Department of the Treasury

Return of Organization Exempt From Income Tax

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

benefit trust or private foundation)

OMB No 1545-0047 Open to Public 🍇

3	1116771	arreve	The organization may have to use a copy of this return to sa	uisiy state	eporting requirements	inspection 💆 💥
No statu	AF	or the	2012 calendar year, or tax year beginning and	ending		
<i>"</i>	BC	hećk if	C Name of organization		D Employer identifi	cation number
3	aı	hećk if oplicabl	e O Turno O. O. garna anon		2 Employer identili	
	_	Addre	s SOUTH SOUND YOUNG MEN'S CHRISTIAN ASS	NT		
	늗	chang		1 01 0	F06473	
9	<u> </u>	_chang Initial		91-0	586473	
4	!_	_lreturn	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone numbe	
	<u></u>	Termir ated			(360	
T NHO	X]Ameno	City, town, or post office, state, and ZIP code		G Gross receipts \$	6,733,691.
ż		Application	ODIMPIA, WA 90301-4004		H(a) Is this a group r	eturn
		pendir	F Name and address of principal officer:KYLE CRONK		for affiliates?	Yes X No
+			SAME AS C ABOVE		H(b) Are all affiliates in	
⊣	TT	av.ev	empt status: X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1)	or 527	1 ' '	list (see instructions)
)			e: SOUTHSOUNDYMCA.ORG	01 122	H(c) Group exemption	•
)			organization: X Corporation Trust Association Other	I Voor		M State of legal domicile: WA
á	_	rt [Summary	IL real	or iormation. 1032	VI State of legal domicile. WA
7	1,0	- W		DOTTEDE	MOTIMIT AND	COMMITTEN
	. g	1	Briefly describe the organization's mission or most significant activities. TO P.	KOATDE	YOUTH AND	COMMUNITY
•,	ä		AN AFFORDABLE AND ACCESSIBLE RESOURCE FO			
	띪	2	Check this box 🕨 📖 if the organization discontinued its operations or dispo	sed of more	than 25% of its net a	
	ě	3	Number of voting members of the governing body (Part VI, line 1a)	(A) (A)	3	18
	9	4	Number of independent voting members of the governing body (Part VI, line 1b)_	KEC	EIVED 4	18
	Activities & Governance	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)			547
	إغ		Total number of volunteers (estimate if necessary)	JAN 0	וומו	1322
90	<u>≥</u> €		Total unrelated business revenue from Sart (A) Tolumn (C) line 12	And IA A	$\frac{9}{2}$ 2018 $\frac{6}{7a}$	0.
G	7	, u	Net unrelated business taxable income from Farin 990. Time 34			0.
ę	9	<u>-</u> -	Net differenced business taxable income not RECEVED	OGD:	Prior Year	
6	Ø.		One wheels of the control of the con		525,433.	Current Year 635, 428.
C	اڇر		Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2d) JAN 0 9 2018	}	6,159,438.	5,943,459.
۲	무히		, regram cornect (* a.c. v.m, ime 2g)			
	القي	10	Investment income (Part VIII, column (A), has 3,4,400 (A)	<u> </u>	36,134.	24,131.
ج د د] W	11	Other revenue (Part VIII, column (A), lines 5, 6d, ac. 90, 10c. and 11e)	 	118,845.	100,661.
	<u></u>		Total revenue - add lines 8 through 11 (must edial Gallant, Column (A), line 12)		6,839,850.	6,703,679.
ELAVELORES DE C	\$		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	 	0.	0.
38	₫		Benefits paid to or for members (Part IX, column (A), line 4)	<u> </u>	0.	0.
3 3	es l	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<u> </u>	4,389,822.	4,250,034.
@C		16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
	Ç\$	b	Total fundraising expenses (Part IX, column (D), line 25)	<u>60. [🥞 </u>	·	
		17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<u> </u>	2,489,577.	2,536,499.
	∌ 9	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		6,879,399.	6,786,533.
_	≒	19	Revenue less expenses Subtract line 18 from line 12		-39,549.	-82,854.
٥	tes tuces			Ве	ginning of Current Year	End of Year
_	ang)	20	Total assets (Part X, line 16)		14,664,301.	14,555,600.
e	<u>888</u>		Total liabilities (Part X, line 26)	-	4,452,433.	4,180,271.
Ĺ	越引		Net assets or fund balances Subtract line 21 from line 20		10,211,868.	10,375,329.
Ž	Pa	rt II	Signature Block		10,211,000.	10/3/3/323
2			Ities of perjury, I declare that have examined this return, including accompanying schedule	o and statem	ante and to the best of m	v knowledge and heliof it is
8	??				· ·	ly knowledge and belief, it is
Œ,	Firue,	correc	t, and complete. Declaration of preparer (other than officer) is based on all information of wh	iich preparer	nas any knowledge.	= 112
	_		Signature of officer		Date	5/17
	Sign				Date /	{
	Here	•	KYLE CRONK, CEO			
			Type or print name and title		<u> </u>	II BYIN
			Print/Type preparer's name Preparer's signature	L	Date Check	PTIN
	Paid		DANIEL MORTENSEN, CPA Dany Mor		12 19 17 self-employ	
	Prep		Firm's name NR SMITH AND ASSOCIATES, PS		Firm's EIN	91-0959909
	Use	Only	Firm's address 2120 CATON WAY SW			
			OLYMPIA, WA 98502-1106		Phone no. (360) 754-9475\
	May	the IF	RS discuss this return with the preparer shown above? (see instructions)			X Yes No

232001 12-10-12 LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2012)

	n 990 (2012) SOUTH SOUND YOUNG MEN'S CHRISTIAN ASSN. 91-0586473 F	⊃age 2
Pai	rt/III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response to any question in this Part III	X
1	Briefly describe the organization's mission:	
	TO PROVIDE YOUTH AND COMMUNITY AN AFFORDABLE AND ACCESSIBLE RESOURCE	
	FOR THE POSITIVE DEVELOPMENT OF SPIRIT, MIND AND BODY THROUGH	
	RECREATIONAL HEALTH AND LEADERSHIP PROGRAMS.	
	RECEBATIONAL HEADIN AND BEADERDHIF FROGRAMS:	
_		
2	Did the organization undertake any significant program services during the year which were not listed on	.
	the prior Form 990 or 990-EZ?	∆_i 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?	<u>X</u> 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	d
	revenue, if any, for each program service reported.	
4a	(Code) (Expenses \$ 2,271,985. including grants of \$) (Revenue \$ 2,277,26	69.)
	CHILDCARE: SEE ATTACHED	
4b	(Code) (Expenses \$ 1,734,685. including grants of \$) (Revenue \$ 2,749,4"	<u>75.</u>)
	MEMBERSHIP: SEE ATTACHED	
_	616 060	00.
4c	(Code) (Expenses \$ 616,068 · including grants of \$) (Revenue \$ 384,10	09.)
	YOUTH: SEE ATTACHED	
		
4 21	Other pressure and (December of School vie O.)	
4d	Other program services (Describe in Schedule O)	
	(Expenses \$ 960,650 • including grants of \$) (Revenue \$ 532,606 •)	
<u>4e</u>	Total program service expenses ► 5,583,388.	

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	х	
2	is the organization required to complete Schedule B, Schedule of Contributors	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5_		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			Х
7	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space,	6		
′	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	-		
-	Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	28 4	X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X	ar i	* Y	\$ 1.00 pt
	as applicable	X.	è	*1
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	114		
-	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	x	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		<u>X</u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	x	
þ	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	145		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	14b		
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		<u>X</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			77
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u>X</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	x	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u> </u>
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	000	
		Form	990 (2012)

	990 (2012) SOUTH SOUND YOUNG MEN'S CHRISTIAN ASSN. 91-0586	473	P	age 4
Pa	rt IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	L	X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current	l		
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	į .		1
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	1	i	ł
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	ł	ĺ	
	Schedule K If "No", go to line 25	24a	X	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	<u>L</u> .	Х
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease]]	Ì
	any tax-exempt bonds?	24c	<u> </u>	X
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	<u></u>	X
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	ŀ		
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	}	1	
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	l		l
	Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified			l
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	Į		
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	l		
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	微	* .	Anna Anna
	instructions for applicable filing thresholds, conditions, and exceptions):	*	* *	***
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			ı
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?		l	İ
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			l
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	i '		İ
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	_33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			_
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	_36_		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X

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Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

Note. All Form 990 filers are required to complete Schedule O

Pa	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V							
			Yes	No				
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 11	♦ ∑	6.3	. ,				
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		2000					
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		ŝ					
	(gambling) winnings to prize winners?	1c	x					
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	÷ **	P. M					
	filed for the calendar year ending with or within the year covered by this return 2a 547	*	1 () () 3.					
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	x					
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	. \$, M	23				
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		X				
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b						
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a]	}	1				
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X				
b	If "Yes," enter the name of the foreign country.							
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.	اً ما	, Y	Ž				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X				
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	_5b_	<u> </u>	X				
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	_5c		ļ				
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	1	i	,,				
	any contributions that were not tax deductible as charitable contributions?	6a		X				
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	ا ۱	Ì	Ì				
7	were not tax deductible? Organizations that may receive deductible contributions under section 170(c).	6b	- 13,	 -				
7 a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	x	ž				
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required							
·	to file Form 8282?	7c	}	x				
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d		3					
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e) iika	X *				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?							
g								
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 7h		X				
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting	×.	12.	`				
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		X				
9	Sponsoring organizations maintaining donor advised funds.	¥.		. j				
а	Did the organization make any taxable distributions under section 4966?	9a		X				
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		X				
10	Section 501(c)(7) organizations. Enter:	1	, 8	**				
a	Initiation fees and capital contributions included on Part VIII, line 12	` ¾		, (
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		10	`*				
11	Section 501(c)(12) organizations. Enter:		* * * * * * * * * * * * * * * * * * *	35 }				
a	Gross income from members or shareholders 11a			>				
р	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	``	*	ľ				
120	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?							
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12a						
13	Section 501(c)(29) qualified nonprofit health insurance issuers.							
	Is the organization licensed to issue qualified health plans in more than one state?	13a						
_	Note. See the instructions for additional information the organization must report on Schedule O	150						
ь	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) '				
С	Enter the amount of reserves on hand							
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X				
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b						
		Form	990	(2012)				

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

	Check if Schedule O contains a response to any question in this Part VI			X							
Sec	tion A. Governing Body and Management										
			Yes	No							
1a	Enter the number of voting members of the governing body at the end of the tax year 18	3 🔬	%	\$							
	If there are material differences in voting rights among members of the governing body, or if the governing										
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.										
ь	10										
2											
	officer, director, trustee, or key employee?	2		x							
3											
_	of officers, directors, or trustees, or key employees to a management company or other person?										
4											
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X							
6	Did the organization have members or stockholders?	6		X							
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	<u> </u>		 -							
	more members of the governing body?	7a		х							
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	<u>'</u> '		 -							
	persons other than the governing body?	7b		х							
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		5 3								
а	The governing body?	<u>&</u> 8a	×	* *							
b	Each committee with authority to act on behalf of the governing body?	8b	X	 							
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	100									
9	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		x							
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)	<u> </u>	_	 ^							
000	tion B. 1 onoies (mis section b requests information about policies not required by the internal nevertide code)		Vaa	N _a							
100	Did the organization have local chapters, branches, or affiliates?	10a	Yes	No							
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	lioa -		\vdash							
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	х	l							
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X								
	Describe in Schedule O the process, if any, used by the organization to review this Form 990	1,614	***	·							
12a	and the second s										
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a 12b	X								
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	·	_==_								
•	in Schedule O how this was done	12c	x								
13	Did the organization have a written whistleblower policy?	13	X								
14	Did the organization have a written document retention and destruction policy?	14	X								
15	Did the process for determining compensation of the following persons include a review and approval by independent	1	٨,	S. 3							
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		*	* ;							
а	The organization's CEO, Executive Director, or top management official	15a	X	array.							
	Other officers or key employees of the organization	15b	X								
_	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	_	***	Q 3							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	3%	**								
_	taxable entity during the year?	16a		X							
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	.02	_								
_	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's										
	exempt status with respect to such arrangements?	16b									
Sec	tion C. Disclosure	1 100									
17	List the states with which a copy of this Form 990 is required to be filed ►WA										
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	availah	le.								
	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, ar	nd finer	ncial								
	statements available to the public during the tax year	.a miai	.J.ai								
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization.	ation:	•								
	COLLEEN OCZKEWICZ - 360-753-6576										
	1530 YELM HIGHWAY SE, OLYMPIA, WA 98501-4684										

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

Check if Schedule O contains a response to any question in this Part VII

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

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

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

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

(A)	(B)	l	111146		C)	npe	isai	(D)	(E)	(F)
Name and Title	Average hours per	box	not c , unle	Pos heck ss pe	ition more rson	than is bot	h an	Reportable compensation	Reportable compensation	Estimated amount of
	week (list any	offic	cer an	dad	irecto	r/trus	tee)	from the	from related organizations	other compensation
	hours for	trustee or director				rted		organization	(W-2/1099-MISC)	from the
	related organizations	ustee	Institutional trustee		8	Highest compensated employee	l	(W-2/1099-MISC)		organization and related
	below	Individual to	utona		Key employee	est con	 =			organizations
	line)	Indiv	Instit	Officer	Key e	를를	Former			
(1) LYNN WOFFORD	0.00		l		ł					
CHAIR		X		X	L_	_	L	0.	0.	0.
(2) STEVE HATTON	0.00	l	l	l			l			•
VICE CHAIR		X	_	X	<u> </u>	_	_	0.	0.	0.
(3) LAURIE BERRYMAN	0.00				l			1		•
SECRETARY		Х	_	X	_	_	_	0.	0.	0.
(4) NEIL WOODY	0.00	l						1		•
TREASURER		Х		X			L	0.	0.	0.
(5) KIM PUTNAM	0.00	l			l	[,	l	_		•
VICE CHAIR		Х		X	<u> </u>		_	0.	0.	0.
(6) KIMBERLY ELLWANGER	0.00	!								•
BOARD MEMBER		X	<u> </u>		<u> </u>	<u> </u>		0.	0.	0.
(7) DICK WADLEY	0.00				ŀ	•	1			_
BOARD MEMBER		Х			<u> </u>		L	0.	0.	0.
(8) JACE MUNSON	0.00				l	İ	l			
BOARD MEMBER		X					L	0.	0.	0.
(9) JOHN PARRY	0.00		Ì '		ì	ĺ	Ì			_
BOARD MEMBER		Х			_		<u> </u>	0.	0.	0.
(10) CHRISTINE FLEMING	0.00			Ì		1	Ī]		_
BOARD MEMBER		X		L	L	<u> </u>	L_	0.	0.	0.
(11) PAT BERSCHAUER	0.00		1	ŀ,			ŀ	_	_	_
BOARD MEMBER		X			<u>_</u>		_	0.	0.	0.
(12) MARY FURMAN	0.00		l	ŀ,				_	_	_
BOARD MEMBER		X					L_	0.	0.	0.
(13) WENDY HOLDEN	0.00			١.			ŀ		_	_
BOARD MEMBER		X	_	L	_		L	0.	0.	0.
(14) JON JONES	0.00			١,			ł		_	_
BOARD MEMBER		X			<u> </u>	<u> </u>		0.	0.	0.
(15) ALLEN T MILLER, JR	0.00		l	l		l				
BOARD MEMBER		X		L				0.	0.	0.
(16) JERRY SHAW	0.00		_							
BOARD MEMBER		X		L	L		L_	0.	0.	0.
(17) BILL MCGREGOR	0.00]				[]				
BOARD MEMBER		X	L			L_		0.	0.	0.
232007 12-10-12								·		Form 990 (2012)

