b>		
<b>b</b>	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
	<b>4b</b>		
<b>c</b>	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
	<b>4c</b>		
<b>5a</b>	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).		
	<b>5a</b>		
<b>b</b>	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
	<b>5b</b>		
<b>c</b>	<b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
	<b>5c</b>		
<b>6</b>	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in <b>Part VI</b> .		
	<b>6</b>		
<b>7</b>	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
	<b>7</b>		
<b>8</b>	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
	<b>8</b>		
<b>9a</b>	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .		
	<b>9a</b>		
<b>b</b>	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .		
	<b>9b</b>		
<b>c</b>	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI</b> .		
	<b>9c</b>		
<b>10a</b>	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.		
	<b>10a</b>		
<b>b</b>	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		
	<b>10b</b>		

**Part IV Supporting Organizations** (continued)

		Yes	No
<b>11</b>	Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b>	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
<b>b</b>	A family member of a person described in (a) above?		
<b>c</b>	A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI</i>		

**Section B. Type I Supporting Organizations**

		Yes	No
<b>1</b>	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
<b>2</b>	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		

**Section C. Type II Supporting Organizations**

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

**Section D. All Type III Supporting Organizations**

		Yes	No
<b>1</b>	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
<b>2</b>	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
<b>3</b>	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

**Section E. Type III Functionally-Integrated Supporting Organizations**

<b>1</b>	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year ( <b>see instructions</b> )		
<b>a</b>	<input type="checkbox"/> The organization satisfied the Activities Test. Complete <b>line 2</b> below.		
<b>b</b>	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete <b>line 3</b> below.		
<b>c</b>	<input type="checkbox"/> The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see instructions).		
<b>2</b>	Activities Test <b>Answer (a) and (b) below.</b>		
<b>a</b>	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? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	Yes	No
<b>b</b>	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
<b>3</b>	Parent of Supported Organizations <b>Answer (a) and (b) below.</b>		
<b>a</b>	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
<b>b</b>	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		



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

- Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

<b>Section A - Adjusted Net Income</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b>	Net short-term capital gain	<b>1</b>	
<b>2</b>	Recoveries of prior-year distributions	<b>2</b>	
<b>3</b>	Other gross income (see instructions)	<b>3</b>	
<b>4</b>	Add lines 1 through 3	<b>4</b>	
<b>5</b>	Depreciation and depletion	<b>5</b>	
<b>6</b>	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	<b>6</b>	
<b>7</b>	Other expenses (see instructions)	<b>7</b>	
<b>8</b>	<b>Adjusted Net Income</b> (subtract lines 5, 6 and 7 from line 4)	<b>8</b>	
<b>Section B - Minimum Asset Amount</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b>	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	<b>1</b>	
<b>a</b>	Average monthly value of securities	<b>1a</b>	
<b>b</b>	Average monthly cash balances	<b>1b</b>	
<b>c</b>	Fair market value of other non-exempt-use assets	<b>1c</b>	
<b>d</b>	<b>Total</b> (add lines 1a, 1b, and 1c)	<b>1d</b>	
<b>e</b>	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI)		
<b>2</b>	Acquisition indebtedness applicable to non-exempt use assets	<b>2</b>	
<b>3</b>	Subtract line 2 from line 1d	<b>3</b>	
<b>4</b>	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	<b>4</b>	
<b>5</b>	Net value of non-exempt-use assets (subtract line 4 from line 3)	<b>5</b>	
<b>6</b>	Multiply line 5 by .035	<b>6</b>	
<b>7</b>	Recoveries of prior-year distributions	<b>7</b>	
<b>8</b>	<b>Minimum Asset Amount</b> (add line 7 to line 6)	<b>8</b>	
<b>Section C - Distributable Amount</b>			Current Year
<b>1</b>	Adjusted net income for prior year (from Section A, line 8, Column A)	<b>1</b>	
<b>2</b>	Enter 85% of line 1	<b>2</b>	
<b>3</b>	Minimum asset amount for prior year (from Section B, line 8, Column A)	<b>3</b>	
<b>4</b>	Enter greater of line 2 or line 3	<b>4</b>	
<b>5</b>	Income tax imposed in prior year	<b>5</b>	
<b>6</b>	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	<b>6</b>	
<b>7</b>	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

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

<b>Section D - Distributions</b>	<b>Current Year</b>
<b>1</b> Amounts paid to supported organizations to accomplish exempt purposes	
<b>2</b> Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
<b>3</b> Administrative expenses paid to accomplish exempt purposes of supported organizations	
<b>4</b> Amounts paid to acquire exempt-use assets	
<b>5</b> Qualified set-aside amounts (prior IRS approval required)	
<b>6</b> Other distributions (describe in <b>Part VI</b> ) See instructions	
<b>7 Total annual distributions.</b> Add lines 1 through 6	
<b>8</b> Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ) See instructions	
<b>9</b> Distributable amount for 2018 from Section C, line 6	
<b>10</b> Line 8 amount divided by Line 9 amount	

<b>Section E - Distribution Allocations (see instructions)</b>	<b>(i) Excess Distributions</b>	<b>(ii) Underdistributions Pre-2018</b>	<b>(iii) Distributable Amount for 2018</b>
<b>1</b> Distributable amount for 2018 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2018 (reasonable cause required-- explain in Part VI) See instructions			
<b>3</b> Excess distributions carryover, if any, to 2018			
<b>a</b> From 2013. . . . .			
<b>b</b> From 2014. . . . .			
<b>c</b> From 2015. . . . .			
<b>d</b> From 2016. . . . .			
<b>e</b> From 2017. . . . .			
<b>f Total</b> of lines 3a through e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2018 distributable amount			
<b>i</b> Carryover from 2013 not applied (see instructions)			
<b>j</b> Remainder Subtract lines 3g, 3h, and 3i from 3f			
<b>4</b> Distributions for 2018 from Section D, line 7 \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2018 distributable amount			
<b>c</b> Remainder Subtract lines 4a and 4b from 4			
<b>5</b> Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions			
<b>6</b> Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions			
<b>7 Excess distributions carryover to 2019.</b> Add lines 3j and 4c			
<b>8</b> Breakdown of line 7			
<b>a</b> Excess from 2014. . . . .			
<b>b</b> Excess from 2015. . . . .			
<b>c</b> Excess from 2016. . . . .			
<b>d</b> Excess from 2017. . . . .			
<b>e</b> Excess from 2018. . . . .			

## Additional Data

**Software ID:** 18007697

**Software Version:** 2018v3.1

**EIN:** 56-0530015

**Name:** Young Men's Christian Association of Northwest North  
Carolina (4626)

**Part VI Supplemental Information.** Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions)

**Facts And Circumstances Test**

**SCHEDULE C**  
(Form 990 or 990-EZ)  
  
Department of the Treasury  
Internal Revenue Service

**Political Campaign and Lobbying Activities**  
For Organizations Exempt From Income Tax Under section 501(c) and section 527  
  
▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.  
▶Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No 1545-0047  
  
**2018**  
  
**Open to Public Inspection**

**If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then**

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

**If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then**

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

**If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then**

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

Name of the organization Young Men's Christian Association of Northwest North Carolina (4626)	<b>Employer identification number</b> 56-0530015
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**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities")
- 2 Political campaign activity expenditures (see instructions) ▶ \$ \_\_\_\_\_
- 3 Volunteer hours for political campaign activities (see instructions) \_\_\_\_\_

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

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ \_\_\_\_\_
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ \_\_\_\_\_
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?  Yes  No
- 4a Was a correction made?  Yes  No
- b If "Yes," describe in Part IV

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

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ \_\_\_\_\_
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ \_\_\_\_\_
- 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ \$ \_\_\_\_\_
- 4 Did the filing organization file **Form 1120-POL** for this year?  Yes  No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
1				
2				
3				
4				
5				
6				

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

- A** Check  if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B** Check  if the filing organization checked box A and "limited control" provisions apply

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
<b>1a</b>	Total lobbying expenditures to influence public opinion (grass roots lobbying)	0													
<b>b</b>	Total lobbying expenditures to influence a legislative body (direct lobbying)	3,995													
<b>c</b>	Total lobbying expenditures (add lines 1a and 1b)	3,995													
<b>d</b>	Other exempt purpose expenditures	32,778,704													
<b>e</b>	Total exempt purpose expenditures (add lines 1c and 1d)	32,782,699													
<b>f</b>	Lobbying nontaxable amount Enter the amount from the following table in both columns	1,000,000	0												
<table border="1" style="width: 100%;"> <thead> <tr> <th style="width: 50%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width: 50%;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
<b>g</b>	Grassroots nontaxable amount (enter 25% of line 1f)	250,000													
<b>h</b>	Subtract line 1g from line 1a If zero or less, enter -0-	0													
<b>i</b>	Subtract line 1f from line 1c If zero or less, enter -0-	0													
<b>j</b>	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No													

