

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

Return of Organization Exempt From Income Tax

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

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

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

OMB No 1545-0047
2018
Open to Public Inspection

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

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

C Name of organization
YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER CHARLOTTE

Doing business as
YMCA of Greater Charlotte

Number and street (or P O box if mail is not delivered to street address) Room/suite
400 E Morehead Street

City or town, state or province, country, and ZIP or foreign postal code
Charlotte, NC 282022606

D Employer identification number
56-1045299

E Telephone number
(704) 716-6200

G Gross receipts \$ 92,378,915

F Name and address of principal officer
TODD L TIBBITS
400 E Morehead Street
Charlotte, NC 282022606

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

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

H(c) Group exemption number ▶

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

J Website: ▶ WWW.YMCACHARLOTTE.ORG

K Form of organization Corporation Trust Association Other ▶

L Year of formation 1874

M State of legal domicile NC

Part I Summary

1 Briefly describe the organization's mission or most significant activities
PUT CHRISTIAN PRINCIPLES INTO PRACTICE THROUGH PROGRAMS THAT BUILD HEALTHY SPIRIT, MIND AND BODY FOR ALL

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

3 Number of voting members of the governing body (Part VI, line 1a)	24
4 Number of independent voting members of the governing body (Part VI, line 1b)	24
5 Total number of individuals employed in calendar year 2018 (Part V, line 2a)	6,043
6 Total number of volunteers (estimate if necessary)	5,000
7a Total unrelated business revenue from Part VIII, column (C), line 12	0
7b Net unrelated business taxable income from Form 990-T, line 34	56,922

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	13,930,325	14,256,853
9 Program service revenue (Part VIII, line 2g)	74,550,842	76,464,254
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	208,437	405,563
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	4,156,049	491,391
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	92,845,653	91,618,061
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	15,000	13,000
14 Benefits paid to or for members (Part IX, column (A), line 4)		0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	47,583,658	49,989,296
16a Professional fundraising fees (Part IX, column (A), line 11e)		0
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 2,277,016		
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	39,763,363	41,063,235
18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	87,362,021	91,065,531
19 Revenue less expenses Subtract line 18 from line 12	5,483,632	552,530
	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	189,379,108	195,760,338
21 Total liabilities (Part X, line 26)	53,673,840	59,502,540
22 Net assets or fund balances Subtract line 21 from line 20	135,705,268	136,257,798

Part II Signature Block

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

Sign Here

Signature of officer: _____ Date: 2019-06-12

MICHAEL J MANNING CFO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
Firm's name ▶			Firm's EIN ▶	
Firm's address ▶			Phone no	

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission

THE YMCA OF GREATER CHARLOTTE IS DEDICATED TO PUTTING CHRISTIAN PRINCIPLES INTO PRACTICE THROUGH PROGRAMS THAT BUILD HEALTHY SPIRIT, MIND AND BODY FOR ALL. INSPIRED BY CHRISTIAN PRINCIPLES, WE WILL GROW OUR REACH, RESOURCES AND IMPACT TO SERVE ALL. THE YMCA'S FOCUS IS ON HEALTHY LIVING, YOUTH DEVELOPMENT AND SOCIAL RESPONSIBILITY. IN 2018, THE YMCA OF GREATER CHARLOTTE SERVED APPROXIMATELY 298,000 PEOPLE. THERE ARE 19 OPERATING BRANCHES, ADDITIONAL EXTENSION CENTERS AND 2 RESIDENT CAMPS COVERING A 900 SQUARE MILE FOOTPRINT.

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

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

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

If "Yes," describe these changes on Schedule O

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

4a (Code) (Expenses \$ including grants of \$) (Revenue \$)
See Additional Data

4b (Code) (Expenses \$ including grants of \$) (Revenue \$)
See Additional Data

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)
See Additional Data

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

4e Total program service expenses ▶ 0

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 23 through 38 regarding compensation, bond issues, escrow accounts, 501(c)(3) organizations, and other IRS filings.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1a, 1b, and 1c regarding Form 1096, Forms W-2G, and backup withholding rules.