•										
Form 990 (2012) SOUTH SOU	UND YOU	1G	ME	EN '	'S	CF	IR.	ISTIAN ASSN.	91-05	86 4 73 Page 8
Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, and	d Hi	ghe	st C	ompensated Employe	es (continued)	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average	(do		Posi heck		than	one	Reportable	Reportable	Estimated
	hours per week	box	, unle	ss pe	rson	ıs bot or/trus	n an	compensation	compensation	amount of
	(list any	tor			Г			from the	from related organizations	other compensation
	hours for	r direc			1	pa		organization	(W-2/1099-MISC	
	related	stee o	rustee			pensat		(W-2/1099-MISC)		organization
	organizations below	ual tru	lenor		ploye	t com		'		and related organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			Organizations
(18) RUTH WEIGELT	0.00	-	-		Ť	_ e	-			
BOARD MEMBER		х				İ		0.	(0.
(19) MICHAEL WEST	40.00									
PRESIDENT/CEO				X				185,858.		0. 20,437.
(20) COLLEEN OCZKEWICZ	40.00									
CHIEF FINANCIAL OFFICER	40 00	_		X	<u> </u>			39,435.		0. 1,404.
(21) HARRY SUMMERS	40.00			х	l			46 201		0. 4,890.
FORMER CHIEF FINANCIAL OFFICER		 		Δ	 	-		46,391.		0. 4,890.
					ļ					
	<u> </u>	\vdash			\vdash	 -	_			
		ł								
					H					
	<u> </u>	_								
1b Sub-total						▶		271,684.		0. 26,731.
c Total from continuation sheets to Part VI	I, Section A					\triangleright		0.		0. 0.
d Total (add lines 1b and 1c)						<u> </u>		271,684.		0. 26,731.
2 Total number of individuals (including but n	ot limited to th	ose	liste	d al	bove	e) wł	10 re	eceived more than \$100	,000 of reportable	1
compensation from the organization										Yes No
2. Did the experientian list any foremer officer	director or to	.ata	. ka				ا ده	highest sempensated o	mployee en	F
3 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s		stee	э, ке	y en	пріс	yee,	or i	nignest compensated e	inployee on	3 X
4 For any individual listed on line 1a, is the su		le co	omn	ensa	ation	n and	l oth	ner compensation from	the organization	
and related organizations greater than \$150			-					· ·		4 X
5 Did any person listed on line 1a receive or a									dual for services	A. Car
rendered to the organization? If "Yes," com	plete Schedul	e <i>J f</i>	or su	ıch	pers	son				5 X
Section B. Independent Contractors										
1 Complete this table for your five highest co										ensation from
the organization. Report compensation for	the calendar y	ear (endı	ng v	vith	or w	ithir T		year.	
Name and business	address	N	ONI	3				(B) Description of s	ervices	(C) Compensation
					_		\dashv			
		_					\dashv			

Section B. Independent Contractors Complete this table for your five highest compensated independent contractors that received mo the organization. Report compensation for the calendar year ending with or within the organization Name and business address NONE Descrip? Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization

SOUTH SOUND YOUNG MEN'S CHRISTIAN ASSN. 91-0586473 Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response to any question in this Part VIII (D) Revenue excluded from tax under (C) Unrelated Related or Total revenue exempt function business revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 24,629 1 a Federated campaigns 1a 1b b Membership dues 352,039 c Fundraising events 1c d Related organizations 1d 143,804 e Government grants (contributions) 1e f All other contributions, gifts, grants, and 114,956 similar amounts not included above g Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f Business Code 900099 2, 771,492. ,492 2 a MEMBERSHIP DUES Program Service Revenue 324,937.2, 900099 324,937. ь CHILDCARE c YOUTH 900099 384,109 384,109. 900099 320,617. 320,617. d AQUATICS 142,304 142,304. e PHYSICAL EDUCATION 900099 900099 f All other program service revenue 5,943,459 g Total. Add lines 2a-2f Investment income (including dividends, interest, and 24,131. 24,131 other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (ı) Real (II) Personal 6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) (II) Other (i) Securities 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ 352,039. of contributions reported on line 1c) See Part IV. line 18 30,012 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from garning activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 78,949. 51,72**4**. 900099 78,949 11 a SPECIAL EVENTS 51,724 **MISCELLANEOUS INCOME** 900099 d All other revenue 130,673. e Total. Add lines 11a-11d

Total revenue. See instructions.

703,679.5,943,459.

0.

124,792.

Form 990 (2012)

Form 990 (2012) SOUTH SOUND YOU Part IX Statement of Functional Expenses

	Check if Schedule O contains a respon-		s Part IX		X
	ot include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21			7 3 3 3	
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22			88. 88. &v. 5v.	
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16				
	Benefits paid to or for members			***	
	Compensation of current officers, directors, trustees, and key employees	271,684.	114,249.	144,425.	13,010
	Compensation not included above, to disqualified	27270011			
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
	Other salaries and wages	3,203,869.	2,098,905.	1,104,885.	79
	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
	Other employee benefits	390,409.	202,739.	187,670.	
10	Payroll taxes	384,072.	258,772.	125,067.	233
11	Fees for services (non-employees)				
а	Management				
b	Legal	26,176.		26,176.	
С	Accounting	15,188.		15,188.	
d	Lobbying				
	Professional fundraising services. See Part IV, line 17		<u> </u>	<i>X</i> ** * * :	
	Investment management fees				
_	Other. (If line 11g amount exceeds 10% of line 25,	000 121	2 552 652	1 560 074	2 647
	column (A) amount, list line 11g expenses on Sch 0.)	980,131. 56,457.	29,613.	-1,569,874. 26,332.	-2,647
	Advertising and promotion	30,43/•	29,013.	20,332.	312
	Office expenses				
14	Information technology				
15 16	Royalties	642,751.	245,904.	396,847.	
17	Occupancy Travel	33,857.	17,418.	16,439.	
18	Payments of travel or entertainment expenses	30,00			
	for any federal, state, or local public officials				ļ
19	Conferences, conventions, and meetings	22,100.	7,112.	12,015.	2,973
20	Interest	231,814.		231,814.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	389,466.	22,045.	367,421.	
23	Insurance	138,559.	33,979.	104,580.	
24	Other expenses. Itemize expenses not covered	,			
	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule O.)			ļ	<u> </u>
а					
b					
C				 	
d	All all and a second			 	
	All other expenses	6,786,533.	5,583,388.	1,188,985.	14,160
25	Total functional expenses. Add lines 1 through 24e	0,700,333.	3,303,300.	1,100,303.	14,100
26	Joint costs. Complete this line only if the organization]	
	reported in column (D) joint costs from a combined 1				L
	reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.			}	1

Pa	rt X	Balance Sheet			
		Check if Schedule O contains a response to any question in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		1_	
	2	Savings and temporary cash investments	632,178.	2	563,324.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	87,911.	4	88,880.
	5	Loans and other receivables from current and former officers, directors,		>	
	ł	trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5_	
	6	Loans and other receivables from other disqualified persons (as defined under			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing		.388	
	l	employers and sponsoring organizations of section 501(c)(9) voluntary	<u> </u>		
Ø		employees' beneficiary organizations (see instr). Complete Part II of Sch L	<u> </u>	6	
Assets	7	Notes and loans receivable, net	1	7_	0 200
As	8	Inventones for sale or use	2,886.	8_	2,627.
	9	Prepaid expenses and deferred charges	208,706.	9	143,597.
	10a	Land, buildings, and equipment: cost or other		100	
		basis Complete Part VI of Schedule D 10a 15,824,426	ا م م م	v	12,108,800.
	1	Less: accumulated depreciation 10b 3,715,626	12,262,848.	10c	12,108,800.
	11	Investments - publicly traded securities		11	
	12	Investments - other securities See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11	ļ	13	
	14	Intangible assets	1,469,772.	14	1,648,372.
	15	Other assets See Part IV, line 11	14,664,301.	15_	14,555,600.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	604,532.	16 17	658,917.
	17 18	Accounts payable and accrued expenses	004,332.	18	030,317.
	19	Grants payable Deferred revenue	 	19	
	20	Tax-exempt bond liabilities	 	20	
ın.	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
iţie	22	Loans and other payables to current and former officers, directors, trustees,	**************************************	 -	(4. (b. 1)
Liabilities		key employees, highest compensated employees, and disqualified persons		¥	
Ë		Complete Part II of Schedule L	· la and silling	22	1886 - Cár 1884 - "2r.
	23	Secured mortgages and notes payable to unrelated third parties	3,821,550.	23	3,496,146.
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24) Complete Part X of			
		Schedule D	26,351.	25	25,208.
	26_	Total liabilities. Add lines 17 through 25	4,452,433.	26	4,180,271.
		Organizations that follow SFAS 117 (ASC 958), check here ▶ X and	Ý /	٠.٠ %	* '. * '.
es		complete lines 27 through 29, and lines 33 and 34.		éaire -	la le le la Y
auc	27	Unrestricted net assets	10,211,868.	27	10,375,329.
Bal	28	Temporarily restricted net assets		28	<u> </u>
臣	29	Permanently restricted net assets		29	
Ē	1	Organizations that do not follow SFAS 117 (ASC 958), check here			
ō	ļ	and complete lines 30 through 34.	Administration of the second s	mb Hoos	***************************************
sets	30	Capital stock or trust principal, or current funds		30	
Ase	31	Paid-in or capital surplus, or land, building, or equipment fund	<u> </u>	31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds	40.064.055	32	40000
4	33	Total net assets or fund balances	10,211,868.	33	10,375,329.
	34_	Total liabilities and net assets/fund balances	14,664,301.	34	14,555,600.

	990 (2012) SOUTH SOUND YOUNG MEN'S CHRISTIAN ASSN.		91-0	<u> 5864</u>	73	Pag	ge 12
Pa	t Ⅺ Reconciliation of Net Assets						_
	Check if Schedule O contains a response to any question in this Part XI						X
1 2 3 4 5 6 7 8	Total revenue (must equal Part VIII, column (A), line 12) Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) Net unrealized gains (losses) on investments Donated services and use of facilities Investment expenses Prior period adjustments Other changes in net assets or fund balances (explain in Schedule O)		1 2 3 4 5 6 7 8 9	6,	786 -82 211 47	5,5 2,8 1,8 7,9	79. 33. 54. 65.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,			10	271	ະ ວ	20
Da	column (B))		10	10,	3 / :	, 3	<u> 29.</u>
ŗa	t XIII Financial Statements and Reporting						X
	Check if Schedule O contains a response to any question in this Part XII					Yes	No
1 2a	Accounting method used to prepare the Form 990 Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O 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				O.	X n	. ⁷
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 se consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight review, or compilation of its financial statements and selection of an independent accountant?	•		7.277	2b	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Act and OMB Circular A-133? If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the or audits, explain why in Schedule O and describe any steps taken to undergo such audits	ne Sii	ngle Audıt	.3	3a	i) duu	X
	or addits, explain why in schedule of and describe any steps taken to undergo such addits			1	JU		

232012 12-10-12 Form **990** (2012)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

QDE to Public Inspection

Name of the organization

Employer identification number

	•		OUND YOUNG M					1	. 9	1-0586473	
Part I	Reason	for Public Cha	rity Status (All organiz	ations mu	st complet	e this part) See inst	tructions.			
The organ	ization is not a	private foundation	because it is: (For lines	1 through	11, check	only one b	ox)				
1 🖳	A church, co	nvention of churche	s, or association of chur	ches desc	nbed in se	ction 170	(b)(1)(A)(i)).			
2	A school des	cribed in section 17	70(b)(1)(A)(iı). (Attach Sc	hedule E)							
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 stat	e		·							
5 📖	An organizati	on operated for the	benefit of a college or ur	niversity ov	wned or op	perated by	a governi	mental uni	t describ	ped in	
	section 170(b)(1)(A)(iv). (Complete Part II.)										
6 🖳	A federal, sta	ite, or local governm	ent or governmental uni	t described	d ın sectio	n 170(b)(1	I)(A)(v).				
7 📖	An organizati	on that normally red	eives a substantial part	of its supp	ort from a	governme	ental unit c	or from the	general	public described in	
	section 170(b)(1)(A)(vi). (Comple	ete Part II.)								
8 🖳	A community	trust described in s	section 170(b)(1)(A)(vi).	(Complete	Part II.)						
9 X	An organizati	on that normally red	eives (1) more than 33 °	1/3% of its	support f	rom contri	butions, m	nembershij	p fees, a	and gross receipts from	
	activities rela	ted to its exempt fu	nctions - subject to certa	ain excepti	ons, and (2	2) no more	than 33 1	1/3% of its	support	t from gross investment	
	income and u	inrelated business t	axable income (less sect	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	ınızatıon	after June 30, 1975	
	See section	509(a)(2). (Complet	e Part III.)								
10	An organizati	on organized and o	perated exclusively to te	st for publ	ic safety. S	See sectio	n 509(a)(4	1).			
11	An organizati	on organized and o	perated exclusively for th	ne benefit (of, to perfo	orm the fur	nctions of,	or to carr	y out the	purposes of one or	
	more publicly	supported organization	ations described in secti	on 509(a)(⁻	1) or section	n 509(a)(2	?) See sec	ction 509(a	a)(3). Ch	eck the box that	
	describes the	e type of supporting	organization and comple	ete lines 1	1e through	11h.					
	a Type I	ı b ∟⊥⊤	ype II c L T	ype III · Fui	nctionally i	ntegrated	C	і 📖 Тур	e III - No	n-functionally integrated	
e 🗀	By checking	this box, I certify tha	at the organization is not	controlled	directly o	r indirectly	by one o	r more disc	qualified	persons other than	
	foundation m	nanagers and other t	than one or more publicly	y supporte	d organiza	itions desc	cribed in s	ection 509	9(a)(1) or	section 509(a)(2).	
f	If the organiz	ation received a wri	tten determination from t	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III			
	supporting or	rganization, check t	nis box								
g	Since August	t 17, 2006, has the	organization accepted ar	ny gift or co	ontribution	from any	of the foll	owing pers	sons?		
	(ı) A perso	n who directly or inc	lirectly controls, either al	lone or tog	ether with	persons o	lescribed	ın (II) and (III) below	, Yes No	
	the gove	erning body of the s	upported organization?							11g(ı)	
		•	n described in (i) above?							11g(ii)	
	(iii) A 35% (controlled entity of a	a person described in (i) o	or (II) above	e?					11g(iii)	
h	Provide the f	ollowing information	about the supported or	ganızatıonı	(s).						
			<u></u>	<u> </u>		r 		1 6.23.15	Ala -		
	of supported	(ii) EIN	(iii) Type of organization	(iv) is the o	rganization			(vi) ls organizatio	on in col.	(vii) Amount of monetary	
orga	anızatıon		(described on lines 1-9 above or IRC section		document?	(i) of your		(i) organız U.S	ed in the	support	
		ļ	(see instructions))	<u> </u>							
		<u> </u>		Yes	No	Yes	No	Yes	No		
		ļ	 	 				ļ			
				 	<u> </u>				 		
											