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

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
<b>2a</b> Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
<b>c</b> Total lobbying expenditures	4,290	4,742	4,486	3,995	17,513
<b>d</b> Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
<b>f</b> Grassroots lobbying expenditures	0	0	0	0	0

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

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity

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

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

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

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

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

**Part IV Supplemental Information**

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

Return Reference	Explanation
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**SCHEDULE D**  
(Form 990)  
  
Department of the Treasury  
Internal Revenue Service

# Supplemental Financial Statements

OMB No 1545-0047  
**2018**  
**Open to Public Inspection**

▶ **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.**  
▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.**

**Name of the organization**  
Young Men's Christian Association of Northwest North Carolina (4626)

**Employer identification number**  
56-0530015

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

	(a) Donor advised funds	(b) Funds and other accounts
<b>1</b> Total number at end of year		
<b>2</b> Aggregate value of contributions to (during year)		
<b>3</b> Aggregate value of grants from (during year)		
<b>4</b> Aggregate value at end of year		
<b>5</b> Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>6</b> Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

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

Preservation of land for public use (e g , recreation or education)       Preservation of an historically important land area

Protection of natural habitat       Preservation of a certified historic structure

Preservation of open space

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

	Held at the End of the Year
<b>a</b> Total number of conservation easements	<b>2a</b>
<b>b</b> Total acreage restricted by conservation easements	<b>2b</b>
<b>c</b> Number of conservation easements on a certified historic structure included in (a)	<b>2c</b>
<b>d</b> Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	<b>2d</b>

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

**4** Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_

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

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

**7** Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ \_\_\_\_\_

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

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

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

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

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

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

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

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

**a** Revenue included on Form 990, Part VIII, line 1 ▶ \$ \_\_\_\_\_

**b** Assets included in Form 990, Part X ▶ \$ \_\_\_\_\_

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

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)
- a**  Public exhibition
  - b**  Scholarly research
  - c**  Preservation for future generations
  - d**  Loan or exchange programs
  - e**  Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements.**

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

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table
- |  | Amount |
|--|--------|
| <b>c</b> Beginning balance             |        |
| <b>d</b> Additions during the year     |        |
| <b>e</b> Distributions during the year |        |
| <b>f</b> Ending balance                |        |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . .  Yes  No
- b** If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII . . . .

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1a</b> Beginning of year balance . . . . .	2,428,945	2,159,128	1,937,715	2,030,004	1,945,640
<b>b</b> Contributions . . . . .	12,069	33,652	135,130	60,017	57,037
<b>c</b> Net investment earnings, gains, and losses	-128,413	278,486	119,158	-49,280	93,367
<b>d</b> Grants or scholarships . . . . .	0	0	0	0	0
<b>e</b> Other expenditures for facilities and programs . . . . .	60,821	16,680	9,821	79,839	43,136
<b>f</b> Administrative expenses . . . . .	26,670	25,641	23,054	23,187	22,904
<b>g</b> End of year balance . . . . .	2,225,110	2,428,945	2,159,128	1,937,715	2,030,004

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as
- a** Board designated or quasi-endowment ▶ 35 48 %
  - b** Permanent endowment ▶ 64 52 %
  - c** Temporarily restricted endowment ▶ 0 %
- The percentages on lines 2a, 2b, and 2c should equal 100%
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by
- |  |     |    |
|--|-----|----|
|  | Yes | No |
| <b>(i)</b> unrelated organizations . . . . .   | Yes |    |
| <b>(ii)</b> related organizations . . . . .  |     | No |
| <b>b</b> If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? . . . . . |     |    |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds

**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land . . . . .	160,000	5,294,165		5,454,165
<b>b</b> Buildings . . . . .	0	47,488,624	24,150,428	23,338,196
<b>c</b> Leasehold improvements	0	1,795,656	1,709,432	86,224
<b>d</b> Equipment . . . . .	0	6,108,301	4,436,516	1,671,785
<b>e</b> Other . . . . .	0	16,447,852	9,181,022	7,266,830
<b>Total.</b> Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) . . . ▶				37,817,200



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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives . . . . .		
(2) Closely-held equity interests . . . . .		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 12 )	▶	

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

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 13 )	▶	

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 15 )	▶

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
Refundable Advances	0
Other liabilities	200,320
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 25 )	▶ 200,320

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

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

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

<b>1</b>	Total revenue, gains, and other support per audited financial statements . . . . .		<b>1</b>	33,471,179
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
<b>a</b>	Net unrealized gains (losses) on investments . . . . .	<b>2a</b>	-213,120	
<b>b</b>	Donated services and use of facilities . . . . .	<b>2b</b>	0	
<b>c</b>	Recoveries of prior year grants . . . . .	<b>2c</b>	0	
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>	0	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .		<b>2e</b>	-213,120
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .		<b>3</b>	33,684,299
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b> :			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	26,670	
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>	0	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .		<b>4c</b>	26,670
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12 ) . . . . .		<b>5</b>	33,710,969

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

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

<b>1</b>	Total expenses and losses per audited financial statements . . . . .		<b>1</b>	32,782,699
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25			
<b>a</b>	Donated services and use of facilities . . . . .	<b>2a</b>	0	
<b>b</b>	Prior year adjustments . . . . .	<b>2b</b>	0	
<b>c</b>	Other losses . . . . .	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>	0	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .		<b>2e</b>	0
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .		<b>3</b>	32,782,699
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line <b>1</b> :			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	26,670	
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>	0	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .		<b>4c</b>	26,670
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18 ) . . . . .		<b>5</b>	32,809,369

**Part XIII Supplemental Information**

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

Return Reference	Explanation
See Additional Data Table	

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

Return Reference	Explanation

## Additional Data

**Software ID:** 18007697  
**Software Version:** 2018v3.1  
**EIN:** 56-0530015  
**Name:** Young Men's Christian Association of Northwest North Carolina (4626)

## Supplemental Information

Return Reference	Explanation
Schedule D, Part V, Line 4 Intended uses of endowment funds	The endowment fund is composed of gifts, bequests and charitable remainder trusts contributed to the YMCA of Northwest North Carolina. The fund is made up of both donor-designated gifts and board-designated gifts and the accumulated earnings on them. The intention is that, aside from the annual spending allowance, these funds will be held in perpetuity. * As required by the Uniform Prudent Management of Institutional Funds Act (UPMIFA), appropriations from the Fund are subject to the specific limitations, if any, contained in an applicable gift instrument. * Remaining annual appropriations will be the amount of interest and dividends earned in the previous 12 months as of June 30 each year, but will be limited to no greater than 4% of the 3-year trailing average of the June 30s market value of the Fund. * Calculations of the appropriations from the Fund will be made as part of the annual budgeting process so that amounts to be used in the operations of the YMCA for the following fiscal year will be known when the operating budget is prepared. This spending policy will be reviewed annually as part of the budgeting process. Investment managers will be given ample notice of the required withdrawal schedule. Appropriate liquidity should be maintained to fund these withdrawals without impairing the investment process.

## Supplemental Information

Return Reference	Explanation
Schedule D, Part X, Line 2 FIN 48 (ASC 740) footnote	The YMCA of Northwest North Carolina (Association) is entitled to exemption from federal and North Carolina income taxation under Section 501(c)(3) of the Internal Revenue Code as a charitable organization, accordingly, the accompanying financial statements do not reflect a provision or liability for federal and state income taxes. The Association has determined that it does not have any material unrecognized tax benefits or obligations as of December 31, 2018.