<p>2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return</p>	2a	6,043			
<p>b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)</p>			2b	Yes	
<p>3a Did the organization have unrelated business gross income of \$1,000 or more during the year?</p>			3a	Yes	
<p>b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O</p>			3b	Yes	
<p>4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?</p>			4a		No
<p>b If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)</p>					
<p>5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?</p>			5a		No
<p>b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?</p>			5b		No
<p>c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?</p>			5c		
<p>6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?</p>			6a		No
<p>b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?</p>			6b		
7 Organizations that may receive deductible contributions under section 170(c).					
<p>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?</p>			7a	Yes	
<p>b If "Yes," did the organization notify the donor of the value of the goods or services provided?</p>			7b	Yes	
<p>c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?</p>			7c	Yes	
<p>d If "Yes," indicate the number of Forms 8282 filed during the year</p>	7d	2			
<p>e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?</p>			7e		No
<p>f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?</p>			7f		No
<p>g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?</p>			7g		
<p>h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?</p>			7h	Yes	
8 Sponsoring organizations maintaining donor advised funds.					
<p>Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?</p>			8		
<p>9a Did the sponsoring organization make any taxable distributions under section 4966?</p>			9a		
<p>b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?</p>			9b		
10 Section 501(c)(7) organizations. Enter					
<p>a Initiation fees and capital contributions included on Part VIII, line 12</p>	10a				
<p>b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities</p>	10b				
11 Section 501(c)(12) organizations. Enter					
<p>a Gross income from members or shareholders</p>	11a				
<p>b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)</p>	11b				
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?					
<p>b If "Yes," enter the amount of tax-exempt interest received or accrued during the year</p>	12b				
13 Section 501(c)(29) qualified nonprofit health insurance issuers.					
<p>a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O</p>			13a		
<p>b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans</p>	13b				
<p>c Enter the amount of reserves on hand</p>	13c				
<p>14a Did the organization receive any payments for indoor tanning services during the tax year?</p>			14a		No
<p>b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O</p>			14b		
<p>15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N</p>			15		No
<p>16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O</p>			16		No

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



Section A. Governing Body and Management

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

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

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

Section C. Disclosure

Table with 2 columns: Question, Answer. Rows include: 17 List the States with which a copy of this Form 990 is required to be filed; 18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply; 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year; 20 State the name, address, and telephone number of the person who possesses the organization's books and records.

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a 407,529			
	b Membership dues	1b 0			
	c Fundraising events	1c 1,711,795			
	d Related organizations	1d 0			
	e Government grants (contributions)	1e 1,986,568			
	f All other contributions, gifts, grants, and similar amounts not included above	1f 10,150,961			
	g Noncash contributions included in lines 1a - 1f \$ <u>677,185</u>				
	h Total. Add lines 1a-1f		14,256,853		
Program Service Revenue	2a Healthy Living	Business Code	53,381,874	53,381,874	
	b Youth Development		22,854,648	22,854,648	
	c Social Responsibility		227,732	227,732	
	d _____				
	e _____				
	f All other program service revenue		0	0	0
	g Total. Add lines 2a-2f		76,464,254		
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		373,413		373,413
	4 Income from investment of tax-exempt bond proceeds				
	5 Royalties				
	6a Gross rents	(i) Real (ii) Personal			
	b Less rental expenses				
	c Rental income or (loss)	0 0			
	d Net rental income or (loss)				
	7a Gross amount from sales of assets other than inventory	(i) Securities (ii) Other		32,150	
	b Less cost or other basis and sales expenses				
	c Gain or (loss)	0 32,150			
	d Net gain or (loss)		32,150		32,150
	8a Gross income from fundraising events (not including \$ <u>1,711,795</u> of contributions reported on line 1c) See Part IV, line 18	a 217,598			
	b Less direct expenses	b 635,891			
	c Net income or (loss) from fundraising events		-418,293		-418,293
	9a Gross income from gaming activities See Part IV, line 19	a			
b Less direct expenses	b				
c Net income or (loss) from gaming activities					
10a Gross sales of inventory, less returns and allowances	a 280,041				
b Less cost of goods sold	b 124,963				
c Net income or (loss) from sales of inventory		155,078		155,078	
Miscellaneous Revenue	Business Code				
11a NET SA/SIA/TRUST/ENDOW	813410	-612,249		-612,249	
b FACILITY RENTAL	813410	581,066		581,066	
c MISCELLANEOUS	813410	785,789		785,789	
d All other revenue		0	0	0	
e Total. Add lines 11a-11d		754,606			
12 Total revenue. See Instructions		91,618,061	76,464,254	0	896,954