		}	}	j .				ļ			
				 				 			
			 	 		-			<u> </u>		
				1				i			

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

Schedule A (Form 990 or 990-EZ) 2012

Schedule A (Form 990 or 990-EZ) 2012 [Part II] Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

<u>Se</u>	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not	<u> </u>			ı		
	include any "unusual grants.")			(Į.	
2	Tax revenues levied for the organ-	_					
	ization's benefit and either paid to						
	or expended on its behalf	<u></u>]]]	
3	The value of services or facilities						
	furnished by a governmental unit to	ļ	Į.	ļ		ļ	
	the organization without charge			<u></u>			
4	Total. Add lines 1 through 3					_	
5	The portion of total contributions	1 4 1 1/2	***	* * *	X 704 100	, , , , , , , , , , , , , , , , , , ,	
	by each person (other than a	- Total - 19	ž. **		[A. ** **	
	governmental unit or publicly				¥		
	supported organization) included					* ; * y .	
	on line 1 that exceeds 2% of the						
	amount shown on line 11,			k. 7. 7.		l a. 🤏 . 🐗	
	column (f)	· · · · · · · · · · · · · · · · · · ·	8 8 8			**************************************	
_6	Public support. Subtract line 5 from line 4	to a Marie	% / 9°	₩ *4	* * * *	e X	
Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	<u></u>					
8	Gross income from interest,						
	dividends, payments received on	1			\		
	securities loans, rents, royalties						
	and income from similar sources						
9	Net income from unrelated business	}]	
	activities, whether or not the						
	business is regularly carried on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10	***	* & 4	· & / &	*** **** · ·	* / * * * * * * * * * * * * * * * * * *	
12	Gross receipts from related activities	, etc (see instructi	ons)			12	
13	First five years. If the Form 990 is fo	r the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
Sec	organization, check this box and stop ction C. Computation of Publication		rcentage				
14	Public support percentage for 2012 (line 6, column (f) d	ivided by line 11, o	column (f))		14	%
	Public support percentage from 2011			.,,		15	%
	33 1/3% support test - 2012. If the			n line 13, and line	14 is 33 1/3% or n	nore, check this bo	
	stop here. The organization qualifies	as a publicly supp	orted organization	1			▶□
b	33 1/3% support test - 2011. If the	organization did no	t check a box on	line 13 or 16a, and	line 15 is 33 1/3%	or more, check th	ns box
	and stop here. The organization qual	lifies as a publicly s	supported organiz	ation			▶□
17a	10% -facts-and-circumstances tes	t - 2012. If the org	anization did not d	check a box on line	e 13, 16a, or 16b,	and line 14 is 10%	or more,
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"					J	ightharpoons
b	10% -facts-and-circumstances tes	t - 2011. If the org	anization did not d	check a box on line	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets the						
	organization meets the "facts-and-circ						
18	Private foundation. If the organization			•	· · · · · -		s >
						dule A (Form 990	

Schedule A (Form 990 or 990-EZ) 2012 SOUTH SOUND YOUNG MEN'S CHRISTIAN ASSN. 91-0586473 Page 3

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

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	ınclude any "unusual grants ")	6,863,945.	7,547,312.	7,057,843.	6,684,871.	6,592,830.	34,746,801.
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose	96,444.	63,368.	119,625.	118,845.	72,558.	470,840.
3	Gross receipts from activities that	,				, , , , ,	
	are not an unrelated trade or bus-						
	iness under section 513	,					
4	Tax revenues levied for the organ-					<u> </u>	
•	ization's benefit and either paid to						
	or expended on its behalf						
_	· ·						
Э	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge		7 510 500		4 22 -14		
	Total. Add lines 1 through 5	6,960,389.	7,610,680.	7,177,468.	6,803,716.	6,665,388.	35,217,641.
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						0.
b	Amounts included on lines 2 and 3 received from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						0.
C	Add lines 7a and 7b						0.
8	Public support (Subtract line 7c from line 6.)		3	· , ; , , , , , , , , , , , , , , , , ,	·	` V	35,217,641.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6	6,960,389.	7,610,680.	7,177,468.	6,803,716.	6,665,388.	35,217,641.
10a	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar sources	74,296.	38,410.	26,280.	36,134.	24,131.	199,251.
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b	74,296.	38,410.	26,280.	36,134.	24,131.	199,251.
	Net income from unrelated business	,					
	activities not included in line 10b,						
	whether or not the business is regularly carried on						
12	Other income Do not include gain						
	or loss from the sale of capital						
12	assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, and 12)	7,034,685.	7,649,090.	7,203,748.	6,839,850.	6,689,519.	35,416,892.
	First five years. If the Form 990 is for						
17	check this box and stop here	the organization's	anst, second, triii	a, lourin, or milit ta	ix year as a sectio	n 50 r(c)(3) organiz	ation,
Sec	ction C. Computation of Publ	ic Support Per	rcentage				
	Public support percentage for 2012 (I			odumn (fl)		15	99.44 %
	Public support percentage from 2011	• • • • • • • • • • • • • • • • • • • •	•	olumn (i))			20 0 4
	ction D. Computation of Inves					16	99.24 %
	Investment income percentage for 20			12 column (6)		47	.56 %
	•	*	• •	ie 13, column (i))		17	
	Investment income percentage from 2				45 4 0	18	
158	33 1/3% support tests - 2012. If the						/ is not
ı.	more than 33 1/3%, check this box at				· ·		
a	33 1/3% support tests - 2011. If the	-			•	•	and
	line 18 is not more than 33 1/3%, che						. ▶⊨
20	Private foundation. If the organizatio	n did not check a l	box on line 14, 19	a, or 19b, check th	is box and see ins	tructions	

(Form 990)

Supplemental Financial Statements
► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Nam	e of the organization SOUTH SOUND YOUNG	MEN'S CHRISTIAN ASSN	• 91-0586473
Pai			
	organization answered "Yes" to Form 990, Part IV, lin		e er e ee e ee ee ee ee ee ee ee
	erganization anonoto roo to ronn ooo, ratery, in	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	- ''	
2	Aggregate contributions to (during year)		
3	Aggregate contributions to (during year) Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets hold in donor advisor	and funda
5	are the organization's property, subject to the organization's	•	Yes No
6	Did the organization inform all grantees, donors, and donor a	<u> </u>	
Ü	for charitable purposes and not for the benefit of the donor of		-
	impermissible private benefit?	or donor advisor, or for any other purpose	Yes No
Par		ganization answered "Yes" to Form 990.	
1	Purpose(s) of conservation easements held by the organizat		
	Preservation of land for public use (e.g., recreation or e		storically important land area
	Protection of natural habitat	· []	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		
	,		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic struct	ure
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the	e organization during the tax
	year ▶		
4	Number of states where property subject to conservation ea	sement is located >	
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements	t holds?	└ Yes └ No
6	Staff and volunteer hours devoted to monitoring, inspecting,	_	
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements during	g the year ▶ \$
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170	
	and section 170(h)(4)(B)(ii)?		∟ Yes ∟ No
9	In Part XIII, describe how the organization reports conservati	•	•
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes	the organization's accounting for
Dá	conservation easements	4 Art Historical Transverse or C	Ather Cimiler Accets
Fai	Complete if the organization answered "Yes" to Form	•	ther Sillinar Assets.
10	If the organization elected, as permitted under SFAS 116 (AS		mont and bolomo short walks of at
Ia	historical treasures, or other similar assets held for public ext		
	the text of the footnote to its financial statements that descri	· · · · · · · · · · · · · · · · · · ·	ance of public service, provide, in Part Air,
h	If the organization elected, as permitted under SFAS 116 (AS		t and balance shoot works of out historical
b	treasures, or other similar assets held for public exhibition, e		
	relating to these items:	ducation, or research in futurerance of pu	iblic service, provide the following amounts
	(i) Revenues included in 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 tre	easures or other similar assets for financia	
~	the following amounts required to be reported under SFAS 1		ai gairi, provide
а	Revenues included in Form 990, Part VIII, line 1	To a CO Soof Telating to these items.	▶ \$
	Assets included in Form 990, Part X		\$
J	, addit morado in rollin ood, Falt A		Ψ

		MOY DAUC						<u>-0586473</u>	
Par	t∭ Organizations Maintaining C	ollections of	Art, His	torical Tr	reasures,	or Othe	r Similar A	Assets(continu	ıed)
3	Using the organization's acquisition, accession	on, and other rec	ords, chec	k any of the	following that	at are a si	gnificant use	of its collection	items
	(check all that apply)								
а	Public exhibition		d 🖳	Loan or exc	change progr	ams			
b	Scholarly research		е 📖	Other					
С	Preservation for future generations								
4	Provide a description of the organization's co	ollections and exp	olain how t	hey further t	the organizat	ion's exei	mpt purpose i	n Part XIII.	
5	During the year, did the organization solicit or	r receive donatio	ns of art, h	istorical trea	asures, or oth	er sımılar	assets		
	to be sold to raise funds rather than to be ma							Yes	No.
Par	t IV Escrow and Custodial Arran		plete if the	e organizatio	on answered	"Yes" to	Form 990, Pa	rt IV, line 9, or	
	reported an amount on Form 990, Par	t X, line 21.		<u> </u>					
1a	Is the organization an agent, trustee, custodi	an or other interr	nediary for	contributio	ns or other as	ssets not	ıncluded		
	on Form 990, Part X?							Yes	└─ No
b	If "Yes," explain the arrangement in Part XIII	and complete the	following	table:					
							<u> </u>	Amount	
C	Beginning balance						1c		
	Additions during the year						1d		
е	Distributions during the year						1e		
f	Ending balance						1f		
	Did the organization include an amount on Fo							∟_ Yes	No
	If "Yes," explain the arrangement in Part XIII								<u> </u>
Pai	t V Endowment Funds. Complete if								
_		(a) Current yea	r (b) I	Prior year	(c) Two yea	rs back	(d) Three years	back (e) Four	ears back
_	Beginning of year balance				 				
b	Contributions				 		·		
	Net investment earnings, gains, and losses		┿		 				
	Grants or scholarships				 				
е	Other expenditures for facilities								
	and programs		-		 				
	Administrative expenses				 				
g	End of year balance					1			
2	Provide the estimated percentage of the curr	ent year end bala		lg, column (a)) held as:				
	Board designated or quasi-endowment		%						
	Permanent endowment	%	,						
С	Temporanly restricted endowment	9/	0						
2-	The percentages in lines 2a, 2b, and 2c should be the second and the second sec	•	n:=at.an th	-4		6 41		_	
Ja	Are there endowment funds not in the posse	ssion of the orga	nization th	at are neid a	and administe	erea for tr	ne organizatio	<u> </u>	/ N
	by:								es No
	(i) unrelated organizations							3a(i)	
h	(ii) related organizations If "Yes" to 3a(ii), are the related organizations	listed as require	d on Sobo	dula D2				3a(ii)	
4	Describe in Part XIII the intended uses of the	•						30 1	
	t.VI & Land, Buildings, and Equipm								
	Description of property	(a) Cost o			t or other	(c) Ac	cumulated	(d) Book	value
	2000. Proporty	basis (inve			(other)		reciation	(4) 5000	·uiuc
1a	Land				2,200.			1.492	,200.
	Buildings				3,448.	2.8	364,327		
	Leasehold improvements			,	, = ,		_,_,	 	<u>, </u>
	Equipment			1.08	8,778.		51,299	. 237	,479.
	Other			 	,			 	
	. Add lines 1a through 1e. (Column (d) must ed	qual Form 990. P	art X. colui	nn (B), line	10(c))			12,108	,800.

Schedule D (Form 990) 2012

Schedule D (Form 990) 2012 SOUTH SOU	UND YOUNG	MEN'S	CHRISTIAN	ASSN. 91	-0586473	Page 3
Part VII Investments - Other Securities	S. See Form 990, F				 	
(a) Description of security or category (including name of sec	urity) (b) Boo	k value	(c) Method of v	aluation Cost or en	d-of-year market v	/alue
(1) Financial derivatives						
(2) Closely-held equity interests (3) Other						
(A)	- 					
(B)						
(C)						
(D)				······································		
(E)						
(G)						
			<u> </u>	· · · · · · · · · · · · · · · · · · ·		
(1)			300			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12			V. 3 %. %		in the second	'À.
Part VIII Investments - Program Relate (a) Description of investment type	(b) Boo			aluation: Cost or en	d of year market y	voluo.
	(5) 500	N value	(C) Metriod of V	aluation Cost of en	d-or-year market v	/aiue
(1)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						.,
(9)						
(10)						
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13			* , * **	*	- 14 A	; <u>\$</u> ,
Part IX Other Assets. See Form 990, Part X						
TOYCO BEDAY TATE CONTROL	(a) Description				(b) Book va	
(1) LONG-TERM INVESTMENTS			-		1,648	<u>,372.</u>
(2)						
(3)						
(4)					 	
(5)					 	
<u>(6)</u> (7)						
(8)	·	 -				
(9)						
(10)						
Total. (Column (b) must equal Form 990, Part X, col ((B) line 15)				1,648	$\overline{372}$.
Part X Other Liabilities. See Form 990, Pa						
1. (a) Description of liability			(b) Book value	** *.	* *	¥ `&.
(1) Federal income taxes						· . **}
(2) FUNDS HELD FOR OTHERS			25,208.	` `		´%
(3)					ĺ	1
(4)						
(5)						ĺ
(6)						
						
(8)						5
(9)						1
(10)			- 			}
(11) Total (Column (h) must equal Form 990, Part V, col. ((P) Ino. 25 1		25,208.			•
Total. (Column (b) must equal Form 990, Part X, col (2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the		oto to the		Latatamanta #5 = # :-	and the are-	·*·
liability for uncertain tax positions under FIN 48 (A						LIIOIIS
The state of the s		LOAL	S. GIO IOCHIOLE HAS	SSON PIOTIGEU III FO	41.5.73111	

Sche	dule D (Form 990) 2012 SOUTH SOUND YOUNG MEN'S CH			0586473	Page 4
Par	XI Reconciliation of Revenue per Audited Financial Stateme	ents With Revenue per F	Return		
1	Total revenue, gains, and other support per audited financial statements		1	6,689	519.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		*		
а	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d			
е	Add lines 2a through 2d		2e _		_ 0.
3	Subtract line 2e from line 1		3	6,689,	519.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		*		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b 14,160.			
С	Add lines 4a and 4b		4c	14,	160.
5_	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	6,703	679.
Par	teXII Reconciliation of Expenses per Audited Financial Statem	ents With Expenses per	Retu		
1	Total expenses and losses per audited financial statements		1	6,772,	373.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		ſ,		
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b	1		
С	Other losses	2c	* 1		
d	Other (Describe in Part XIII.)	2d			
e	Add lines 2a through 2d		2e		0.
3	Subtract line 2e from line 1		3	6,772	373.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		%		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b 14,160.			
С	Add lines 4a and 4b		4c	14	160.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	6,786,	
	t XIII Supplemental Information				
Com	elete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part II	II, lines 1a and 4: Part IV, lines 1	b and 2	b: Part V. line	4: Part
	2; Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to			, , ,	
PAF	T XI, LINE 4B - OTHER ADJUSTMENTS:				
FUN	DRAISING				
PAF	T XII, LINE 4B - OTHER ADJUSTMENTS:				
FUN	DRAISING				
FUN	DRAISING				
			0-1		001 0040

Schedule D (Form 990) 2012

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" to 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. ➤ See separate instructions.