**SCHEDULE F  
(Form 990)**  
  
Department of the Treasury  
Internal Revenue Service

# Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.  
▶ Attach to Form 990.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No 1545-0047  
**2018**  
**Open to Public Inspection**

Name of the organization  
Young Men's Christian Association of Northwest North Carolina (4626)

**Employer identification number**  
56-0530015

**Part I** **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

- 1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States
- 3** Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed )

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
( 1 )					
( 2 )					
( 3 )					
( 4 )					
( 5 )					
<b>3a</b> Sub-total					
<b>b</b> Total from continuation sheets to Part I					
<b>c Totals</b> (add lines 3a and 3b)					

**Part II Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
( 1 )		Russia and Neighboring States	HIV/AIDS EDUCATION/YOUTH SPORTS/CAMPING/THE ARTS	21,000	CHECK			
( 2 )								
( 3 )								
( 4 )								

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . .	▶ 1
3 Enter total number of other organizations or entities . . . . .	▶ 0

**Part III Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
( 1 )							
( 2 )							
( 3 )							
( 4 )							
( 5 )							
( 6 )							
( 7 )							
( 8 )							
( 9 )							
( 10 )							
( 11 )							
( 12 )							
( 13 )							
( 14 )							
( 15 )							
( 16 )							
( 17 )							
( 18 )							



**Part IV Foreign Forms**

- 1 Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)*  Yes  No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A, don't file with Form 990)*  Yes  No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U S Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)*  Yes  No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)*  Yes  No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U S Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)*  Yes  No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713, don't file with Form 990)*  Yes  No



**SCHEDULE G  
(Form 990 or 990-EZ)**

**Supplemental Information Regarding  
Fundraising or Gaming Activities**

OMB No 1545-0047

**2018**

**Open to Public  
Inspection**

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

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information

Department of the Treasury  
Internal Revenue Service

Name of the organization  
Young Men's Christian Association of Northwest North Carolina (4626)

Employer identification number  
56-0530015

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

- 1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a**  Mail solicitations
  - b**  Internet and email solicitations
  - c**  Phone solicitations
  - d**  In-person solicitations
  - e**  Solicitation of non-government grants
  - f**  Solicitation of government grants
  - g**  Special fundraising events
- 2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  Yes  No
- b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization

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

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

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

Revenue		(a) Event #1	(b) Event #2	(c) Other events	(d)
		Mistletoe (event type)	Golf Tournament (event type)	26 (total number)	Total events (add col (a) through col (c))
Revenue	<b>1</b> Gross receipts . . . . .	146,805	55,994	293,108	495,907
	<b>2</b> Less Contributions . . . . .	32,000	41,009	0	73,009
	<b>3</b> Gross income (line 1 minus line 2) . . . . .	114,805	14,985	293,108	422,898
Direct Expenses	<b>4</b> Cash prizes . . . . .	0	0	0	0
	<b>5</b> Noncash prizes . . . . .	3,157	6,500	4,502	14,159
	<b>6</b> Rent/facility costs . . . . .	4,892	9,481	47,504	61,877
	<b>7</b> Food and beverages . . . . .	85	8,000	15,103	23,188
	<b>8</b> Entertainment . . . . .	350	0	1,653	2,003
	<b>9</b> Other direct expenses . . . . .	62,168	3,504	95,505	161,177
	<b>10</b> Direct expense summary Add lines 4 through 9 in column (d) . . . . . ▶				262,404
	<b>11</b> Net income summary Subtract line 10 from line 3, column (d) . . . . . ▶				160,494

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

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

**9** Enter the state(s) in which the organization conducts gaming activities \_\_\_\_\_

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

**b** If "No," explain \_\_\_\_\_

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

**b** If "Yes," explain \_\_\_\_\_

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- 11** Does the organization conduct gaming activities with nonmembers?  Yes  No
- 12** Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  Yes  No
- 13** Indicate the percentage of gaming activity conducted in
 

<b>a</b>	The organization's facility	<b>13a</b>	%
<b>b</b>	An outside facility	<b>13b</b>	%

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

Name ▶ .....  
 Address ▶ .....

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

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

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

Name ▶ .....  
 Address ▶ .....

**16** Gaming manager information

Name ▶ .....  
 Gaming manager compensation ▶ \$ .....  
 Description of services provided ▶ .....

Director/officer                       Employee                       Independent contractor

**17** Mandatory distributions

- a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  Yes  No
- b** Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ \_\_\_\_\_

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

Return Reference	Explanation
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Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I (Form 990)

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.
Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization Young Men's Christian Association of Northwest North Carolina (4626)

Employer identification number

56-0530015

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed

Table with 8 columns: (a) Name and address of organization or government, (b) EIN, (c) IRC section (if applicable), (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation (book, FMV, appraisal, other), (g) Description of noncash assistance, (h) Purpose of grant or assistance. Rows numbered (1) through (12).

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

**Part III Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22

Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) BLACK ACHIEVERS SCHOLARSHIPS - 17	17	31,050			
(2) LATINO ACHIEVERS - 6	6	7,500			
(3) STOKES FAMILY YMCA SCHOLARSHIPS - 3	3	3,000			
(3)					
(4)					
(5)					
(6)					
(7)					

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

Return Reference	Explanation
Schedule I, Part I, Line 2 Procedures for monitoring use of grant funds	<p>Black Achievers Scholarships - All participating high school seniors who were program participants as of the beginning of the previous school year are eligible for scholarships and/or cash awards. Scholarship recipients must complete a two-phase application process that includes submission of their high school transcript, SAT test scores, an essay that elaborates on the students' aspirations, career options, and strengths and weaknesses. The second phase of the application is an interview process. A point system is followed by the Scholarship Committee to evaluate and rank each applicant on the above areas. Payments are made directly to the college or university which the student will be attending after proof of acceptance is supplied to the Scholarship Committee. Cash awards are also made directly to the college/university each participant is attending on their behalf based on the number of career cluster meetings they have attended since their junior year of high school.</p> <p>Latino Achievers Scholarships - All participating high school seniors who were active program participants, attending more than 4 annual meetings, as of the beginning of the previous school year are eligible for scholarships awards. Scholarship recipients must complete a two-phase application process that includes submission of their high school transcript, two letters of recommendation, an essay that elaborates on the students' aspirations and a personal statement that describes their participation in our program, intended majors, high school involvement, and future plans. The second phase of the application is the blind selection process. A point system is followed by the Scholarship Committee to evaluate and rank each applicant on the above areas. Payments are made directly to the college or university which the student will be attending after proof of acceptance is supplied to the Scholarship Committee.</p> <p>Stokes Family YMCA College Scholarships - Applications from local high school seniors are accepted and evaluated by a group of volunteers and/or staff based on financial need, scholastic achievements, community involvement, volunteer hours, YMCA involvement and spirituality. Finalists are chosen from the applications - up to 3 from each high school. Once the final three recipients are selected, they are narrowed to one recipient at each high school based upon their financial need and how they plan to use the scholarship if selected, combined with the criteria stated earlier. Cash awards are made directly to the college/university of each recipient to be used for tuition only.</p>

**Schedule J**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

## Compensation Information

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

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 23.**  
▶ **Attach to Form 990.**  
▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

OMB No 1545-0047

# 2018

**Open to Public Inspection**

Name of the organization  
Young Men's Christian Association of Northwest North Carolina (4626)

Employer identification number  
56-0530015

**Part I Questions Regarding Compensation**

	Yes	No		
<p><b>1a</b> Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> First-class or charter travel  <input type="checkbox"/> Travel for companions  <input type="checkbox"/> Tax indemnification and gross-up payments  <input type="checkbox"/> Discretionary spending account                 </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Housing allowance or residence for personal use  <input type="checkbox"/> Payments for business use of personal residence  <input type="checkbox"/> Health or social club dues or initiation fees  <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)                 </td> </tr> </table>	<input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
<input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)			
<p><b>b</b> If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain</p>	<b>1b</b>			
<p><b>2</b> Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?</p>	<b>2</b>			
<p><b>3</b> Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input checked="" type="checkbox"/> Compensation committee  <input type="checkbox"/> Independent compensation consultant  <input checked="" type="checkbox"/> Form 990 of other organizations                 </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Written employment contract  <input type="checkbox"/> Compensation survey or study  <input checked="" type="checkbox"/> Approval by the board or compensation committee                 </td> </tr> </table>	<input checked="" type="checkbox"/> Compensation committee <input type="checkbox"/> Independent compensation consultant <input checked="" type="checkbox"/> Form 990 of other organizations	<input type="checkbox"/> Written employment contract <input type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee		
<input checked="" type="checkbox"/> Compensation committee <input type="checkbox"/> Independent compensation consultant <input checked="" type="checkbox"/> Form 990 of other organizations	<input type="checkbox"/> Written employment contract <input type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee			
<p><b>4</b> During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:</p> <p><b>a</b> Receive a severance payment or change-of-control payment?</p> <p><b>b</b> Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p> <p><b>c</b> Participate in, or receive payment from, an equity-based compensation arrangement?</p> <p>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</p>	<b>4a</b>	No		
	<b>4b</b>	No		
	<b>4c</b>	No		
<p><b>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</b></p> <p><b>5</b> For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:</p> <p><b>a</b> The organization?</p> <p><b>b</b> Any related organization?</p> <p>If "Yes," on line 5a or 5b, describe in Part III.</p>	<b>5a</b>	No		
	<b>5b</b>	No		
<p><b>6</b> For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:</p> <p><b>a</b> The organization?</p> <p><b>b</b> Any related organization?</p> <p>If "Yes," on line 6a or 6b, describe in Part III.</p>	<b>6a</b>	No		
	<b>6b</b>	No		
<p><b>7</b> For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.</p>	<b>7</b>	No		
<p><b>8</b> Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.</p>	<b>8</b>	No		
<p><b>9</b> If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>	<b>9</b>			





**Part III** Supplemental Information

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

Return Reference	Explanation
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Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

**Schedule K  
(Form 990)**

**Supplemental Information on Tax-Exempt Bonds**

▶ **Complete if the organization answered "Yes" to Form 990, Part VI, line 24a. Provide descriptions, explanations, and any additional information in Part VI.**  
 ▶ **Attach to Form 990.**  
 ▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.**

OMB No 1545-0047

**2018**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

Name of the organization  
Young Men's Christian Association of Northwest North Carolina (4626)

**Employer identification number**  
56-0530015

**Part I Bond Issues**

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
						Yes	No	Yes	No	Yes	No
<b>A</b> Public Finance Authority	27-3866124		04-01-2014	3,000,000	Recreational Facilities Bond		X		X		X
<b>B</b> Public Finance Authority	27-3866124		04-01-2014	5,000,000	Recreational Facilities Bond		X		X		X
<b>C</b> Public Finance Authority	27-3866124		04-01-2014	2,346,744	Recreational Facilities Bond		X		X		X
<b>D</b> Public Finance Authority	27-3866124		04-01-2014	2,800,000	Recreational Facilities Bond		X		X		X

**Part II Proceeds**

	<b>A</b>		<b>B</b>		<b>C</b>		<b>D</b>	
<b>1</b> Amount of bonds retired . . . . .	3,000,000		5,000,000		1,000,000		0	
<b>2</b> Amount of bonds legally defeased . . . . .	0		0		0		0	
<b>3</b> Total proceeds of issue . . . . .	3,000,000		5,000,000		2,346,744		2,800,000	
<b>4</b> Gross proceeds in reserve funds . . . . .	0		0		0		0	
<b>5</b> Capitalized interest from proceeds . . . . .	0		0		0		0	
<b>6</b> Proceeds in refunding escrows . . . . .	0		0		0		0	
<b>7</b> Issuance costs from proceeds . . . . .	0		0		200,000		0	
<b>8</b> Credit enhancement from proceeds . . . . .	0		0		0		0	
<b>9</b> Working capital expenditures from proceeds . . . . .	0		0		0		0	
<b>10</b> Capital expenditures from proceeds . . . . .	0		0		0		2,800,000	
<b>11</b> Other spent proceeds . . . . .	3,000,000		5,000,000		2,146,744		0	
<b>12</b> Other unspent proceeds . . . . .	0		0		0		0	
<b>13</b> Year of substantial completion . . . . .	2002		2002		2012		2016	
	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>
<b>14</b> Were the bonds issued as part of a current refunding issue? . . . . .	X		X		X			X
<b>15</b> Were the bonds issued as part of an advance refunding issue? . . . . .		X		X		X		X
<b>16</b> Has the final allocation of proceeds been made? . . . . .	X		X		X			X
<b>17</b> Does the organization maintain adequate books and records to support the final allocation of proceeds? . . . . .	X		X		X		X	

**Part III Private Business Use**

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

**Part III Private Business Use** (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
<b>3a</b> Are there any management or service contracts that may result in private business use of bond-financed property? . . . . .		X		X		X		X
<b>b</b> If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
<b>c</b> Are there any research agreements that may result in private business use of bond-financed property? . . . . .		X		X		X		X
<b>d</b> 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?								
<b>4</b> 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 %		0 %		0 %		0 %
<b>5</b> Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government . . . . . ▶		0 %		0 %		0 %		0 %
<b>6</b> Total of lines 4 and 5 . . . . .		0 %		0 %		0 %		0 %
<b>7</b> Does the bond issue meet the private security or payment test? . . . . .								
<b>8a</b> 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>b</b> If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of . . . . .								
<b>c</b> If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2? . . . . .								
<b>9</b> Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2? . . . . .								

**Part IV Arbitrage**

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

**Part IV Arbitrage** (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
<b>5a</b> Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		X		X		X
<b>b</b> Name of provider . . . . .								
<b>c</b> Term of GIC . . . . .	0 %		0 %		0 %		0 %	
<b>d</b> Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? . . . . .								
<b>6</b> Were any gross proceeds invested beyond an available temporary period?								
<b>7</b> Has the organization established written procedures to monitor the requirements of section 148? . . . .								

**Part V Procedures To Undertake Corrective Action**

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

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

Return Reference	Explanation

**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No 1545-0047

**2018**

▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**  
 ▶ **Attach to Form 990.**  
 ▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

Name of the organization  
Young Men's Christian Association of Northwest North Carolina (4626)

Employer identification number  
56-0530015

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art . . . . .				
2 Art—Historical treasures . . . . .				
3 Art—Fractional interests . . . . .				
4 Books and publications . . . . .				
5 Clothing and household goods . . . . .				
6 Cars and other vehicles . . . . .				
7 Boats and planes . . . . .				
8 Intellectual property . . . . .				
9 Securities—Publicly traded . . . . .	X	18	26,302	Selling cost
10 Securities—Closely held stock . . . . .				
11 Securities—Partnership, LLC, or trust interests . . . . .				
12 Securities—Miscellaneous . . . . .				
13 Qualified conservation contribution—Historic structures . . . . .				
14 Qualified conservation contribution—Other . . . . .				
15 Real estate—Residential . . . . .				
16 Real estate—Commercial . . . . .	X	1	53,000	NONE
17 Real estate—Other . . . . .				
18 Collectibles . . . . .				
19 Food inventory . . . . .				
20 Drugs and medical supplies . . . . .				
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
25 Other ▶ ( In-kind prizes & food ) . . . . .	X	24	12,500	Cost
26 Other ▶ ( _____ ) . . . . .				
27 Other ▶ ( _____ ) . . . . .				
28 Other ▶ ( _____ ) . . . . .				

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

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

**Part II Supplemental Information.**

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

Return Reference	Explanation
Schedule M, Part I Explanations of reporting method for number of contributions	Securities - Publicly traded - Number of Contributions Other - In-kind prizes & food Number of contributions Real estate - Commercial - Number of contributions

**SCHEDULE O**  
**(Form 990 or 990-EZ)**

**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**2018**

**Open to Public Inspection**

Department of the Treasury

Name of the organization

Young Men's Christian Association of Northwest North Carolina (4626)

Employer identification number

56-0530015



**990 Schedule O, Supplemental Information**

Return Reference	Explanation
<p>Form 990, Part III, Line 1 ORGANIZATION'S MISSION</p>	<p>Mission Helping people reach their God-given potential in spirit, mind and body Values Caring, honesty, respect, responsibility, and faith are the values we strive to weave into every YMCA program and build the moral and ethical foundation for life Profile The Young Men's Christian Association of Northwest North Carolina is an association of men, women, and children of all ages, abilities, incomes, races, and religions Our YMCA serves Alexander, Davie, Forsyth, Iredell, Stokes, Wilkes, and Yadkin counties through the dedicated efforts of volunteers, members, and staff, and provides programs that promote youth development, healthy living, and social responsibility The YMCA of Northwest North Carolina is comprised of 13 facility branches, 3 express locations, two non-facility branches, a resident camp, and an administrative office Areas of focus The Y strives to strengthen the foundations of the communities we serve through programs and services that promote youth development, healthy living, and social responsibility Members Throughout 2018, the YMCA of Northwest North Carolina served 156,547 members and program participants with 36,679 under the age of 18 and 23,388 over the age of 65 Program participants of 32,225 participated in child care, summer camp, swim lessons, mentoring programs, etc Approximately 18% of all members and 9% of program participants received direct charitable financial assistance valued at \$2.2 million Donors 7,093 individuals made a charitable contribution to the YMC A's Annual Giving Campaign The campaign raised \$2,660,369 in support of the Y's community benefit of \$4.7M which includes the direct financial assistance program - Open Doors The total dollars raised includes some special events held specifically for the purpose of the campaign Volunteers Volunteers are a vital part of the success of the YMCA In 2018, 3,173 individuals volunteered at the YMCA in roles as varied as youth sports coaches, literacy tutors, mentors to teens, or board/committee members Volunteer hours given to the YMC A and their value were estimated to be 20,932 hours and \$490,000, respectively Financial Assistance Policy The heart of the YMCA's mission is to reach out and serve people in our communities who are in need The YMCA strives to turn no one away due to an inability to pay a program or membership fee Our Open Doors program allows individuals and families to access YMCA membership and programs on a sliding-fee scale that is designed to respond to individual circumstances (e.g. when a parent loses his/her job, when medical bills become overwhelming, when living on a fixed-income, etc.) Applications and awards of financial assistance are reviewed periodically to determine if the same level of award is appropriate, i.e. have circumstances changed for the recipient During 2018, 19,547 neighbors in need benefited from Open Doors Financial Assistance for membership and programs Community Benefit At the Y, we make a dif</p>