OMB No 1545-0047

2012

Open To Public Inspection

Name of the organization SOUTH S	OUND YOUNG MEN'S C	HRI	STI	AN ASSN.	91-0586	473
Part I Fundraising Activities required to complete this par	 Complete if the organization answet 	red "Y	es" to	Form 990, Part IV, I	ine 17 Form 990-EZ	filers are not
a Mail solicitations b Internet and email solicitations c Phone solicitations d In-person solicitations 2 a Did the organization have a written of key employees listed in Form 990, P b If "Yes," list the ten highest paid ind compensated at least \$5,000 by the	e Solicitat f Solicitat g Special or oral agreement with any individual cart VII) or entity in connection with prividuals or entities (fundraisers) pursi	ion of ion of fundra (inclui	non-g gover alsing ding o lonal f	overnment grants nment grants events fficers, directors, tru undraising services?	stees orYes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have c or con contribi	ustody trol of	(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			
· · · · · · · · · · · · · · · · · · ·						
Total 3 List all states in which the organization or licensing	on is registered or licensed to solicit of	contrib	▶ outions	or has been notified	d it is exempt from re	egistration
or licerishing						
						

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

Schedule G (Form 990 or 990-EZ) 2012 SOUTH SOUND YOUNG MEN'S CHRISTIAN ASSN. 91-0586473 Page 2 Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events STRONG KIDS NONE (add col (a) through CAMPAIGN col. (c)) (event type) (event type) (total number) 352,039 352,039. 1 Gross receipts 352,039 352,039. 2 Less: Contributions 3 Gross income (line 1 minus line 2) 4 Cash prizes 5 Noncash prizes 6 Rent/facility costs 7 Food and beverages 8 Entertainment 30,012. 30,012. 9 Other direct expenses 30,012, 10 Direct expense summary. Add lines 4 through 9 in column (d) 30,012. 11 Net income summary. Combine line 3, column (d), and line 10 Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total garning (add (a) Bingo (c) Other gaming Revenue bingo/progressive bingo col. (a) through col (c)) Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses Yes Yes Yes 6 Volunteer labor 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary Combine line 1, column d, and line 7 9 Enter the state(s) in which the organization operates gaming activities: a is the organization licensed to operate gaming activities in each of these states? b If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes b If "Yes," explain:

232082 01-07-13

Schedule G (Form 990 or 990-EZ) 2012

Sch	edule G (Form 990 or 990-EZ) 2012 SOUTH SOUND YOUNG MEN'S CHRISTIAN ASSN. 91-0	<u>)586473</u>	Page 3
11	Does the organization operate 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 operated in:		
а	The organization's facility	13a	%
b	An outside facility	13b	%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Nama N		
	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:		
	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 to be distributed to other exempt organizations or spent in the		
	organization's own exempt activities during the tax year ▶ \$		
Pa	rt IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii)	and (v), and	Part III,
	lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information	n (see instruc	tions)

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" to Form 990, Part IV, line 23.

➤ Attach to Form 990. ➤ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization

SOUTH SOUND YOUNG MEN'S CHRISTIAN ASSN.

Employer identification number 91-0586473

Pá	art I Questions Regarding Compensation			
			Yes	No
t a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,	< 1	, S	* *
	Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items	[:	() \ \ ,	, % ;
	First-class or charter travel Housing allowance or residence for personal use] '		3 10
	Travel for companions Payments for business use of personal residence	\$.	₩,	* *
	Tax indemnification and gross-up payments Health or social club dues or initiation fees	ş	, ,	
	Discretionary spending account Personal services (e.g , maid, chauffeur, chef)		Ž.	Į į
		1. Art. 1. Art		3
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or	1.00×	1,1	
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	[".	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,	1		
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	X	
		`,`\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	* %	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's	Ê		
	CEO/Executive Director. Check all that apply Do not check any boxes for methods used by a related organization to	1) }	, š
	establish compensation of the CEO/Executive Director, but explain in Part III	*	3	*
	X Compensation committee	3	1	() ()
	Independent compensation consultant Compensation survey or study	- K		
	Form 990 of other organizations Approval by the board or compensation committee	***		* {
		-:	2 1	1
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing		*	**
	organization or a related organization:	1 3	Ñ	*
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	1	44	<i>j</i> . **
				7 200
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			1
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	3		
	contingent on the revenues of.		, , ,	
а	The organization?	5a		X
b	Any related organization?	5b		X
	If "Yes" to line 5a or 5b, describe in Part III.	3 · 1		() (%)
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	/ " *	364	
	contingent on the net earnings of	\ ` '	3,63 **	25.2.
а	The organization?	6a		_X_
b	Any related organization?	6b		Х
	If "Yes" to line 6a or 6b, describe in Part III.		3°	
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments	1		
	not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in 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	8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	9		

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

Schedule J (Form 990) 2012

91-0586473 SOUTH SOUND YOUNG MEN'S CHRISTIAN ASSN.

Page 2

Schedule J (Form 990) 2012

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

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

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

(0) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) (11) (12) (13) (14) (15) (16) (17) (18) (19) (10) (10) (11) (12) (13) (14) (15) (16) (17) (18) (19) (10) (11) (12) (13) (14) (15) (16) (17) (18) (19) (10) (11) (12) (13) (14) (15) (16) (17) (18) (19)<
(i) (ii) (ii)

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

Employer identification number OMB No 1545-0047 2012 Open to Public Inspection Supplemental Information on Tax-Exempt Bonds

► Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

► Attach to Form 990.

SOUTH SOUND	SOUND YOUNG MEN'S	73	AS					91	-058647		3	
Part Bond Issues SEE	PART VI	FOR COLUMN	(E)	CONTINUATIONS	SNO	. :						
(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	brice	(f) Description of purpose	n of purpose	(9) Defe	o (()	(g) Defeased (h) On behalf of issuer		(i) Pooled financing
								Yes	No Ye	Yes No	Yes	N _o
WASHINGTON STATE HOUSING A FINANCE COMMISSION	91-18747300	000000000	01/12/10	REFUNI 4,145,000.ISSUE	RI 000.IS		PRIOR ATED SEPTE	व	×	×		×
8												
S				 								
۵										<u> </u>	ļ	<u> </u>
Part II Proceeds												
because of the other than the second to the		! !	A 659	139		8	O					
Į.				!				ļ				
l							,					
ļ		:					ļ					
ΙI												
6 Proceeds in refunding escrows									İ			
7 Issuance costs from proceeds												
8 Credit enhancement from proceeds												
9 Working capital expenditures from proceeds												
10 Capital expenditures from proceeds								i	İ			
11 Other spent proceeds												
12 Other unspent proceeds												
13 Year of substantial completion			1	666								
			Yes	No	Yes	No	Yes	No	Yes	s	No	
14 Were the bonds issued as part of a current refunding issue?	nding issue?		Х									
15 Were the bonds issued as part of an advance refunding issue?	funding issue?			×								
16 Has the final allocation of proceeds been made?	,		X						 			
17 Does the organization maintain adequate books and records to support the final allocation of	support the final allocation	of proceeds?	Х									
Part III Private Business Use												
1 Was the organization a partner in a partnership, or a member of an LL	or a member of an	LLC,	A		В	B	U		<u> </u>	0		}
which owned property financed by tax-exempt bonds?	onds?		Yes	No	Yes	οN	Yes	N _S	Yes	s	ટ	
2 Are there any lease arrangements that may result in private business	ilt in private busine	ss use of								+		

Schedule K (Form 990) 2012

232121 12-17-12 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

bond-financed property?

Schedule K (Form 990) 2012 SOUTH SOUND YOUNG MEN'S CHRISTIAN		ASSN.	91-0	-0586473	l l	3		Page 2
Part III Private Business Use (Continued)								
	Α		В		၁		D	
3a Are there any management or service contracts that may result in private business use of bond-financed property?	Yes	No	Yes	No	Yes	No	Yes	No
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c Are there any research agreements that may result in private business use of bond-financed property?								
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside								
4 Enter the percentage of financed property used in a private business use by								
entities other than a section 501(c)(3) organization or a state or local government Entitle proportion of financial proportion of a proportion of the propo		%		%		%		%
unfelated trade of business activity carried on by your organization, another		6		è		è		2
6 Total of lines 4 and 5		% %	!	0/		8 8	i i	8 8
1		×		2		,		2
١,								
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed	1							
jo		%		%		%		%
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections								
1 141-12 and 1 145-2?							- i	
9 Has the organization established written procedures to ensure that all nonqualified								
bonds of the issue are remediated in accordance with the requirements under								
Regulations sections 1 141-12 and 1 145-27								
Part IV Arbitrage								
	A		B		o		O	
	Yes	No	Yes	No	Yes	N _o	Yes	No No
1 Has the issuer filed Form 8038-T?		×						
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?		×						
b Exception to rebate?	X							
c No rebate due?		X						
If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate						!		
computation was performed								
3 Is the bond issue a variable rate issue?		×						
4a Has the organization or the governmental issuer entered into a qualified								
hedge with respect to the bond issue?		×						
b Name of provider								
c Term of hedge) ;
d Was the hedge superintegrated?								
e Was the hedge terminated?				i				
12-17-12						Sch	Schedule K (Form 990) 2012	n 990) 2012

3 Page 3		c D	Yes No Yes No									No Yes	Yes				ions).				
-0586473		В	No	_				8	2					(see instructi			1999				
91-		-	Yes			_						Yes					Schedule k			ER 30,	
ASSN.		٨	٩	×				«	×		A	å		-	×	4	questions or		COMMISSION	SEPTEMBER	
			Yes									Yes					esponses to	esponses to			
Schedule K (Form 990) 2012 SOUTH SOUND YOUNG MEN'S CHRISTIAN	Part IV Arbitrage (Continued)			5a Were gross proceeds invested in a guaranteed investment contract (GIC)?	b Name of provider	c Term of GIC	I	-1	7 Has the organization established written procedures to monitor the requirements of section 148?	Part V Procedures To Undertake Corrective Action			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	- containing :	Part VI Supplemental Information. Complete this part to provide additional information for responses to questions on Schedule K (see instructions)	SCHEDULE K, PART I, BOND ISSUES:	(A) ISSUER NAME: WASHINGTON STATE HOUSING FINANCE	REFUND PRIOR	

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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.

OMB No 1545-0047
2012
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

SOUTH SOUND YOUNG MEN'S CHRISTIAN ASSN.

Employer identification number

SOUTH SOUND YOUNG MEN S CHRISTIAN ASSN. 91-0586473									
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:									
DEVELOPMENT OF SPIRIT, MIND AND BODY THROUGH RECREATIONAL, HEALTH AND									
LEADERSHIP PROGRAMS.									
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:									
SEE ATTACHED									
EXPENSES \$ 960,650. INCLUDING GRANTS OF \$ 0. REVENUE \$ 532,606.									
FORM 990, PART VI, SECTION B, LINE 11: A COPY OF THE 990 WAS MADE									
AVAILABLE TO THE GOVERNING BODY FINANCE COMMITTEE TO REVIEW BEFORE IT WAS									
FILED.									
FORM 990, PART VI, SECTION B, LINE 12C: THE ORGANIZATION MONITORS AND									
ENFORCES COMPLIANCE WITH ITS CONFLICT OF INTEREST POLICY ON A REGULAR									
BASIS.									
FORM 990, PART VI, SECTION B, LINE 15: THE ORGANIZATION DETERMINES									
COMPENSATION OF OFFICERS THROUGH A COMPARABILITY STUDY, APPROVED BY THE									
GOVERNING BODY.									
FORM 990, PART VI, SECTION C, LINE 19: THESE ITEMS WOULD BE MADE AVAILABLE									
ON AN INDIVIDUAL BASIS, UPON REQUEST.									
FORM 990, PART IX, LINE 11G, OTHER FEES:									
SUPPLIES:									

442,536.

Schedule O (Form 990 or 990-EZ) (2012)	Page 2
Name of the organization SOUTH SOUND YOUNG MEN'S CHRISTIAN ASSN.	Employer identification number 91-0586473
MANAGEMENT AND GENERAL EXPENSES	86,270.
FUNDRAISING EXPENSES	9,423.
TOTAL EXPENSES	538,229.
OTHER PROFESSIONAL EXPENSES:	
PROGRAM SERVICE EXPENSES	77,552.
MANAGEMENT AND GENERAL EXPENSES	113,210.
FUNDRAISING EXPENSES	2,734.
TOTAL EXPENSES	193,496.
DUES:	
PROGRAM SERVICE EXPENSES	82,127.
MANAGEMENT AND GENERAL EXPENSES	13,910.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	96,037.
TELEPHONE:	
PROGRAM SERVICE EXPENSES	24,344.
MANAGEMENT AND GENERAL EXPENSES	40,131.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	64,475.
EQUIPMENT RENTAL AND REPAIRS:	
PROGRAM SERVICE EXPENSES	6,664.
MANAGEMENT AND GENERAL EXPENSES	33,866.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	40,530.

	
Schedule O (Form 990 or 990-EZ) (2012) Name of the organization	Page 2
SOUTH SOUND YOUNG MEN'S CHRISTIAN ASSN.	Employer identification number 91-0586473
POSTAGE:	
PROGRAM SERVICE EXPENSES	10,812.
MANAGEMENT AND GENERAL EXPENSES	11,680.
FUNDRAISING EXPENSES	1,022.
TOTAL EXPENSES	23,514.
MISCELLANEOUS:	
PROGRAM SERVICE EXPENSES	672.
MANAGEMENT AND GENERAL EXPENSES	9,018.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	9,690.
SPECIAL EVENTS:	
PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	34,658.
TOTAL EXPENSES	34,658.
ALLOCATION OF INDIRECT EXPENSES:	
PROGRAM SERVICE EXPENSES	1,907,945.
MANAGEMENT AND GENERAL EXPENSES	-1,877,959.

TOTAL EXPENSES													
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	980,131.												

FORM 93	, U	PART	XT,	TINE	<u>9,</u>	CHANGES	TI	NET	ASSETS:	
	_									
FAIR VA	LUE	: ADJI	USTM!	ENT						198,350.

FUNDRAISING EXPENSES

-50,484.