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
Form 990, Part III, Line 1 ORGANIZATION'S MISSION	ference by focusing on three key areas Youth Development, Healthy Living, and Social Responsibility We work to strengthen our communities by investing in our kids, our health, and our neighbors In 2018, through Annual Giving Campaign support and grants, our Y provided \$4.7M in charitable assistance, scholarships, subsidized and free programs to members and program participants The YMCA's efforts to strengthen the foundations of the communities we serve are enhanced through collaborations with other community-serving groups, a partial list of which includes Age Friendly Forsyth American Cancer Society American Red Cross Big Brothers/Big Sisters Boy/Girl Scouts of America Brenner Fit Cancer Services Churches & Public Libraries City/County Planning Civitan International Community Health Department's Crosby Scholars Department of Juvenile Justice Department of Social Services Enrichment Center Family Services of Forsyth County Forsyth Technical Community College Forsyth Promise Goodwill Industries Hispanic League of the Piedmont Triad Hola of Wilkes County Hospice Kiwanis International Local Chambers of Commerce & Businesses Mental Health Association of Forsyth County, Inc Next Step Ministries Northwest Area Health Education Center Novant Health/Forsyth Medical Center Parks & Recreation Departments Partnership for a Drug-Free N.C. Public and Private Schools Rotary International Second Harvest Food Bank Smart Start Stokes Partnership for Children United Fund of Stokes County United Fund of Yadkin County United Way of Alexander County United Way of Davie County United Way of Forsyth County United Way of Iredell County United Way of Wilkes County Wake Forest Baptist Health Wake Forest University Wilkes Regional Medical Center Winston-Salem Dash Winston-Salem Police Department Winston-Salem State University

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
Form 990, Part III, Line 4a HEALTHY LIVING	<p>1 The iconic and historic YMCA triangle emphasizes the oneness of spirit, mind and body YMCA wellness programs achieve this unity through programs that emphasize proper exercise, nutrition, health education, avoidance of drug and alcohol abuse and stress management, as well as finding a mental and spiritual balance 2 YMCA facilities are structured to provide members with the opportunity to participate in a wide range of wellness activities such as group exercise classes, strength training, personal fitness, cycling, aquatic programs and other fitness classes Finding an activity that interests the individual is a critical component to building healthy exercise habits The Y works with trained, caring staff to connect members with options that become lifestyle choices to help them live healthier, happier lives 3 Group Exercise Classes are a cornerstone of the YMCA experience Passionate, certified, and engaged instructors help members discover a love for exercise and continue to challenge themselves physically With expansive class offerings ranging from Yoga to Boot Camps, group exercise classes allow members to try new activities, meet new friends, and find the motivation to stay with an exercise program 4 LIVESTRONG at the YMCA is a physical activity and well-being program designed to help adult cancer survivors achieve their holistic health goals The evidence-based, 12-week program offers people affected by cancer a supportive environment to participate in physical activities focused on strengthening the whole person, as well as a free Y membership to the entire family for the session's duration During 2018, 141 cancer survivors participated in 17 sessions of the LIVES TRONG at the YMCA program at 10 branches of the Association 5 The YMCA's Diabetes Prevention Program (YDPP) is an innovative behavior change model to help reduce the burden of chronic disease in communities across the nation The program helps adults at high risk of developing type 2 diabetes reduce their risk for developing the disease by taking steps that will improve their overall health and well-being The program provides a supportive environment where participants work together in a small group to learn about healthier eating, and increasing their physical activity in order to reduce their risk for developing diabetes The evidence-based program is delivered over a 12-month period, with 16 weekly sessions, then monthly maintenance It is classroom based and can be offered in any community setting Program goals include reducing body weight by 5%-7% and participating in 150 minutes of physical activity per week To qualify for the program, participants must be 18 or older, overweight (BMI &gt; 25) and at high risk for developing type 2 diabetes or have been diagnosed with prediabetes The YMCA's Diabetes Prevention Program is nationally supported by the Diabetes Prevention and Control Alliance and the Centers for Disease Control and Prevention During 2018, 54 parti</p>

## 990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part III, Line 4a HEALTHY LIVING	<p>Participants embraced this life-changing program. In 2018 through a United Way Place Matters grant, the YMCA and Novant Health jointly continued to bring diabetes screening and education for both pre-diabetes and diabetes to the underserved population in the 27105 zip code (East Winston-Salem). The STRIDE (Serving Together to Reduce the Impact of Diabetes Through Education) project had 43 participants in 2018.</p> <p>6 The Y is able to appeal to a wide range of people to set and achieve physical fitness goals through YMCA Races and Triathlon events that are open to the community and support financial assistance scholarships. The 35th Annual YMCA Mistletoe Run was held on Saturday, December 2, 2017. The race supports the Y's efforts to fight childhood obesity in our community, where 41% of children in Forsyth County are considered overweight or obese - more than twice the national average. The race, held at the William G. White, Jr. Family YMCA near downtown Winston-Salem, is a longstanding community event popular among families, first-time runners, walkers, and serious athletes alike. 2,640 runners and walkers participated in the event, which drew even greater crowds to cheer on participants and attend the Mistletoe Run Post Race Party. Other YMCAs within our Association host 6 other community 5K Races and Triathlon events in six counties within our service area, including the Stokes Family YMCA King of the Hill 5K, the Wilkes Family YMCA Turkey Trot 5K, and the Alexander County Family YMCA Apple Festival 5K.</p> <p>7 During 2018, our Association conducted over 45 health fairs, screenings, and information sessions, working with four county health departments, the American Red Cross, the American Cancer Society, Cancer Services, the American Diabetes Association, the American Heart Association, Positive Wellness Alliance, local colleges and universities, NC Adolescent Pregnancy Prevention Coalition, NC Division of Child Development, Smart Start of Forsyth County, and area hospitals and businesses to provide important wellness information to the community. Additionally, over 4,800 individuals participated in Healthy Kids Day and Clemmons Community Day (2,300), which are family events held at branches throughout the Association.</p> <p>8 The YMCA offers "Get on Your Weigh", a 12-week weight management program with small team wellness coaching, realistic weight loss goal-setting and nutritional classes, offered at every branch. The program helps participants reach goals they felt they could not achieve on their own. Members report feeling more confident and benefit from higher self-esteem as this program helps get them started on the path to a healthier lifestyle. In 2018, the program helped 26 men and women develop healthy lifestyle changes.</p> <p>9 Every YMCA member is offered three uFit sessions with a Wellness Coach to help them reach their full potential. Each complimentary, one-hour session is designed to help new members set attainable goals, familiarize themselves with</p>

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
Form 990, Part III, Line 4a HEALTHY LIVING	<p>their surroundings, build self-confidence, and provide tools for a successful wellness journey For many Y members, uFit is the foundation and support system for a life of improving health and wellness</p> <p>10 Adult Sports Leagues, ranging from basketball and volleyball to kickball and dodge ball, provide an opportunity for adults to relive the thrill of being part of a team, expand their social network, and stay active Friendly competition is a tremendous motivator in helping adults find an exercise program that keeps them engaged and eager to return</p> <p>11 The Stokes Family Branch offers Wise Start, a grant-funded outreach program that focuses on improving the health and development of children birth to five in child care centers throughout Stokes County A coordinator travels to sites delivering age-appropriate physical activities for children and staff using the evidence-informed Be Active Kids Movement Guide Participation over the course of the year included 362 children at 10 different sites, 31 classrooms, and 44 teachers</p> <p>12 Physical Education is a critical component to helping children succeed not only in an academic setting, but also establish lifelong healthy habits The Yadkin Family YMCA partners with Yadkin County Schools for students who attend Yadkin Early College to utilize the YMCA facility for physical education activities, serving approximately 45 children each month during the school year</p>

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
Form 990, Part III, Line 4a HEALTHY LIVING (CONTINUED)	<p>13 In 2018, the YMCA provided transportation to a group of 22 developmentally disabled students, a teacher and caregivers from the Enrichment Center to the William G White Jr Family YMCA (WGW) to participate in group fitness classes. These classes consisted of Zumba, Body Pump, and water aerobics. An Enrichment Center staff has been trained and certified to teach group exercise classes at the Enrichment Center to add wellness to their curriculum. The program was later broadened to include an additional day each month so that students could volunteer at WGW. The students greet members as they enter the facility to help the students build confidence when speaking to others and increase their overall social interaction skills.</p> <p>14 The YMCA provides nursery and child watch services (children ages 3 months-5 years) so that parents and older siblings may participate in YMCA health and wellness activities. Parents are able to exercise in any area of the building including fitness centers and pools, take group exercise classes, and socialize with friends with the peace of mind that their child is safe and having fun with Y staff. This time allows parents to focus on themselves so they can return to their families refreshed and better equipped to support their families.</p> <p>15 The aquatic environment offers a much needed diverse change in everyday life for those with special needs. It opens up opportunities and structure for those challenged in many ways. We work with other agencies and schools to offer a safe, fun environment for mental and physical classes in structured swimming. From autistic individuals, to those with sight impairment, everyone is welcomed to our aquatic environment to learn and grow from their experiences. We have many participants in our YMCAs that also participate in Special Olympics and the Piedmont Plus Senior Games.</p> <p>16 Warm water recreational activities/exercises help improve exercise options for daily living and provide rehabilitation activity for those recovering from severe physical impairments. Warm water activities also improve range of motion and joint mobility for people with arthritis or senior citizens who wish to improve their level of fitness, as well as aiding in socialization opportunities.</p> <p>17 The Active Older Adult Program develops seniors into an active, health-conscious social circle of friends and participants. This program is structured for active (or not so active if they so choose) older adults. Organized trips are planned on a monthly basis from September through May for both YMCA members and non-YMCA members. The group is encouraged to attend free monthly health-related workshops presented by various professionals from Wake Forest Baptist Health and Best Health. Fitness classes developed especially for older adults are also available. During 2018, 13,062 Senior, Silver Sneakers, Silver &amp; Fit, and Active Older Adult members met new friends and maintained their health at Y branches.</p> <p>18 The N C Senior Game</p>

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
<p>Form 990, Part III, Line 4a HEALTHY LIVING (CONTINUED)</p>	<p>s are an opportunity for senior citizens to continue their passion for competition and athletic pursuits. The Y supports seniors through training programs and regional competitions so that they are in the best possible shape to compete. The Wilkes Family YMCA is also instrumental in the Blue Ridge Senior Games to provide this opportunity for seniors in their community. 19 Believing that a part of healthy living involves healthy family relationships, YMCA Adventure Guides is a father-child program designed to help foster understanding and companionship, and to strengthen the relationship between children and their fathers. Participants join a "Circle" of other father/child groups and participate in games, camping trips, ceremonies and family adventures. Adventure Guide compass points - family, nature, community, fun and the YMCA character development values - provide a sense of direction and inspiration for activities. The immediate gain of YMCA Adventure Guides is evident - spending time together - but the long term gains are even more significant in the relationships built between parents and children. In 2018, this program served 164 fathers and 218 children.</p> <p>Swim, Sports &amp; Play 1 Team sports are provided at both the youth and adult levels. In 2018, the youth basketball program had 2,671 boys and girls under the age of 18 participate. Each child played a minimum of one-half of each game with a values session conducted before each game. The program collaborates with local school systems and churches in order to have adequate gym space. Other team sports include youth soccer (2,340), flag football (587), youth baseball/t-ball (499), volleyball (365), and lacrosse (119). These youth teams were led by over 600 volunteer coaches. With all YMCA sports, the intent is for the participants to have fun while learning to play the sport in an environment that places winning as secondary. Parents and volunteers work together to make each season special for every team member.</p> <p>2 Swim lessons teach aquatic skills to youth and adults (ages 6 months through senior citizens). Swimming is a life-long activity that improves health and fitness in addition to teaching kids and families to be safe in and around water. At the Davie Family YMCA, a partnership with the Davie County Schools and the United Way of Davie County provides every 2nd grade student with the opportunity to learn how to be safe in and around water through the Water Safety Education Program. In 2018, 478 students received this life-saving instruction.</p> <p>3 Over 100 children and adults of all income levels took part in a free week of water safety awareness/swim lessons at the Wilkes Family YMCA in 2018. A partnership with the Wilkes County Schools' Pre-K program and Exceptional Children Classrooms also provided swim lessons for over 500 pre-K students. These free services have a value of over \$39,000 and are funded in part by the United Way of Wilkes County (\$22,000).</p> <p>4 In 2018, the association rec</p>

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
Form 990, Part III, Line 4a HEALTHY LIVING (CONTINUED)	<p>received grant funding for our Safety Around Water program through the YMCA of the USA, United Way and several private major donors. This funding provided safety and learn-to-swim programming for over 1,300 youth across our service area. 5</p> <p>Developmental and competitive swimming provides activities for swimmers from four years old to adult through our swim team, TYDE. This program not only improves physical fitness and enhances aquatic skills, but also teaches the importance of teamwork, goal orientation and time management. In 2018, over 850 swimmers were directly involved with our year-round YMCA swim team with an additional 2,500 area summer league and club swimmers involved in YMCA sponsored competitive events. During 2018, our YMCA swimmers participated in YMCA and USA Swimming national events. Of 10 seniors on the TYDE team, 5 will be swimming competitively for their college teams and 3 will receive scholarship support for their swimming efforts. YMCA aquatic facilities are also utilized by area high school swim teams for practices and competitions, including the 4-A CPC Conference Championships. 6</p> <p>Sports, swimming and exposure to water safety are critical to children's development. YMCA programs provide financial assistance to help all people gain access to the YMCA, regardless of income level. 7</p> <p>Aquatic safety and lifeguard training provides opportunities for individuals to further develop aquatic safety skills for YMCAs, local pools and homeowners' associations. Classes are offered throughout the year. 8</p> <p>YMCA programs are designed to attract people of all ages, all abilities and all incomes. Financial assistance policies help all people gain access to the YMCA, regardless of income level. During times of financial struggle are often when people need a place to belong, relieve stress in a supportive, healthy environment, and maintain the best possible health. Our financial assistance program allows the Y to ensure our doors are always open for all members of our community, particularly in times of need.</p>



**990 Schedule O, Supplemental Information**

Return Reference	Explanation
<p>Form 990, Part III, Line 4b  <b>YOUTH DEVELOPMENT</b></p>	<p>Child Care 1 Before/after and out of school programs provide child care for children 5 - 15 years of age meeting the needs of working parents during the school year Programs include sports, group games, values education, asset development, healthy snacks and tutoring while serving 1,895 youth (372 before school and 1,768 after school, 245 in both programs) from 77 schools at 26 school sites, 5 YMCA branches, and a community center Parent Advisory Committees and the YMCA Model Child Care Curriculum help guide and direct the Before/After School Child Care Programs 2 In 2018, the YMCA provided a nutritious healthy snack to 19 mainly at risk after school care sites Overall the food grant program served approximately 650 children and was possible due to funding from the NCDHHS Child and Adult Care Food Program In addition to the healthy snack, the kids also participated in physical activities and healthy lifestyle tutoring 3 Thanks to a grant from Walmart via YMCA of the USA, we served healthy snacks including fruits, cereal, vegetables and yogurt at some of our after school sites and all of our Summer Learning Academies On average, 1,500 snacks were served each week 4 YMCA programs are designed to help children reach their full potential in a safe, supportive environment regardless of their family's circumstances Financial assistance policies help all people gain access to the YMCA, regardless of income level Education &amp; Leadership 1 Learning should not stop when the school year ends But some children will return to school in the fall more prepared to succeed than others Statistically, students from families with fewer resources miss out on key developmental and enrichment opportunities, which can lead to summer learning loss of two months or more in key areas like reading and math That achievement gap continues to expand over time If students do not read on grade level by the end of third grade, the probability that they will graduate high school decreases dramatically The YMCA Summer Learning Academy is working to change those odds In 2018, 494 academically at-risk children attended the program which took place at 8 sites in local elementary (5-6 weeks) and one middle school (3 weeks) The program's elementary curriculum includes math and reading tutoring by certified teachers, health and wellness information on nutrition and physical activity, computer labs, and enrichment components such as science, character development, the arts and humanities, as well as educational field trips The program's middle school curriculum included project based learning created by certified teachers and facilitated by staff during the three week programs As part of the program, parents attended weekly meetings, offered in English and Spanish, which provided information on family topics like how to best communicate with teachers or support children in school The program is available at no cost to families Of the students both pre- and post-te</p>