Schedule O (Form 990 or 990-EZ) (2012) Page 2 Employer identification number Name of the organization SOUTH SOUND YOUNG MEN'S CHRISTIAN ASSN. 91-0586473 THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR. AMENDED RETURN EXPLANATION THE 990 IS BEING AMENDED TO ADD THE TAX EXEMPT BOND INFORMATION ON THE SCHEDULE K. NO OTHER FINANCIAL DATA HAS BEEN CHANGED. PART III PAGE 2, PART III - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS INTRODUCTION THE SOUTH SOUND YMCA SERVES OUR COMMUNITY BY MEETING THE HEALTH AND SOCIAL SERVICE NEEDS OF FAMILIES AND INDIVIDUALS. WE WORK TO HELP PEOPLE DEVELOP VALUES AND BEHAVIORS THAT ARE CONSISTENT WITH CHRISTIAN THEY ARE FOR PEOPLE OF ALL FAITHS, RACES, ABILITIES AND PRINCIPLES. NO ONE IS TURNED AWAY FOR INABILITY TO PAY. INCOMES. IN THE YMCA, A VOLUNTEER BOARD HIRES AND SETS POLICY FOR ITS CEO, WHO MANAGES THE OPERATION WITH FULL-TIME AND PART-TIME STAFF AND VOLUNTEER LEADERS. OUR YMCA MEETS COMMUNITY NEEDS THROUGH ORGANIZED ACTIVITIES CALLED PROGRAMS, IN YMCA BUILDINGS AND FROM RENTED QUARTERS, DONATED SPACE, STOREFRONTS, PARKS AND PLAYGROUNDS. YMCAS MEET COMMUNITY NEEDS COUNTYWIDE. THERE ARE MANY HUNDREDS OF CORPORATE YMCAS THAT ARE FORMAL MEMBERS OF THE NATIONAL MOVEMENT. ENTIRE SYSTEM INVITES CREATIVITY AND CHANGE THROUGH ITS AUTONOMOUS MEMBER YMCAS, ITS DECENTRALIZATION AND ITS LACK OF REGIONAL BOUNDARIES.

COMMON SENSE APPROACH.

OVER ITS LONG HISTORY, THE YMCA HAS BEEN RENEWED AGAIN AND AGAIN BY THE

ACTIONS OF ITS MEMBER ASSOCIATIONS, THEIR PROGRAM INNOVATIONS AND THEIR

Employer identification number 91-0586473

YMCAS IN THE UNITED STATES ARE PART OF A WORLDWIDE MOVEMENT, THE
WORLD ALLIANCE OF YMCAS. IT IS A NON-BINDING ORGANIZATION OF
INDEPENDENT YMCA MOVEMENTS FROM MORE THAN 120 COUNTRIES, WITH
HEADQUARTERS IN GENEVA, SWITZERLAND.

MISSION

TO PROVIDE YOUTH AND COMMUNITY AN AFFORDABLE AND ACCESSIBLE

RESOURCE FOR THE POSITIVE GROWTH AND DEVELOPMENT OF MIND, BODY AND

SPIRIT THROUGH RECREATIONAL, HEALTH AND LEADERSHIP PROGRAMS.

PURPOSE

THE YMCA IS A MEMBERSHIP ASSOCIATION OF MEN, WOMEN AND CHILDREN OF
ALL AGES, ABILITIES, INCOMES, RACES AND RELIGIONS. IT IS DEDICATED TO
BUILDING HEALTHY BODY, MIND AND SPIRIT OF INDIVIDUALS AND FAMILIES. IT
PUTS CHRISTIAN PRINCIPLES INTO PRACTICE THROUGH PROGRAMS THAT PROMOTE
GOOD HEALTH, STRONG FAMILIES, YOUTH LEADERSHIP, COMMUNITY DEVELOPMENT
AND INTERNATIONAL UNDERSTANDING.

GOALS

TO ENHANCE AND MAINTAIN THEIR COMMITMENT TO MENTAL, PHYSICAL AND SPIRITUAL WELL-BEING;

©O PROVIDE OPPORTUNITIES AND SUPPORT FOR FAMILIES TO ENRICH THEIR

RELATIONSHIPS THROUGH ACTIVITIES DESIGNED TO EXAMINE AND CLARIFY

VALUES, IMPROVE COMMUNICATION AND ENCOURAGE POSITIVE INTERACTION;

©O PROVIDE THE ENVIRONMENT, OPPORTUNITY AND ENCOURAGEMENT FOR YOUTH

TO DEVELOP SKILLS AND VALUES THAT FOSTER LEADERSHIP, CONFIDENCE,

SELF-ESTEEM, SELF-RELIANCE AND MUTUAL RESPECT;

OO PROVIDE OPPORTUNITIES AND SUPPORT FOR INDIVIDUALS AND GROUPS TO

Schedule O (Form 990 or 990-EZ) (2012) Page 2 Name of the organization **Employer identification number** SOUTH SOUND YOUNG MEN'S CHRISTIAN ASSN. 91 - 0586473DEVELOP A SENSE OF CITIZENSHIP THROUGH PROGRAMS THAT MEET IDENTIFIED COMMUNITY NEEDS; **OO PROVIDE OPPORTUNITIES AND SUPPORT FOR INDIVIDUALS TO EXPAND THEIR** AWARENESS, INTEREST, RESPECT AND APPRECIATION OF THE VARIED PEOPLES AND CULTURES OF OUR GLOBAL SOCIETY. **MEMBERS** IN 2012, 46,538 PEOPLE WERE SOUTH SOUND YMCA MEMBERS AND PROGRAM PARTICIPANTS, INCLUDING 19,401 CHILDREN AND TEENS AND 27,137 ADULTS. OF THESE, 3,913 PEOPLE RECEIVED \$541,810 IN FINANCIAL ASSISTANCE. VOLUNTEERS IN 2012, 1,322 POLICY AND PROGRAM VOLUNTEERS DONATED 16,457 HOURS TO OUR YMCA. DESCRIPTION OF YMCA PROGRAMS AQUATICS: LIFELONG ACTIVITY WATER IS AN UNFAMILIAR PLACE FOR PEOPLE WHO TRAVEL MOSTLY ON DRY BUT SINCE THE PLANET HAS MORE WATER THAN LAND, THERE ARE SWIMMING LESSONS TO BE LEARNED. AT THE YMCA, LEARNING IS A GREAT DEAL MORE THAN IT MIGHT SEEM. IT® TAKING PEOPLE INTO WATER THAT SOME FIND SCARY AT FIRST AND TEACHING THEM NOT ONLY TO SURVIVE BUT ALSO TO THRIVE AND TO FIND FUN, FITNESS, STRESS RELIEF, ADVENTURE AND LIFELONG ENJOYMENT. EVERY YEAR THOUSANDS OF PEOPLE LEARN TO SWIM AT THE YMCA. THAT IS A LOT OF SPLASHING AROUND - WITHOUT EVEN BEGINNING TO COUNT THE THOUSANDS MORE WHO ALREADY KNOW HOW TO SWIM AND JOIN THE YMCA TO SWIM

Schedule O (Form 990 or 990-EZ) (2012)

LAPS, LOOSEN MUSCLES AND JOINTS WITH AQUATIC EXERCISES, BECOME PART OF

232212 01-04-13

SOUTH SOUND YOUNG MEN'S CHRISTIAN ASSN.

Employer identification number 91-0586473

SWIM TEAMS, LEARN LIFE GUARDING, AND INTRODUCE BABIES TO THE POOL OR JUST PLAY AROUND IN THE WATER.

THE FOCUS ON HEALTHY LIVING FOR ALL AGES HAS ONLY INCREASED MANY PEOPLE CLAIM THAT SWIMMING IS THE BEST FORM INTEREST IN AQUATICS. OF EXERCISE FOR YOUNG AND OLD TO KEEP THE BODY FIT AND TRIM WHILE STRENGTHENING THE HEART AND LUNGS.

WATER® BUOYANCY IS A PARTICULAR PLEASURE FOR PEOPLE TEMPORARILY OR PERMANENTLY DISABLED. OUR YMCAS OFFER PROGRAMS SPECIFICALLY FOR WATER CAN OFTEN FREE THEM TO MOVE AROUND SUCH CHILD AND ADULTS. WITHOUT SUPPORT AND STRENGTHEN LITTLE-USED MUSCLES.

SOMETIMES PEOPLE WITH DISABILITIES TAKE PART IN REGULAR CLASSES. BECAUSE RESPECT FOR OTHERS, REGARDLESS OF AGE OR ABILITY, IS AN UNDERLYING VALUE FOR ALL YMCA PROGRAMS, THESE CLASSES PROVIDE AN ATMOSPHERE OF ACCEPTANCE THAT IS ITSELF A POSITIVE EXPERIENCE.

IN RECENT YEARS, YMCA HEALTH AND FITNESS EXPERTS HAVE ADAPTED AEROBIC EXERCISES FOR THE POOL TO CREATE GENTLE-IMPACT AEROBICS. ENABLES EXERCISERS TO WORK AT HIGHER INTENSITY WITH LESS IMPACT THAN ON A GYM OR EXERCISE-ROOM FLOOR. MANY OLDER EXERCISERS ESPECIALLY LIKE WATER AEROBICS.

FUN FOR THE WHOLE FAMILY

MOST PEOPLE COUNT SWIMMING AS A FAMILY AFFAIR AT THE OCEAN, LAKES, IT IS OFTEN A FAMILY AFFAIR AT THE YMCA, TOO, WITH RIVERS AND POOLS. SWIMMING TIMES SET-ASIDE JUST FOR FAMILIES. WATER SPORTS AND SWIMMING ARE ALSO STANDARD FEATURES AT YMCA CAMPS.

THE YMCA® INNOVATION AND LEADERSHIP IN AQUATICS STARTED BACK IN 1885, WHEN THE BROOKLYN, NEW YORK YMCA BUILT AN INDOOR POOL - OR SWIMMING BATH, AS IT WAS CALLED. SWIMMERS ALL DID THE BREASTSTROKE. 232212 01-04-13

A CANADIAN SWIMMING INSTRUCTOR HIRED BY THE DETROIT YMCA IN 1906

REVOLUTIONIZED TEACHING WITH MASS SWIMMING LESSONS AND DRY-LAND DRILLS.

AND HE CHANGED THE BASIC STROKE TO THE CRAWL.

YMCA PROGRESSIVE SWIMMING INSTRUCTION WAS PIONEERED IN THE 1930S.

LEARN-TO-SWIM MONTH WAS A FEATURE OF THE 1950S. NATIONAL LIFEGUARD

TRAINING AND CERTIFICATION AND A FOCUS ON BRINING PEOPLE WITH

DISABILITIES INTO THE POOLS MARKED THE 1970S. AEROBICS AND OTHER

FITNESS REGIMENS WENT @ET@IN THE 1980S.

SAFETY AROUND WATER

YMCAS TAKE SAFETY SERIOUSLY. ONLY THOSE TRAINED AND CERTIFIED TO RIGOROUS YMCA SWIMMING STANDARDS TEACH IN YMCA POOLS.

LESSONS ARE AVAILABLE FOR ALL AGES, ABILITY LEVELS AND INTERESTS.

BABIES AS YOUNG AS 6 MONTHS CAN ENJOY WATER PLAY WITH THEIR PARENTS IN

A PARENT/TOT PROGRAM, WHICH INCLUDES AN INSTRUCTOR IN THE POOL TO COACH

THE ADULTS ON SAFETY SKILLS. 3 ØYEAR OLDS TO 6-YEAR OLDS CAN TAKE

PRE-SWIMMING CLASSES ON THEIR OWN. AT THE CORE IS THE CURRENT

PROGRESSIVE SWIMMING PROGRAM FOR 6-YEAR-OLDS TO ADULTS. BEGINNERS, OR

POLLIWOGS, LEARN SIMPLE STROKES AND PERSONAL SAFETY SKILLS AS THEY GET

A FEEL FOR THE WATER. THOSE WHO STAY IN SWIM LESSONS RIGHT UP TO THE

MOST ADVANCED LEVELS ARE CHALLENGED TO MASTER VARIOUS SWIM STROKES AND

BUILD ENDURANCE.

WORKING FROM THE OVERALL YMCA PHILOSOPHY OF SELF-DEVELOPMENT, THE

INSTRUCTORS USE A PROBLEM-SOLVING, GUIDED DISCOVERY TEACHING APPROACH.

THE EMPHASIS IS ON LEARNING, NOT PASSING OR FAILING. MANY YOUNGSTERS

AND ADULTS WHO LEARN TO SWIM AT YMCAS BECOME TEACHERS THEMSELVES, WHO

GROW IN THEIR OWN LEADERSHIP ABILITIES AS WELL AS SWIMMING SKILLS.

SELF-ESTEEM GROWS

SWIMMING AT THE YMCA IS TAUGHT IN A POSITIVE MANNER - TRUSTING, SUPPORTING, AND CARING. PEOPLE LEARN IN A NON-THREATENING ATMOSPHERE FREE FROM DISCOURAGING CRITICISM. IT MEANS POSITIVE FEEDBACK AND REINFORCEMENT FOR EVEN THE TINIEST GAIN. ACCOMPLISHMENT BUILDS CONFIDENCE AND SELF ESTEEM. IT WORKS WONDERS.

AQUATIC ACCOMPLISHMENTS

AS RESIDENTS OF THE PUGET SOUND, PEOPLE IN THIS COMMUNITY COULD BE SUBJECT TO TRAUMATIC INCIDENTS AROUND WATER. OUR AQUATIC PROGRAMS HELP PREVENT THAT FROM HAPPENING. IN 2012 WE PROVIDED SWIMMING LESSONS TO 6,017 CHILDREN, YOUTH AND TEENS.

PART III

CHILD CARE: WORK WITHOUT WORRY

IN 1980, A GROUP OF YMCA DIRECTORS MET TO DISCUSS THE RAPIDLY GROWING NEED FOR CHILDCARE. THEY RECOGNIZED THAT THE KINDS OF FAMILIES KIDS WERE GROWING UP IN HAD CHANGED. MOST HAD BOTH PARENTS ON THE JOB OR A SINGLE PARENT WHO WORKED. THAT MEANT SOME KID OF DAY CARE WAS NEEDED TO FILL THE GAPS.

IT WAS A NATURAL FOR YMCAS. THEY HAD BEEN ACTIVE FOR 60 YEARS IN A VARIETY OF PARENT-CHILD ACTIVITIES. THEY HAD BEEN INVOLVED IN CHILD CARE, TOO - BEFORE IT WAS EVER CALLED THAT - WITH YOUNGSTERS COMING IN AFTER SCHOOL TO YMCA GAME ROOMS, GYMS, POOLS AND CRAFT CLASSES, GETTING TO KNOW YMCA STAFF MEMBERS AND OTHER KIDS THERE. IN THE SUMMER THERE WERE DAY CAMPS AND FUN CLUBS ALONG WITH REGULAR RESIDENT SUMMER CAMP. ALL OF THIS IS STILL AROUND TODAY, PLUS THERE ARE FORMAL CHILDCARE PROGRAMS.

TO CREATE ITS BASIC MANUALS, THE YMCA DREW FROM ITS OWN EXPERIENCE 232212 01-04-13

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AND ADDED THE ADVICE OF EXPERTS ON CHILD DEVELOPMENT. THE RESULT WAS AN ABILITY TO SET UP AT MULTIPLE SITES, WITH DAILY ACTIVITIES MAPPED OUT BY WELL-PREPARED STAFF MEMBERS. IN ADDITION TO YMCA TRAINING, MANY YMCA CHILDCARE PROFESSIONALS HAVE ADVANCED DEGREES IN EARLY CHILDHOOD EDUCATION, ESPECIALLY THOSE WHO WORK WITH PRESCHOOLERS, INFANTS AND TODDLERS.