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
<p>Form 990, Part III, Line 4b YOUTH DEVELOPMENT</p>	<p>sted, more than 76% have increased and/or maintained their grade level in math and/or reading 2 The 21st CCLC program is authorized under Title IV, Part B of the Elementary and Secondary Education Act (ESEA) The program provides before and after-school, weekend, and summer school academic enrichment opportunities for children attending low-performing schools to help them meet local and state academic standards in subjects such as reading, mathematics, and science In addition, programs may provide activities for youth development, drug and violence prevention, art, music, technology, character education, counseling, and recreation to enhance the program's academic components The program also supports a component for family literacy and community outreach During 2018, the Y provided a 21st Century Community Learning Center Program with a focus on at-risk elementary and middle school students The program served one elementary and one middle school in Wilkes County during after-school hours Monday through Friday with an enrollment of approximately 80 students throughout the school year Also the program provides a five week summer program to 50 elementary students The program components consist of homework assistance and tutoring, STEM (science, technology, engineering and math) activities, a healthy snack, physical fitness, health emphasis, enrichment, and family nights The program aims to lower the achievement gap, reduce disciplinary actions and involvement in juvenile crime, improve school attendance, increase parental involvement, improve health and nutrition practices, focus on social and emotional needs of the students and provide strong character development opportunities 3 The ELISS (Extended Learning Integrated Student Supports) Program focuses on reaching at-risk students during times outside of the traditional school day The goal of the program is to raise academic outcomes for students who are not performing on grade level based on statewide assessments This funding was awarded from an appropriation by the General Assembly of North Carolina In 2018, the Y provided the ELISS program to three Title 1 elementary schools in Forsyth County and served over 216 students during after-school Monday through Friday The program components consist of academic support in reading, math and STEM (science, technology, engineering and math) activities, social and emotional learning, leadership and character development, decision making, healthy life choices, life skills and family engagement The program also provides a summer component for approximately 180 students 4 The Y provided the Unidos (Spanish for "United") Program in 2018 through the generosity of the Kate B Reynolds Charitable Trust Unidos provided a comprehensive after-school youth development program targeting Hispanic students in four Title 1 Forsyth County middle schools The program addresses three main areas the achievement gap, social and emotional learning and family</p>

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
Form 990, Part III, Line 4b YOUTH DEVELOPMENT	<p>engagement in education After-school enrollment was approximately 150 students throughout the school year The program components consist of homework assistance, tutoring in English Language Arts and STEAM (science, technology, engineering, arts and math) activities, career and college readiness, leadership skills, family involvement and social and emotional learning Also, the program provides a summer program to approximately 135 middle school Hispanic students to help with summer learning loss and prepare students for the upcoming school year 5 Our Youth &amp; Government Program introduces local middle and high school students to the legislative process of city, county, state, national, and international governments through a hands-on approach Programs such as Youth Legislature (culminating with a weekend trip to the state capital in Raleigh where the students author, introduce and vote to accept or reject bills of their own creation), Conference on National Affairs, and Model United Nations enable young people to prepare for moral and political leadership through training in the theory and practice of developing public policy Students sharpen their leadership skills and improve their problem solving and critical thinking abilities while becoming more adept at debating and public speaking Youth &amp; Government also includes a mock trial and court of appeals In each of these programs, students specific to their role - such as attorney, witness, or judge - try a case or present a case to an appellate court where they get to argue each side of the case In 2018, 501 students from middle and high schools within our Association participated in these programs, many returning home with recognition awards and having been elected to a state office by their peers</p>

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
Form 990, Part III, Line 4b YOUTH DEVELOPMENT (CONTINUED)	<p>6 The Black Achievers Program gives teens (9th - 12th grade) in Forsyth County direct access to volunteer leaders (Adult Achievers) representing business and industry, public health and safety, education and community based organizations. Our volunteers serve as role models and nurturing figures who emphasize the importance of education. The program provides career exploration with student achievers working with Adult Achievers to learn about different career paths - architecture and engineering, health and medical, business, education, computers, etc. College preparation is encouraged with SAT preparation and college tours being a part of the nine-month program. The Achievers program has 14 school club offerings where students meet monthly and participate in workshops onsite as well as offsite field trips and college tours. The graduating teens compete for college scholarships and awards. In 2018, 17 seniors received scholarships totaling \$31,050. Latino Achievers is a mentoring program for Hispanic/Latino students in grades 6-12. The program is designed to address the growing drop-out rate of Hispanic students in Forsyth County high schools. Latino Achievers has 15 club offerings and gives teens access to Adult Achievers who are Hispanic and bilingual professionals from community organizations in career fields such as finance, media/communications, business, health/medical, education, and law/government to encourage academic achievement, social development and personal growth among Hispanic youth. Latino Achievers uses a career-based curriculum where students meet during school hours once a month, as well as a diverse choice of hands-on monthly Saturday Workshops to explore various career fields and learn the basic skills most employers desire. Students also have the opportunity to attend on college field trips during the school year to have exposure to post-secondary education. The program is offered at East Forsyth and Southeast Middle School, Carter G. Woodson School, Carver, East Forsyth High, Robert B. Glenn, John F. Kennedy Magnet High School, North Forsyth, Parkland, Reagan, Reynolds, Mt. Tabor, Walkertown, West Forsyth, and Winston-Salem Preparatory Academy High Schools. In our new collaboration with Crosby Scholars, we are introducing a community outreach program that focuses exclusively on the Hispanic/Latino population in grades 6-12. Our goal is to spread the message of both Achievers and Crosby Scholars to promote a "post-secondary/college going culture" among Hispanic/Latinos in Forsyth County. We anticipate that outreach efforts will result in participation in both programs, and ultimately ensure that students graduate from high school and cultivate the necessary soft-skill development to explore post-secondary options. At the end of the program, the graduating teens compete for college scholarships and awards. In 2018, during the Latino Achievers Gala, 6 students were awarded scholarships totaling \$7,500. In 2018, more than 1,5</p>

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
Form 990, Part III, Line 4b YOUTH DEVELOPMENT (CONTINUED)	<p>00 teens got a taste of post-secondary education and career options while learning the tools they need to succeed through these two Achievers programs. The Achievers Programs are funded by the United Way of Forsyth County. 6 Helping children become strong leaders for the future is a community effort. The YMCA takes a proactive approach to mentorship and leadership development programs and provides financial assistance so that all have access, regardless of income level.</p> <p>Camping 1 Day camping provides full day recreational, educational and/or specialized child care for youth ages 5 - 13 (14 and 15 year-olds enter our Counselor-In-Training (CIT) Program to become summer camp counselors at age 16). Multiple day camp and sports camp sites across 6 counties provide a variety of opportunities during the summer for group games, swimming, and arts and crafts. Educational camp collaborates with local schools and summer school programs to provide a summer enrichment program. Sports camps teach basketball, soccer, volleyball and good sportsmanship skills. Approximately 1,500 youth were served most weeks through various day camping programs.</p> <p>2 Resident camping is designed to help campers enhance their spiritual awareness, mental development, physical well-being, self-esteem, social growth, and respect for the environment. In 2018, summer camper weeks (one child attending camp for one week) at YMCA Camp Hanes totaled 1,660. There were 187 teens participating in leadership development programs, over 493 teen campers, and 280 American Diabetic Association campers. The goals of the program include teaching life skills while developing an appreciation of nature and an understanding of positive group living and independence.</p> <p>3 Adventure trips, horseback riding, paintball and 5-stand skeet shooting programs are offered during summer camp sessions to give many youth their first experience with caving, white water rafting, horses, and gun safety. In 2018, over 1,500 campers participated in these specialty programs while attending YMCA Camp Hanes.</p> <p>4 The camp experience is monumental to many children's development. It builds confidence, individuality and self-esteem that stay with the child for the rest of their life. Without the YMCA's financial assistance, many families would not be able to provide a camp experience for children.</p>