FOCUSES ON FAMILY VALUES AND INVOLVEMENT

NO MATTER HAW MANY HOURS YOUNGSTERS SPEND IN A CHILD CARE SETTING

EACH WEEK, IT IS STILL THE FAMILY THAT IS THE SINGLE MOST IMPORTANT

STRUCTURE IN THEIR LIVES. GOOD CHILD CARE MUST BE GOOD FAMILY CARE,

YMCA CHILD CARE PROGRAMS OFFER WONDERFUL OPPORTUNITIES TO STRENGTHEN

FAMILIES, HELPING THEM BETTER COMMUNICATE; WORK AND PLAY TOGETHER;

SHARE VALUES; FEEL A SENSE OF COMMUNITY WITH OTHER FAMILIES AND EVEN

IMPROVE THEIR ECONOMIC STABILITY.

CONVENIENT LOCATIONS AND CARING STAFF MEMBERS

THE YMCA APPROACH IS CHARACTERISTICALLY FLEXIBLE. OUR CHILDCARE

TAKES PLACE IN A VARIETY OF SETTINGS - IN THE YMCA® MULTIPURPOSE

BUILDINGS AND IN SCHOOL GYMNASIUMS, CAFETERIAS AND PORTABLES. THE HIGH

STANDARDS FOR THE CARE OF CHILDREN REFLECT THE YMCA MOVEMENT® VALUES

AND EXPECTATIONS: YMCAS MEET AND OFTEN EXCEED GOVERNMENT LICENSING

STANDARDS.

STAFF MEMBERS ARE WELL PREPARED AND PARTICIPATE IN ONGOING

TRAINING THROUGH THE YMCA SYSTEM OF PROGRAM SCHOOLS, TRAINING EVENTS

AND CERTIFICATION. THEY BELIEVE THEIR PROGRAMS CAN HELP DEVELOP A

BETTER LIFE FOR CHILDREN AND FAMILIES.

LIKE ALL YMCA PROGRAMS, CHILDCARE IS OPEN TO ALL, WITH FINANCIAL

Employer identification number Name of the organization SOUTH SOUND YOUNG MEN'S CHRISTIAN ASSN. 91-0586473 AID AVAILABLE FOR THOSE UNABLE TO PAY FULL FEES. WE PRIDE OURSELVES IN OUR COMMITMENT TO TURN NO ONE AWAY. THE BOTTOM LINE FOR YMCA CHILDCARE IS WHAT® BEST FOR THE FAMILY. PROVIDING IT IS THE YMCA® WAY OF WORKING TO IMPROVE THE QUALITY OF LIFE - FOR THE WHOLE CHILD, THE WHOLE FAMILY AND THE WHOLE COMMUNITY. AGE-APPROPRIATE EXPERIENCE FOR YOUNG CHILDREN EARLY CHILDHOOD CENTERS THE SOUTH SOUND YMCA PROVIDES CARE TO CHILDREN AGES 3 MONTHS TO 5 YEARS AT SOUTH PUGET SOUND COMMUNITY COLLEGE. THIS CENTER SERVES THE STUDENTS AND EMPLOYEES OF SOUTH PUGET SOUND COMMUNITY COLLEGE AND THE GENERAL PUBLIC. PARENTS CAN CONCENTRATE ON STUDIES KNOWING THEIR CHILDREN ARE RECEIVING EXCELLENT CARE. AT OUR BRANCHES, MOTHERS AND FATHERS CAN TAKE ADVANTAGE OF DROP IN CARE WHILE THEY WORK OUT OR ATTEND A PROGRAM. SCHOOL AGE PARENTSOWORKDAYS TYPICALLY START EARLIER AND LATER THAN THEIR CHILDREN® SCHOOL DAYS. THOSE MORNING AND AFTERNOON TIME GAPS CAN BE EMPTY, EVEN LONELY - OR THEY CAN BE FILLED CREATIVELY AND CONSTRUCTIVELY. CHILDREN CONCENTRATE ON ACADEMICS AT ELEMENTARY SCHOOL, BUT THERE IS SOMETHING ELSE FOR THEM TO LEARN IN YMCA PROGRAMS BEFORE AND AFTER THOSE HOURS. YMCA CHILDCARE FOR THESE ELEMENTARY AGED KIDS PROVIDES CHANCES TO EXPRESS INDIVIDUAL TALENTS IN THE ARTS, CRAFTS, GAMES, SPORTS OR OTHER AREAS OF INTEREST, TAKING FULL ADVANTAGE OF YMCA FACILITIES AND CLASSES. KIDS FIND OUT WHAT PARTICIPATION AND SUCCESS IS ALL ABOUT IN AN APPROACH THAT SAYS EVERYBODY PLAYS, EVERYBODY WINS. EACH DAY THERE IS TIME FOR KIDS TO CALL THEIR OWN. AND TIME IS SET ASIDE TO TACKLE HOMEWORK WITH TUTORING AVAILABLE. CLOSE

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COMMUNICATION WITH SCHOOLS IS IMPORTANT. MANY PROGRAMS FOR THESE OLDER CHILDREN ALSO INCLUDE FIELD TRIPS TO WIDEN THEIR WORLD.

YMCA PEOPLE KNOW HOW TO CHALLENGE SCHOOL-AGE CHILDREN AND HOW TO
LISTEN TO THEM. CHILDREN IN THIS AGE GROUP TYPICALLY ENJOY INTERACTING
WITH ALL THE ADULTS INVOLVED, BUT STAFF ALSO HAS A RESPONSIBILITY TO
GIVE FEEDBACK TO PARENTS AS OFTEN AS POSSIBLE.

DAY CAMPS

WHILE HELPFUL FOR WORKING PARENTS, DAY CAMPS ARE AN EXCITING

OPPORTUNITY FOR CHILDREN TO EXPERIENCE THE BEST OF YMCA ACTIVITIES.

DAY CAMPS ARE OFFERED IN THE SPRING, SUMMER, AND WINTER AND DURING

MID-WINTER SCHOOL BREAKS. THESE CAMPS OFFER A WIDE VARIETY OF INDOOR

AND OUTDOOR ACTIVITIES, INCLUDING SPORTS, OVERNIGHT CAMPING, CRAFTS AND

VISITS TO MUSEUMS, ZOOS AND PARKS.

CHILDCARE ACCOMPLISHMENTS

IN MANY INSTANCES, YMCA CHILDCARE ALLOWS PARENTS OF THE CHILDREN
TO REMAIN GAINFULLY EMPLOYED, KNOWING THAT THEIR CHILDREN ARE THRIVING
IN A SAFE, SUPPORTIVE ENVIRONMENT. FOR PARENTS WHO CANNOT AFFORD THE
FULL FEE, CARE IS PROVIDED ON A SLIDING SCALE BASIS. WITH THE
INCREASED COST OF LIVING IN OR AREA, THERE ARE MORE HOMES WHERE BOTH
MOM AND DAD MUST WORK AND MANY SINGLE FAMILIES THAT CRITICALLY NEED
THIS SERVICE. IN 2012 THE YMCA CARED FOR 2,577 CHILDREN AND PROVIDED
\$266,073 IN FINANCIAL ASSISTANCE.

WE CONTINUE TO REACH OUT TO THE COMMUNITY BY CREATING MORE

PROGRAMS AND PROVIDING CHILDCARE IN 28 SCHOOL LOCATIONS, IN OUR EARLY

LEARNING CENTER AND AT OUR FACILITIES.

Name of the organization

SOUTH SOUND YOUNG MEN'S CHRISTIAN ASSN.

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YMCA OLDER ADULTS: A PLACE FOR ALL AGES

THE Y, M AND C IN YMCA STAND FOR YOUNG, MEN® AND CHRISTIAN. AND
WHEN THEY BEGAN IN 1844, YMCAS OPENED THE DOOR ONLY TO CHRISTIAN YOUNG
MEN. IT CERTAINLY IS DIFFERENT TODAY. OVER THE YEARS YMCAS KEPT
OPENING THEIR DOORS WIDER AND WIDER UNTIL THEY INCLUDED ENTIRE
FAMILIES: MEN, WOMEN AND CHILDREN OF ALL AGES, RACES AND RELIGIONS.

THE YMCA HAS BEEN KEEPING PACE WITH MANY FOLKS SINCE THEIR

CHILDHOOD. THERE IS NO REASON TO SHUT THEM OUT ONCE THEY REACH

RETIREMENT. YMCAS HAVE FOUND THAT OLDER ADULTS NEED EXERCISE AND THE

EXTRA EDGE OF GOOD HEALTH IT PROVIDES TO MEET LIFE® CHANGING

CHALLENGES. THEY WANT A PLACE TO GO, LIKE THE YMCA, THAT THEY CAN

DEPEND ON - A PLACE WHERE THEY CAN ENRICH THEIR LIVES AND DEVELOP NEW

SKILLS, NEW INTERESTS AND NEW FRIENDS.

BENEFICIAL USE OF TIME

LIKE EVERYONE ELSE, OLDER PEOPLE NEED TO CONTINUE HAVING A MISSION

IN THEIR LIVES, A SENSE OF DIRECTION AND PURPOSE. THEIR LIVES UNDERGO

MAJOR CHANGES WITH RETIREMENT, ADDED TO THE NATURAL CHANGES IN FAMILY

LIFE THAT COME WITH AGE. AT THE SAME TIME, THEY OFTEN HAVE THE

ADVANTAGE OF MORE TIME TO SPEND IN CONSTRUCTIVE WAYS, DOING THINGS THEY

LIKE TO DO AND FINDING NEW CHALLENGES.

THE SOUTH SOUND YMCA PLAYS AN IMPORTANT ROLE IN THIS PROCESS BY

OFFERING A VARIETY OF OPPORTUNITIES AND ACTIVITIES. EXERCISE IS

UNIVERSALLY RECOMMENDED REGARDLESS OF AGE, AND MANY SEEK OUT THE YMCA

FOR THAT PURPOSE. FAVORITES FOR OLDER ADULTS ARE LIGHTER EXERCISES,

WATER ACTIVITIES AND WALKING.

THE HABITS OF ATTENDING REGULAR EXERCISE CLASSES OFTEN LEAD TO
CREATION OF SOCIAL CLUBS. SOME OF THESE CLUBS HAVE A SINGLE FOCUS,

Page 2 Name of the organization Employer identification number SOUTH SOUND YOUNG MEN'S CHRISTIAN ASSN. 91-0586473 LIKE GETTING TOGETHER TO SWIM, FOR MEALS OR TO TACKLE A COMMUNITY SERVICE PROJECT. OTHERS INCLUDE A VARIETY OF ACTIVITIES, SUCH AS CLASSES RANGING FROM CRAFTS TO CURRENT AFFAIRS. ALSO POPULAR ARE DAY TRIPS AND CAMPING. SOMETIMES OTHER FRIENDS AND FAMILY MEMBERS ARE INVITED. NEW FRIENDS ARE IMPORTANT AT EVERY AGE, BUT THE OPPORTUNITY TO MAKE THEM AT THE TIME OF LIFE WHEN MANY PEOPLE EXPERIENCE THE LOSS OF OLD FRIENDS AND FAMILY MEMBERS IS ESPECIALLY VALUABLE. OPPORTUNITIES FOR HELPING OTHERS MANY OLDER ADULTS CHOOSE TO OFFER THEIR EXTRA HOURS - AND THEIR LIFETIME OF EXPERIENCE - TO THEIR YMCAS, VOLUNTEERING IN MANY AREAS, FROM FUNDRAISING TO PROGRAMS. YMCAS TAKE CARE TO MATCH THE SKILLS AND INTEREST OF VOLUNTEERS WITH THE VARIOUS PROJECTS THAT ARE AVAILABLE. A PARTICULARLY IMPORTANT WAY FOR OLDER MEMBERS TO HELP THEIR YMCA® AND ENRICH THEIR OWN LIVES IS THROUGH INTERACTIONS WITH OUR EATING LUNCH WITH CHILDREN IN DAY CARE, SUPERVISING A GROUP OF YOUTH: ELEMENTARY SCHOOL KIDS ON A FIELD TRIP, ASSISTING WITH A YOUTH SWIM CLASS OR SPORTS LEAGUE OR A ADVISING A TEEN CLUB. OLDER ADULTS TODAY INVOLVE THEMSELVES IN THE FULL LIFE OF THE YMCA. MANY DISCOVER THAT THIS HELPS THEM IN THEIR RELATIONS WITH YOUNGER MEMBERS OF THEIR OWN FAMILIES. IMPROVED MOBILITY AND A SENSE OF WELL-BEING JOGGERS DONO GET OFF THE TRACK BECAUSE THEYWE REACHED A CERTAIN AGE. NOR DO SWIMMERS THROW IN THE TOWEL. IN THE YMCA® FAVORITE HEALTH AND EXERCISE PROGRAMS, IT® SOMETIMES THE OLDER PARTICIPANTS WHO SET THE PACE - IF NOT FOR SPEED,

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Name of the organization **Employer identification number** SOUTH SOUND YOUNG MEN'S CHRISTIAN ASSN. 91-0586473 BUT FOR DEDICATION TO STAYING FIT. THEY ARE AN INSPIRATION TO PEOPLE DECADES YOUNGER WHO CAN SEE HOW EXERCISE HAS HELPED THEM STAY ACTIVE. THE SOUTH SOUND YMCA BRANCHES INCLUDED A SPECTRUM OF AGES IN THEIR THIS GIVES OLDER ADULTS A RANGE OF PROGRAMS TO CHOOSE FROM CLASSES. AND FIND THE ONES THAT ARE BEST FOR THEM. WHILE SOME OLDER PEOPLE JOIN CLASSES WITH ADULTS OF ALL AGES, OTHERS ARE MORE COMFORTABLE WITH PROGRAMS LIMITED TO MEMBERS OF THEIR OWN AGE GROUP. IT® A CHOICE WE BELIEVE OLDER ADULTS SHOULD BE ABLE TO MAKE THEMSELVES. SOME ARE NEWCOMERS TO THE FITNESS FIELD, PERHAPS FINDING TIME LATER IN LIFE FOR THE EXERCISE THEY HAD ALWAYS MEANT TO DO BUT KEPT PUTTING OFF. OTHERS TRY THE YMCA AT THE RECOMMENDATION OF A PHYSICIAN TO HELP DEAL WITH A PHYSICAL PROBLEM. YMCA STAFF MEMBERS HELP THEM FIND AN APPROPRIATE PROGRAM, ONE THEYOL ENJOY DURING WORKOUTS AND AT OTHER TIMES BECAUSE OF HOW MUCH BETTER IT MAKES THEM FEEL. OLDER ADULT ACCOMPLISHMENTS IN 2012, THE SOUTH SOUND YMCA SERVED 4,814 ADULTS 55 YEARS OF AGE AND OLDER. PART III SPORTS: DEVELOPS VALUES STRONGER THAN WINNING COACHES START WITH PLAYERS AT WHATEVER SKILL LEVEL THEY FIND THEM. THEY TRY TO WORK WITH EACH PLAYER TO SET GOALS AND EVALUATE PROGRESS IN LIGHT OF PLAYERSOOWN STANDARDS - NOT THOSE OF THE FASTEST, STRONGEST OR MOST COORDINATED.