## 990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part III, Line 4c SOCIAL RESPONSIBILITY	<p>1 Financial Assistance Policy The heart of the YMCA's mission is to reach out and serve people in our communities who are in need The YMCA strives to turn no one away due to an inability to pay a program or membership fee Our Open Doors Program allows individuals and families to access YMCA membership and programs on a sliding-fee scale that is designed to respond to individual circumstances (e.g. when a parent loses his/her job, when medical bills become overwhelming, when living on a fixed-income, etc.) Applications and awards of financial assistance are reviewed periodically to determine if the same level of award is appropriate, i.e. have circumstances changed for the recipient During 2018, \$2,251,671 of financial assistance was provided for Y programs and membership fees to 19,547 individuals</p> <p>2 Raising literacy levels is an integral part of our mission of "Helping people reach their God-given potential in spirit, mind, and body." The YMCA of Northwest North Carolina provides adult and family literacy services at no cost to participants through our Literacy Program Program staff recruit, train, and support volunteers who tutor individuals or small groups of adults in 40-hour programs of English as a Second Language and basic reading skills In 2018, the program also helped participants improve job-seeking skills Program staff and 86 trained volunteers tutored 210 adults in Adult and Family Literacy Programs helping them reach their goals of entering employment, job training or GED programs, or becoming more involved in their children's education The Literacy Program at Diamond Ridge (formerly Ledges Apartments) Learning Center provided homework help and literacy enrichment activities for 85 preschool and elementary children The YMCA Literacy Program is funded by the United Way of Forsyth County, North Carolina Community Colleges System, and donations to the YMCA Annual Giving Campaign</p> <p>3 YMCA Bright Beginnings takes place in August at 6 of our branches where volunteers assist students with back-to-school shopping Each child receives a new back pack full of school supplies, new clothes and shoes, a warm meal, and the opportunity to make a new friend in their volunteer shopper Guidance counselors at local elementary schools assist YMCA staff with lists of children who would benefit most from this program The volunteers often share heart-warming stories of how much the children appreciate the trip on the Y bus to a local store for a shopping adventure Some also receive haircuts to boost their confidence for their first day of school During 2018, over 500 students benefited from the program supported by more than 600 volunteers</p> <p>4 At YMCA Camp Hanes, the Outdoor Education Program takes classroom lessons and brings them to life with educational, hands-on activities that complement the curriculum based on the North Carolina State Standard Course of Study for Education Students begin to understand what they're learning from a text</p>

## 990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part III, Line 4c SOCIAL RESPONSIBILITY	<p>to book in a new and different way. Time at camp allows students to see each other in a different setting that promotes and encourages cooperation, teamwork, and understanding of their own abilities and potential. Trained professionals facilitate the learning experience through group work, guided discovery, participatory discussions, and fun activities. In 2018, over 6900 participants, including 5,600 students from 53 schools experienced this hands-on learning at YMCA Camp Hanes. 5 For the summer of 2018, YMCA Camp Hanes was one of 22 accredited YMCA and 4-H camps across the nation partnering with Camp Corral—a free, one-of-a-kind, weeklong summer camp for military children, with priority registration given to children of wounded, disabled or fallen military service members. YMCA Camp Hanes hosted 366 children of wounded, disabled or fallen military service members in a fun-filled week that included a variety of fun camp activities, including a Hero Day ceremony on Wednesday. At Camp Corral kids are free to be kids, away from the day-to-day challenges they face in their military families. Kids participate in traditional outdoor activities such as archery, canoeing and swimming, and have the opportunity to meet other kids who share similar family situations. 6 Non-summer Conference/Retreat Programs are designed to allow campers the same opportunities as a resident camper, but on a smaller scale over a long weekend. The Conference Center at YMCA Camp Hanes was utilized by over 3,800 individuals from 106 different groups in 2018. 7 The YMCA of Northwest North Carolina has strong international ties through a long standing relationship with the YMCA of the Ukraine. Our relationship has supported strong programs in HIV/AIDS education, youth sports, camping and the arts in the Ukraine. Additionally, this relationship has provided internship opportunities for both organizations, as well as service learning camps for our own youth and teen members. 8 In recognition of the National Day of Prayer, each of the YMCA facilities hosted an annual Prayer Breakfast in May. Also in 2018, the 5th Annual Come Alive! Community Prayer Breakfast was held in Winston-Salem as a collaborative effort between the YMCA of Northwest North Carolina, Love Out Loud and the New Canaan Society. Combined, these events brought together 1,300 members of the communities we serve to pray, fellowship, and hear speakers and music. 9 During 2018, the YMCA Military Outreach Initiative benefited families of active and deployed soldiers served 246 members. Launched in October 2008, the YMCA Military Outreach Initiative provides government funding for eligible military families to receive free memberships at full-facility YMCAs in their communities.</p>

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Return Reference	Explanation
Form 990, Part VI, Line 19 REQUESTING INFORMATION	THE WEBSITE FOR THE YMCA OF NORTHWEST NORTH CAROLINA CONTAINS A SECTION LABELED "ABOUT US" WHERE A LINK TO THE CFO'S EMAIL ADDRESS IS MAINTAINED FOR REQUESTING OF A COPY OF THE MOST RECENT FORM 990 OR ANY RELATED QUESTIONS



**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
Form 990, Part VI, Line 1a Delegate broad authority to a committee	The President's Cabinet consists of the acting Chief Volunteer Officer (CVO), CVO-elect, Treasurer, Secretary, immediate past CVO, the CEO and such other individual(s) as may be designated by the Association Board of Directors (BOD) from time to time The President's Cabinet has the full power and authority to supervise and act upon all business of the Association Board of Directors during intervals between the regular meetings of the BOD

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
Form 990, Part VI, Line 6 Classes of members or stockholders	The YMCA of Northwest North Carolina is a membership association of men, women, and children of all ages, abilities, incomes, races, and religions. The association is dedicated to "Helping people reach their God-given potential in spirit, mind and body." Christian principles are put into practice through programs that promote healthy living, youth development, and social responsibility. By enrolling as YMCA members, individuals may participate in the programs described above and utilize the indoor and outdoor facilities of the YMCA. In addition, YMCA members serve as the primary source of program and policy-making volunteers, as well as, donors to the annual fund-raising campaign, which supports the YMCA's financial assistance program.

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
Form 990, Part VI, Line 7a Members or stockholders electing members of governing body	The role of the voting members of the YMCA of Northwest North Carolina is to elect the Association Board of Directors at the annual meeting. Voting members may cast one vote on any items of business properly brought before the members for consideration at the annual meeting, including election of the governing body. No decisions made by the governing body are subject to approval by the members.

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<b>Return Reference</b>	<b>Explanation</b>
Form 990, Part VI, Line 11b Review of form 990 by governing body	The Audit Committee reviews and approves the Form 990 Upon approval, the return is provided to each board member of the Association Board of Directors prior to it being filed with the IRS

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
Form 990, Part VI, Line 12c Conflict of interest policy	Annual disclosures by directors and employees are reviewed by Association Office staff and any conflicts or potential conflicts are noted so that appropriate action can be taken, e g directors would be excluded from approval votes if process would involve a transaction related to their conflict of interest

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<b>Return Reference</b>	<b>Explanation</b>
Form 990, Part VI, Line 15a Process to establish compensation of top management official	The Evaluation and Compensation Committee of the Association Board of Directors is comprised of the Chief Volunteer Officer (CVO), CVO-Elect, the immediate past CVO, the Secretary, and the Treasurer. It is the duty and responsibility of the Evaluation and Compensation Committee to appraise the performance of the President/CEO annually on or about the end of the fiscal year and based on that appraisal to determine the President/CEO's compensation for the next fiscal year. Determination of the President/CEO's compensation and review of other senior staff compensation shall be made after an examination of comparability to compensation levels paid by similarly situated organizations to ensure that compensation is fair and reasonable. The Evaluation and Compensation Committee shall annually document comparability in writing and maintain documentation with the human resources department.

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
Form 990, Part VI, Line 15b Process to establish compensation of other employees	Positions included in compensation review and approval include President & Chief Executive Officer, Chief Operating Officer, Chief Financial Officer, Chief Advancement Officer, and Chief Human Resources Officer

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
Form 990, Part VI, Line 19 Required documents available to the public	The governing documents of the YMCA of Northwest North Carolina (articles of incorporation, bylaws, 501(c)(3) exemption letter) and the Conflict of Interest Policy are maintained at the Administrative Offices of the organization and are available to the public upon request for inspection and/or to be copied. The most recent audited financial statements of the organization are available to the public via the organization's website under the area labeled "About Us".



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