THE TEACHING COMPONENT IS IMPORTANT. PRACTICE SESSIONS INCLUDE A

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Schedule O (Form 990 or 990-EZ) (2012) Page 2 Name of the organization Employer identification number SOUTH SOUND YOUNG MEN'S CHRISTIAN ASSN. 91-0586473 REVIEW OF SKILLS LEARNED AND THE INTRODUCTION OF NEW ONES. PLAYERS HAVE OPPORTUNITIES TO TAKE VARIOUS POSITIONS ON THE TEAM, BECAUSE NO WINNING SCORE MATTERS MORE THAN GIVING THEM ALL THE CHANCE TO STRIVE AND TO STRETCH ONESELF. SOME BRANCH YMCA@ ALSO SPONSOR COMPETITIVE TEAMS, BACKED UP BY DEVELOPMENTAL INSTRUCTION. MOST ARE IN AQUATICS OR GYMNASTICS. YMCA YOUTH SPORTS PHILOSOPHY CARRIES OVER TO THESE, TOO. EVEN WHEN THE GOVERNING BODY FOR A SPORT REQUIRES THAT TIMES AND SCORES BE POSTED AT THE COMPETITION, YMCA COACHES ENCOURAGE PARTICIPANTS TO COMPARE THEIR MARKS WITH THEIR OWN PAST PERFORMANCE. BUILDS SELF-ESTEEM THOSE IN YMCA YOUTH SPORTS WHO LEARN A GAME WELL AND IMPROVE THEIR LEVELS OF SKILL GENERATE AUTHENTIC FEELINGS OF SELF-ESTEEM. COACHES, WHO ARE TRAINED AND ADVISED TO AVOID PUT-DOWNS AND HAVE NO TRYOUTS OF CUTS, GUIDE PARTICIPANTS. WHAT® KEY ABOUT THE VOLUNTEERS, OR COACHES, IS THAT THEY ARE THERE FOR THE YOUNGSTERS BECAUSE THEY WANT TO BE, AND THEY KNOW THE VALUE OF SPORTS IN A CHILD® DEVELOPMENT. MANY AREN® EVEN PARENTS OF THE KIDS WHO PLAY. THE YOUNGSTERS LEARN TO BUILD POSITIVE RELATIONSHIPS WITH ADULTS OUTSIDE THEIR HOMES AND SCHOOLS. STRENGTHENS FAMILIES THERE IS NOTHING UNUSUAL ABOUT MOMS, DADS, BROTHERS AND SISTERS TURNING OUT TO WATCH THE YOUNGSTERS PLAY OR TO HELP THE TEAM IN SOME WAY. THE SOUTH SOUND YMCA HOLDS EVENTS FOR PARENTS AND CHILDREN TO TAKE PART IN TOGETHER. THE MORE INVOLVED PARENTS ARE, THE MORE OPEN

THE PARENTS, IN EFFECT, JOIN THE

TEAM AS THEY LEARN THE VALUES OF THE YMCA APPROACH AND, IT IS HOPED,

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THE LINES OF COMMUNICATION BECOME.

Name of the organization Employer identification number 91-0586473 SOUTH SOUND YOUNG MEN'S CHRISTIAN ASSN. HELP THEIR CHILDREN TO ACT ON THOSE VALUES IN MANY ASPECTS OF THEIR LIVES. PROMOTES HEALTHY LIFESTYLES THE PLAY THAT DRAWS YOUNGSTERS TO YOUTH SPORTS PROGRAMS CAN BUILD LIFELONG POSITIVE ATTITUDES, HABITS OF HEALTHY EXERCISE AND GOOD NUTRITION, AND WAYS TO HAVE FUN AS ADULTS. THERE IS LITTLE OR NO COACHING ON MOST ADULT TEAMS, BUT THE SAME RULES APPLY - NO PUT-DOWNS, NO NAME-CALLING, NO PROFANITY, RESPECT FOR OTHERS AND GIVING EVERYONE A CHANCE TO PLAY. LESS OBVIOUS BUT JUST AS IMPORTANT IS AN AWARENESS OF THE OPPORTUNITIES THAT COME WITH BELONGING TO A COMMUNITY ORGANIZATION. YOUNGSTERS, PARENTS AND INDIVIDUAL ADULTS IN YMCA SPORTS OFTEN GET INVOLVED IN OTHER ACTIVITIES, PERHAPS JOINING ANOTHER YMCA PROGRAM. THEY CAN ALSO GET A CHANCE TO LEARN ABOUT HELPING OTHERS THROUGH YMCA SERVICE PROJECTS. BEING A WINNER IN LIFE IS PART OF ALL IT IS ABOUT. YMCA SPORTS SEEK TO BRING OUT THE BEST IN EVERY PARTICIPANT. IDEALS ARE HIGH FOR TEAMS AND LEAGUES. YMCA® VALUE THE APPROACH THAT SAYS EVERYBODY PLAYS, REGARDLESS OF ABILITY. THEY VALUE COOPERATION OVER COMPETITION, FAIR PLAY OVER WINNING AT ANY COST, GOOD FEELING AND GOOD HEALTH OVER A GOOD SCORE, CHARACTER DEVELOPMENT IN YOUNG PEOPLE OVER DEVELOPING THE NEXT SUPERSTAR. VALUE BUILDING SELF-ESTEEM OVER BEATING THE OPPONENT. THE YMCA KNOWS THAT WITH SUCH AN APPROACH, EVERYBODY WINS - UNDEFEATED IN SPIRIT, MIND AND BODY. THESE VALUES COMBINE TO KEEP COMPETITION IN PERSPECTIVE, GIVING EVERYONE THE FUN OF SPORTS WITHOUT FEELINGS OF REJECTION OR FAILURE. THIS IS ESPECIALLY IMPORTANT FOR ELEMENTARY AND MIDDLE SCHOOL KIDS.

Employer identification number Name of the organization SOUTH SOUND YOUNG MEN'S CHRISTIAN ASSN. 91-0586473 TEACHES COOPERATION AND TEAMWORK YOUNGSTERS IN TEAM SPORTS LEARN HOW TO WORK IN GROUPS ON AND OFF THEY SEE HOW A TASK CARRIED OUT AT A SINGLE THE PLAYING FIELDS. POSITION AFFECTS AN ENTIRE TEAM. THEY LEARN THE DISCIPLINE OF HARD WORK, THE NECESSITY TO TRUST OTHERS, AND THE ART OF BLENDING THEIR SKILLS WITH OTHERSOIN A COMMON PURSUIT. ALL OF THIS MAKES A BETTER TEAM. HELPING TEAMMATES IMPROVES THE LEVEL OF PLAY. SO DOES PAYING ATTENTION WITH EYES AND EARS. BEING PART OF THAT BETTER TEAM MEANS THAT RESPONSIBILITIES AND DECISION-MAKING SKILLS ALSO GROW. OF COURSE, IS FOR EACH AND EVERY TEAM TO IMPROVE. AT THE END OF THE SEASON, THERE MAY BE AWARDS FOR PARTICIPATION - BUT NOT FOR WIN, PLACE OR SHOW. ANOTHER ASPECT OF TEAMWORK IS GETTING ALONG WITH A MIX OF PEOPLE. OUR BRANCHES TYPICALLY BRING TOGETHER THOSE FROM A VARIETY OF ECONOMIC LEVELS, ETHNIC BACKGROUNDS, RELIGIONS AND NEIGHBORHOODS, AS WELL AS THOSE WITH DIFFERENT SKILL LEVELS. THEY ALL PLAY TOGETHER AND START TO UNDERSTAND AND APPRECIATE EACH OTHER. THE YOUNGSTERS WHO LEARN TO PLAY BY YMCA RULES CAN BECOME WINNERS THEY CAN GROW INTO HEALTHIER AND MORE SELF-ASSURED, LOVING IN LIFE. AND GIVING ADULTS AND PARENTS. MEETS THE PHYSICAL AND SOCIAL NEEDS OF KIDS DRIBBLING A BASKETBALL DOWN A COURT OR SPIKING A VOLLEYBALL OVER THE NET - THAT® HOW A LOT OF GIRLS AND BOYS DEFINE FUN AND GAMES. YMCA PEOPLE INVENTED BASKETBALL IN 1891 AND VOLLEYBALL IN 1895. CENTURY SINCE THEY FIRST WERE PLAYED IN YMCA GYMS, THESE TWO GAMES HAVE BECOME POPULAR THE WORLD OVER. THEY HAVE NEVER BELONGED JUST TO THE

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Page 2 Name of the organization Employer identification number SOUTH SOUND YOUNG MEN'S CHRISTIAN ASSN. 91-0586473 YMCA BUT TO EVERYONE. MOST OF THE NEW THINGS YMCAS DEVELOP THEY GIVE THE WORLD. NO CHARGE. YOUTH SPORTS ARE OFFERED BY MOST OF THE YMCAS. THE SPORTS VARY DEPENDING ON COMMUNITY SIZE AND NEED, AVAILABLE FIELDS AND FACILITIES AND, OF COURSE, POPULARITY. FLAG FOOTBALL, BASEBALL, SOFTBALL, SOCCER, T-BALL, FLOOR HOCKEY, TENNIS, FIELD HOCKEY, GYMNASTICS AND SWIMMING ARE COMMON, AS WELL AS BASKETBALL AND VOLLEYBALL. DEVELOPS SKILLS THE CLEAR EMPHASIS ON PERSONAL GROWTH DOESN® MEAN THAT THE YMCA ISNO SERIOUS ABOUT TEACHING THE SKILLS THAT LEAD TO GOOD PLAY ON ITS COURTS AND FIELDS. IT IS THROUGH PRACTICE, PERSISTENCE AND PATIENCE, IN FACT, THAT YOUNGSTERS IMPROVE SKILLS. YOUTH ACCOMPLISHMENTS THE SOUTH SOUND YMCA OFFERS BASKETBALL, VOLLEYBALL, SOCCER, T-BALL, FLAG FOOTBALL, MARTIAL ARTS, GYMNASTICS, TRACK, DANCE, AQUATIC PROGRAMS AND MORE. IN 2012, THE YMCA GAVE \$23,319 IN DIRECT FINANCIAL ASSISTANCE TO YOUTHS PARTICIPATING IN THESE ACTIVITIES. PART III HEALTH AND WELL BEING: GOOD HEALTH PREVENTION IS A KEY WORD FOR HEALTH AT THE YMCA. THE YMCA TAKES THE WELLNESS, OR HOLISTIC APPROACH. ITS HEALTH AND FITNESS PROGRAMS ARE ORGANIZED AROUND THE PRINCIPLE THAT THERE IS A ONENESS OF BODY, MIND AND SPIRIT. ALL OF WHAT THE YMCA DOES IS AIMED AT A LONG AND PRODUCTIVE LIFE AND HAVING FUN LIVING IT. THATS THE WAY THE YMCA APPROACHES EXERCISE. ITO NOT SOMETHING JUST FOR THE BODY. ITO A WAY OF LIFE THAT REQUIRES

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Schedule O (Form 990 or 990-EZ) (2012) Name of the organization Employer identification number 91-0586473 SOUTH SOUND YOUNG MEN'S CHRISTIAN ASSN. EDUCATION IN GOOD NUTRITION, PROPER EXERCISE, AVOIDANCE OF DRUG AND ALCOHOL ABUSE, DEALING WITH STRESS AND STRUCTURING LIFE TO LESSON PROBLEMS POSED BY CHRONIC AILMENTS SUCH AS ARTHRITIS, CANCER AND HEART DISEASE. TODAY, EMPHASIS ON PREVENTION STRETCHES FROM THE FIELDS OF MEDICINE TO INSURANCE. PEOPLE UNDERSTAND HOW IMPORTANT THEIR DAILY ACTIONS CAN BE FOR LONG-TERM HEALTH. THE YMCA IS A MAJOR PROVIDER OF AFFORDABLE HEALTH AND FITNESS PROGRAMS, WITH FINANCIAL AID AVAILABLE. IT ENCOURAGES SELF-IMPROVEMENT. ITS MEMBERSHIP IS CULTURALLY DIVERSE, MADE UP OF PEOPLE OF ALL AGES AND ABILITIES. YMCA STAFFS ARE WELL TRAINED AND CERTIFIED WHERE NEEDED. YMCA STANDARDS GENERALLY MEET OR EXCEED THOSE REQUIRED BY LOCAL AND STATE LICENSING BOARDS. SINCE THE 1880S THE YMCA HAS BEEN A LEADER IN THE FIELD. ITS OWN HEALTH AND FITNESS PROFESSIONALS NUMBER IN THE THOUSANDS. IT HAS ALSO BEEN A TRAINING GROUND FOR RECREATION AND PHYSICAL EDUCATION PROFESSIONALS OUTSIDE THE YMCA, FOR THE HEALTH CLUB INDUSTRY AND FOR CORPORATE WELLNESS PROGRAMS. IT WAS IN 1891 THAT A YMCA PHYSICAL PROGRAMS LEADER CREATED THE NOW FAMILIAR RED TRIANGLE. TO THIS DAY, IT SYMBOLIZES THE ASSOCIATION® COMMITMENT TO HELPING PEOPLE BUILD HEALTHY LIVES, ALONG WITH THE YMCA® OTHER COMMUNITY SERVICE PROGRAMS. BECAUSE HEALTHY EXERCISE HAS BEEN A YMCA STAPLE FOR SO LONG, THE YMCA ALREADY HAD HEALTH AND FITNESS CENTERS IN ALL 50 STATES IN THE 1970S, WHEN THE PURSUIT OF GOOD HEALTH TURNED INTO A NATIONAL PASSION. YMCAS ARE STILL LEADERS TODAY, WITH STATE OF THE ART EQUIPMENT AND

FOR OLDER ADULTS.

EXERCISE INNOVATIONS SUCH AS YOUTH FITNESS, CROSS TRAINING AND CLASSES

Schedule O (Form 990 or 990-EZ) (2012) Page 2 Name of the organization Employer identification number SOUTH SOUND YOUNG MEN'S CHRISTIAN ASSN. 91-0586473 ALL AGES, ALL ABILITIES, ALL INCOMES THE YMCA APPROACH IS THAT EXERCISE AND HEALTH EDUCATION ARE IMPORTANT AND SHOULD BE PROVIDED FOR PEOPLE OF ALL AGES AND ABILITIES. YMCAS LOOK FOR WAYS THAT ALL MEMBERS OF A FAMILY CAN PARTICIPATE IN PHYSICAL ACTIVITY, WHICH HELPS TAKE THE EDGE OFF TENSION AT HOME AND ENCOURAGES OPEN COMMUNICATION. YMCA FAMILY SWIM TIMES ARE DESIGNED TO GIVE PARENTS AND CHILDREN A CHANCE TO PLAY TOGETHER, RELAX AND HAVE FUN. OUR YMCA OFFERS SUBSIDIZED MEMBERSHIPS, SO NO ONE HAS TO BE TURNED AWAY FOR INABILITY TO PAY. FAMILY MEMBERSHIPS ARE LESS PER PERSON THAN INDIVIDUAL MEMBERS WOULD BE, WHICH IS FURTHER ENCOURAGEMENT TO BRING EVERYBODY. CHILDREN WHO GROW UP IN YMCA PROGRAMS GET A GOOD BASIC KNOWLEDGE ABOUT HEALTH ISSUES, BUT EVEN BETTER, THEY LEARN ALONG THE WAY JUST HOW GREAT IT IS TO FEEL GOOD. THEY DEVELOP LIFESTYLES THAT INCLUDED TIME FOR FITNESS AND FUN. EVERYONE® INVITED THE YMCA IS A COMMUNITY SERVICE FOR ALL - A WARM, RELAXED PLACE LED BY VOLUNTEERS AND RUN BY WELL TRAINED AND HELPFUL EMPLOYEES WHO MAINTAIN ITS WHOLESOME ATMOSPHERE. IT ENCOURAGES INDEPENDENCE AND SELF-RELIANCE. THIS COMBINED WITH ITS OPEN DOOR POLICY HAS LED OUR YMCAS TO BE CENTERS FOR PEOPLE UNDERGOING PHYSICAL THERAPY, THOSE WITH PERMANENT DISABILITIES, THOSE RECOVERING FROM DISEASE AND THOSE SEEKING IMPROVED FLEXIBILITY AND STRENGTH.

A JOYFUL AND PRODUCTIVE LIFE

YMCA HEALTH PROGRAMS, ALONG WITH EXERCISE AND EDUCATION, GENERALLY

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INCLUDE A BROADENING OF ONE® CIRCLE OF FRIENDS AT EVERY LEVEL OF DEVELOPMENT.

WE BELIEVE KIDS SHOULD BE KIDS. PROVIDING OPPORTUNITIES TO LEARN

VARIOUS SPORTS GIVES THEM NOT ONLY FIRST-RATE PHYSICAL EXERCISE BUT

ALSO THE CHANCE TO FEEL GOOD ABOUT MASTERING NEW SKILLS AND LEARNING TO

COOPERATE WITH OTHERS AS PART OF A TEAM.

WHEN YOUNGSTERS MOVE TO MIDDLE SCHOOLS, MANY ARE READY TO LEARN

MORE ABOUT TAKING CARE OF THEIR BODIES AND IMPROVING THEIR ATHLETIC

ABILITIES. THIS IS THE TIME WHEN WE WILL ADD DISCUSSIONS ABOUT HEALTH

ISSUES, FROM NUTRITION TO DRUG AWARENESS.

THERE IS MORE DIVERSITY FOR HIGH SCHOOL YOUTH. SOME ARE READY FOR

STRENGTH TRAINING WORK FOR SPECIFIC SPORTS. OTHER PARTICIPANTS ARE

ATTRACTED TO AEROBICS. THE YMCA CONTINUES TO EMPHASIZE VALUES THAT

PROMOTE A LIFELONG HEALTHY OUTLOOK. AND YMCA INSTRUCTORS, JUST BY

BEING WHO THEY ARE, ARE GREAT ROLE MODELS. THEY ARE TRAINED,

CERTIFIED, DEPENDABLE AND CARING.

INDEPENDENCE AND LONGEVITY

ADULTS NEED - AND RECEIVE - THE WIDEST RANGE OF EXERCISE

ALTERNATIVES. WORKING OUT WITH WEIGHTS OR KEEPING STEP IN AEROBIC

DANCE HELPS MANY STAY IN SHAPE. OTHERS WANT MORE - TO TRAIN FOR AN

EVENT, PERHAPS. AND SOME WANT LESS - JUST THE STRENGTH TO MOVE FROM

THE COUCH TO THE JOGGING PATH. WHATEVER THE GOAL, A YMCA STAFF MEMBER

WILL HELP THE INDIVIDUAL DRAW UP A REALISTIC PLAN TO ACHIEVE IT, OFFER

ENCOURAGEMENT ALONG THE WAY AND HELP MAP OUT A NEW DIRECTION WHEN THE

GOAL IS REACHED.

THERE IS NO AGE BARRIER TO FITNESS. SOME OLDER PEOPLE WHO HAVE

ALWAYS EXERCISED REGULARLY CONTINUE RIGHT ON WITH THE ACTIVITIES THEY

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ENJOY, JOINING CLASSES WITH PEOPLE DECADES YOUNGER. OTHERS MAY NEED A
SLOWER PACE OR A PROGRAM DESIGNED TO DEAL WITH A PARTICULAR PROBLEM,
LIKE ARTHRITIS. YMCAS RESPOND WITH SPECIAL CLASSES AND INDIVIDUAL
EXERCISE PLANS. THE EMPHASIS IS ON HELPING OLDER ADULTS MAINTAIN THE
BEST PHYSICAL CONDITION POSSIBLE, WHICH IN TURN HELPS THEM MAINTAIN
INDEPENDENCE.

NOR DO DISABILITIES FROM ACCIDENT OR DISEASE NECESSARILY LIMIT

EXERCISE OPPORTUNITIES AT THE YMCA. AN EXPERT WILL OFTEN WORK WITH

STAFF PEOPLE TO DESIGN A SPECIAL PROGRAM FOR A GROUP WITH A PARTICULAR

PROBLEM. OFTEN THE YMCA STAFF INTEGRATES PEOPLE WITH DISABILITIES INTO

REGULAR EXERCISE PROGRAMS, PROVIDING SPECIAL HELP WHEN NEEDED.

PART III

FAMILY: GOOD TIMES TOGETHER

OPEN TO ALL KINDS OF FAMILIES

THE YMCA IS PROUD TO BE A FAMILY ORGANIZATION. FAMILY AT THE YMCA
INCLUDES ALL THESE AND MORE: THE SINGLE DAD OR MOM BRINGING UP KIDS
ALONE; TWO PARENTS BOTH WORKING OUTSIDE THE HOME AND THEIR KIDS; THE
SINGLE PERSON OR COUPLE LIVING WITH AND CARING FOR A GRANDPARENT OR
OTHER RELATIVE; THE BREADWINNING DAD AND HOMEMAKING MOM (OR VICE VERSA)
AND KIDS; THE CHILDLESS COUPLE; AND MORE.

IT REFLECTS THE FACTS. MANY MOTHERS ARE IN THE WORKFORCE. MANY
CHILDREN ARE RAISED BY A SINGLE PARENT. MANY CHILDREN LIVE IN
STEPFAMILIES. AMERICANS, RESTLESS BY NATURE, GIVE LITTLE THOUGHT TO
MOVING THOUSANDS OF MILES AWAY FROM THEIR EXTENDED FAMILY OF
GRANDPARENTS, AUNTS AND UNCLES TO TAKE A NEW JOB OR MAKE A NEW LIFE.
FEWER AND FEWER FAMILIES HAVE A RELATIVE AT HOME TO WATCH THE KIDS

DURING THE DAY.

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SUBSTITUTE FOR A PARENT BUT INSTEAD WORKS IN WAYS THAT SUPPLEMENT WHAT Schedule O (Form 990 or 990-EZ) (2012)

CHILDCARE, EVERY EFFORT IS MADE TO ASSURE THAT THE YMCA IS NOT A

Schedule O (Form 990 or 990-EZ) (2012) Page 2 Name of the organization **Employer identification number** SOUTH SOUND YOUNG MEN'S CHRISTIAN ASSN. 91-0586473 THE FAMILY CAN DO. SPENDING GOOD TIME WITH THE KIDS YMCAS HAVE DECADES OF SUCCESSFUL PROGRAMS TO BUILD ON. IN 1910 THE IDEA OF FATHER AND SON BANQUETS AND CLOSE FELLOWSHIP WAS DEVELOPED IN PROVIDENCE, RI. IT WAS FOLLOWED IN THE 1920S BY THE Y-INDIAN GUIDES THE GENERAL IDEA WAS TO CREATE EVENTS IN WHICH BOTH TOOK IN ST. LOUIS. IT MEANT SETTING ASIDE TIME FOR THEM TO BE TOGETHER. PART. MEN AND BOYS, OF COURSE, HAD COME TO THE YMCA FOR EXERCISE AND FELLOWSHIP LONG BEFORE THEN. BUT THESE NEW VENTURES WERE THE FIRST TO INVOLVE FATHERS AND SONS IN ACTIVITIES PLANNED SPECIFICALLY TO STRENGTHEN THEIR RELATIONSHIPS. THE IDEA CONTINUED TO GROW. SOON AFTER WORLD WAR II, MOST YMCAS WELCOMED WOMEN AND GIRLS INTO MEMBERSHIP, AND MOTHER-DAUGHTER PROGRAMS WERE ADDED. NOW THERE ARE ALSO MOTHER-SON AND FATHER-DAUGHTER PROGRAMS. BRANCH YMCAS ADAPT THESE PROGRAMS, OR CREATE NEW ONES, TO REFLECT THE ADULT-CHILD COMBINATIONS PRESENT IN THEIR COMMUNITIES. YMCAS LEARNED THAT AN IMPORTANT WAY TO HELP CHILDREN AND YOUNG PEOPLE BUILD HEALTHY BODIES, MINDS AND SPIRITS WAS TO HELP THEIR ADULT CAREGIVERS AND ROLE MODELS DO THE SAME. FROM THE SIMPLEST SHARED PROJECTS, RESPECT, COMMUNICATIONS AND SELF-WORTH CAN GROW. NOW ALL THROUGH THE COUNTRY YMCA® ARE MEETING FAMILIES ØNEEDS BY OFFERING EXPERIENCES THAT DRAW ADULTS AND CHILDREN CLOSER TOGETHER IN A SAFE, CARING AND WARM ENVIRONMENT. A SECOND LOOK AT THOSE YMCA PROGRAM

AFFORDABLE RECREATION

SCHEDULES SHOWS THAT WHETHER LABELED @AMILYOOR NOT, MANY ACTIVITIES

DO INCLUDE FAMILIES AND CHILDREN IN SOME WAY.

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WE ARE CONSTANTLY FORMING GROUPS, BOARDS, CLUBS, MODEL

GOVERNMENTS, COMMITTEES AND TEAMS WHERE THOSE OF ALMOST ALL AGES CAN

LEARN THE GIVE AND TAKE NEEDED IN WORKING TOWARD A COMMON PURPOSE.

THIS IS BASIC TO FAMILY LIFE AND TO CITIZENSHIP. IT PRODUCES PEOPLE

WHO CAN ROUSE THE CONSCIENCE OF A COMMUNITY, CONDUCT FAMILY AFFAIRS IN

A WAY THAT EVERYONE WINS, OR PERFORM WELL ON THE JOB. WHEN ALL ARE

HEARD AND THEIR VIEWS RESPECTED, SELF-CONFIDENCE FLOWERS FOR BOTH THE

LEADERS AND THE FOLLOWERS.

THE YMCA® VOLUNTEER LEADERS BRING IT BACK TO ITS ROOTS AS A PLACE
WHERE PEOPLE ASSOCIATE FREELY FOR THE COMMON GOOD. IN THIS RESPECT THE
YMCA BECOMES A SCHOOL FOR DEMOCRACY.

LEARNING TO GIVE AND TAKE

THERE ARE NEGATIVE MODELS OF LEADERSHIP THAT THE YMCA REJECTS,

SUCH AS THE HOSTILE LEADER WHO CONFRONTS AND PUNISHES. THE YMCA MODEL

IS POSITIVE, BASED ON A BELIEF THAT WE ALL ARE WORTHWHILE INDIVIDUALS.

THE YMCA BELIEVES THAT MORE AND BETTER WORK IS PRODUCED BY THOSE WHO

ARE LED POSITIVELY AND PRAISED FOR WHAT THEY HAVE DONE WELL, RATHER

THAN SCOLDED FOR WHAT THEY MISSED.

LEADERSHIP MEANS LEARNING HOW TO GET THINGS DONE ON GROUPS, HOW TO
DRAW UP RULES, HOW TO FOLLOW A LEADER AND WHAT TO DO WHEN CALLED UPON
TO LEAD. THAT MEANS LEARNING THE ART OF COMPROMISE, SPEAKING IN
PUBLIC, ACCEPTING DIFFERENT VIEWS AND SEEKING OUT THINGS THAT UNITE
PEOPLE RATHER THAN FOCUSING ON WHAT DIVIDES THEM. THESE TALENTS GIVE
RISE TO DECISIONS THAT DRAW SUPPORT AND STRATEGY THAT WORKS.

FOLLOWING THE RIGHT PATH

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OUT, BRINGING OTHERS INTO AN ORGANIZATION WHERE ALL FEEL COMFORTABLE.

THE YMCA BECOMES A COMMUNITY IN ITSELF, ONE WHICH HELPS BUILD CULTURAL

AWARENESS AND MEANINGFUL, RESPECTFUL INTERACTION AMONG PEOPLE IN LOCAL

NEIGHBORHOODS.

LOOK FOR THE MERCHANT, THE TEACHER, THE COMPUTER PROGRAMMER, THE

SALESMAN, THE TRUCK DRIVER AND THE MAYOR ON THE EXERCISE MATS AT A 7

A.M. WORKOUT. THEIR COOL-DOWN OFTEN INCLUDES SOME TALK ON HOT TOPICS

IN TOWN. LOOK FOR THOSE SAME PEOPLE AT A YMCA BOARD MEETING, MAKING

PLANS AND DECISIONS TOGETHER WITH A COMMON PURPOSE: STRENGTHENING THE

COMMUNITY AND IMPROVING LIVES.

COORDINATED SERVICE

THE YMCA IS A LEADER IN MEETING HEALTH AND SOCIAL SERVICE NEEDS.

BUT YMCAS DON® DO IT ALONE. COLLABORATION IS AT THE HEART OF THEIR

COMMUNITY DEVELOPMENT NETWORK. THE YMCA ACTS AS AN AGENT FOR CHANGE,

EITHER CALLED IN TO HELP OR ORIGINATING AN IDEA AND BUILDING SUPPORT

FROM OTHER GROUPS - GOVERNMENTAL AND PRIVATE, EDUCATIONAL AND SOCIAL

SERVICE. THE MUTUAL DRIVE TO GET THINGS DONE IS MORE IMPORTANT THAN

BATTLES OVER TURF OR DOLLARS.

COMMUNITY SELF-RELIANCE

YMCAS BEGAN IN ENGLAND IN 1844, AND SEVEN YEARS LATER IN BOSTON,

AS ASSOCIATES OF WHAT MIGHT BE CALLED TODAY BORN-AGAIN PROTESTANT YOUNG

MEN WHO WERE ANXIOUS TO SAVE THE SOULS OF OTHER YOUNG MEN. THEY WERE

WORRIED ABOUT THE TEMPTATIONS FACING THOSE NEWLY ARRIVED FROM FARMS TO

WORK IN THE URBAN FACTORIES. BOSTON® ORIGINAL YMCA CONSTITUTION

DEDICATED THE ORGANIZATION TO WORK TO IMPROVE ®HE SPIRITUAL AND MENTAL

CONDITION OF YOUNG MEN. Ø AS THE YEARS PASSED, THE ORGANIZATION ADDED A