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 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 domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16	13,000	13,000		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	2,800,199	425,439	1,895,492	479,268
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	38,208,200	34,924,559	2,186,181	1,097,460
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	2,413,394	2,110,050	203,229	100,115
9 Other employee benefits	3,506,282	3,137,984	221,047	147,251
10 Payroll taxes	3,061,221	2,699,684	264,298	97,239
11 Fees for services (non-employees)				
a Management				
b Legal	72,831		72,831	
c Accounting	61,200		61,200	
d Lobbying	10,982		10,982	
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	4,687,490	4,150,734	494,234	42,522
12 Advertising and promotion	960,355	944,519	4,032	11,804
13 Office expenses	4,944,156	4,805,809	73,547	64,800
14 Information technology	735,594	676,450	50,011	9,133
15 Royalties				
16 Occupancy	12,197,910	12,045,846	151,907	157
17 Travel	1,289,185	1,157,690	104,940	26,555
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	831,151	720,602	71,287	39,262
20 Interest	1,673,605	1,673,605		
21 Payments to affiliates	533,974	533,974	0	0
22 Depreciation, depletion, and amortization	7,516,462	7,376,035	135,427	5,000
23 Insurance	1,385,811	1,368,535	17,258	18
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.)				
a REPAIRS, MAINT & EQUIPMENT	3,510,735	3,165,615	336,315	8,805
b				
c				
d				
e All other expenses	651,794	302,919	201,248	147,627
25 Total functional expenses. Add lines 1 through 24e	91,065,531	82,233,049	6,555,466	2,277,016
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	14,383,700	1	7,974,839
	2 Savings and temporary cash investments	6,084,423	2	9,273,327
	3 Pledges and grants receivable, net	7,849,157	3	7,162,614
	4 Accounts receivable, net	1,056,097	4	1,161,526
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L	0	5	0
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L	0	6	0
	7 Notes and loans receivable, net	0	7	0
	8 Inventories for sale or use	0	8	0
	9 Prepaid expenses and deferred charges	1,601,024	9	1,658,957
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 257,802,210		
	b Less accumulated depreciation	10b 106,492,470	139,374,049	10c 151,309,740
	11 Investments—publicly traded securities		11	2,877
	12 Investments—other securities See Part IV, line 11	19,030,658	12	17,216,458
	13 Investments—program-related See Part IV, line 11	0	13	
	14 Intangible assets	0	14	0
	15 Other assets See Part IV, line 11	0	15	0
16 Total assets. Add lines 1 through 15 (must equal line 34)	189,379,108	16	195,760,338	
Liabilities	17 Accounts payable and accrued expenses	3,656,714	17	5,078,647
	18 Grants payable	0	18	0
	19 Deferred revenue	2,690,990	19	2,667,102
	20 Tax-exempt bond liabilities	41,988,332	20	46,904,535
	21 Escrow or custodial account liability Complete Part IV of Schedule D	0	21	0
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L	0	22	0
	23 Secured mortgages and notes payable to unrelated third parties	0	23	0
	24 Unsecured notes and loans payable to unrelated third parties	0	24	0
	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	5,337,804	25	4,852,256
	26 Total liabilities. Add lines 17 through 25	53,673,840	26	59,502,540
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	96,786,970	27	104,507,540
	28 Temporarily restricted net assets	21,480,701	28	14,763,309
	29 Permanently restricted net assets	17,437,597	29	16,986,949
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	135,705,268	33	136,257,798	
34 Total liabilities and net assets/fund balances	189,379,108	34	195,760,338	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	91,618,061
2	Total expenses (must equal Part IX, column (A), line 25)	2	91,065,531
3	Revenue less expenses Subtract line 2 from line 1	3	552,530
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	135,705,268
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	136,257,798

Part XII Financial Statements and Reporting

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

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

	Yes	No
2a		No
2b	Yes	
2c	Yes	
3a		No
3b		

Additional Data

Software ID: 18007697

Software Version: 2018v3.1

EIN: 56-1045299

Name: YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER CHARLOTTE

Form 990 (2018)

Form 990, Part III, Line 4a:

HEALTHY LIVING IN 2018, THE YMCA OF GREATER CHARLOTTE OPERATED 19 BRANCHES AND 2 RESIDENT CAMPS THROUGHOUT THE CHARLOTTE METROPOLITAN AREA AND ENRICHED THE LIVES OF APPROXIMATELY 298,000 PEOPLE IN THE COMMUNITY A HEALTH FOCUS AREA OF THE Y IS DROWNING PREVENTION MORE THAN 14,000 ADULTS AND CHILDREN RECEIVED SWIM LESSONS OR WATER SAFETY INSTRUCTION IN GROUP OR PRIVATE SESSIONS IN 2018 OUR YMCA OPERATES 15 INDOOR AND 11 OUTDOOR SWIMMING POOLS PLUS 5 SPLASH PARKS AND 10 WATERSLIDES TWO CAMPS AND ONE BRANCH HAVE LAKE WATERFRONTS FOR SWIMMING, CANOEING AND BOATING RECREATION ALL ARE MONITORED BY LIFEGUARDS, WHO MUST COMPLETE A 40-HOUR COURSE FOR CERTIFICATION EACH POOL CONDUCTS EIGHT FULL DRILLS A YEAR THROUGH AN ADDITIONAL EFFORT TO SAVE LIVES, THE Y OPERATES ITS SAFETY AROUND WATER PROGRAM IN 2018, CERTIFIED SWIM INSTRUCTORS TAUGHT 853 CHILDREN LIVING IN 30 APARTMENT COMPLEXES BASIC WATER SAFETY SKILLS SUCH AS CLIMBING OUT OF THE POOL INDEPENDENTLY, SWIMMING ON THEIR STOMACHS FOR AT LEAST 6 5 FEET, JUMPING IN DEEP WATER AND THEN RETURNING TO A WALL, FLOATING ON THEIR BACKS, ROLLING IN WATER AND HOW TO HELP OTHER PEOPLE IN 2018 THE YMCA SERVED OVER 600 INDIVIDUALS THROUGH EVIDENCE BASED COMMUNITY HEALTH PROGRAMS INCLUDING LiveSTRONG AT THE YMCA, YMCA DIABETES PREVENTION PROGRAM, ENHANCE FITNESS, YMCA PARKINSON'S AND THE YMCA WEIGHT LOSS PROGRAM LiveSTRONG AT THE YMCA, A PROGRAM THAT FOCUSES ON STRENGTH, ENDURANCE AND FLEXIBILITY FOR CANCER SURVIVORS, WAS OFFERED AT 12 LOCATIONS AND SERVED 325 PARTICIPANTS THE YMCA DIABETES PREVENTION PROGRAM SERVED 23 PARTICIPANTS, FOCUSING ON BEHAVIOR CHANGE TO REDUCE WEIGHT AND REDUCE THE RISK OF BECOMING A TYPE II DIABETIC ENHANCE FITNESS IS A PROVEN COMMUNITY-BASED SENIOR FITNESS AND ARTHRITIS MANAGEMENT PROGRAM THAT HELPS OLDER ADULTS BECOME MORE ACTIVE, ENERGIZED AND EMPOWERED FOR INDEPENDENT LIVING WITH A SUCCESSFUL PILOT IN THE FALL OF 2018 AT TWO LOCATIONS SERVING 57 PARTICIPANTS, THE PROGRAM WILL SCALE TO MORE LOCATIONS IN 2019 THE YMCA PARKINSON'S EXERCISE PROGRAM FOCUSES ON IMPROVING OVERALL MOVEMENT, BALANCE, COORDINATION AND STRENGTH FOR THOSE DIAGNOSED AS STAGE 1-3 A PRIMARY GOAL IS TO BUILD CONFIDENCE AND HELP SLOW THE PROGRESSION OF THE DISEASE THIS PROGRAM IS OFFERED AT THREE LOCATIONS SERVING AN AVERAGE OF 40 PARTICIPANTS MONTHLY AFTERSCHOOL PROGRAMS, PRESCHOOL, SUMMER DAY CAMPS AND RESIDENT CAMPS PROVIDED ACTIVITIES TO CHILDREN THAT FOCUSED ON BUILDING CHARACTER, DEVELOPING FRIENDSHIPS, AND BEING OUTDOORS BRANCHES PROVIDED AFTERSCHOOL PROGRAMMING TO 3,286 SCHOOL-AGE CHILDREN PARTICIPANTS RECEIVED HOMEWORK ASSISTANCE AND READING SKILLS PRACTICE, EXERCISE AND PLAY TIME OUR PRESCHOOL PROGRAMS SERVED 1,936 CHILDREN AND INTEGRATE PURPOSEFUL AND INTENTIONALLY PLANNED ACTIVITIES THAT ARE DESIGNED TO BE FUN AND ENGAGING WHILE TEACHING VALUABLE SKILLS BRANCHES PROVIDED SUMMER DAY CAMP PROGRAMMING TO 11,020 CHILDREN 4 TO 17 YEARS OLD IN THE SAFE ENVIRONMENT, CHILDREN 1) LEARNED AND MASTERED SKILLS THAT NUTURED THEIR PASSIONS, TALENTS, AND POTENTIAL, 2) BONDED WITH NEW FRIENDS, AND 3) OBSERVED STAFF AS POSITIVE ROLE MODELS AT THE TWO RESIDENT CAMPS, 3,666 YOUTH EXPERIENCED OVERNIGHT PROGRAMMING BY INCORPORATING THE Y'S FIVE CORE VALUES OF HONESTY, CARING, RESPONSIBILITY, RESPECT AND FAITH INTO THESE YOUTH PROGRAM ACTIVITIES, THE Y INSPIRED YOUTH TO DEVELOP POSITIVE BEHAVIORS, IMPROVE THEIR HEALTH AND ACHIEVE ACADEMICALLY SUPPLEMENTING STAFF WERE APPROXIMATELY 5,000 VOLUNTEERS WHO SUPPORTED THESE AND OTHER PROGRAMS SWIM LESSONS, SWIM PROGRAMS, YOUTH SPORTS, RUNNING/WALKING/BIKING CLUBS, ACTIVE OLDER ADULTS, RESIDENT CAMP, DAY CAMP AND CHILD WATCH

Form 990, Part III, Line 4b:

FAMILY LIFE MECKLENBURG, IREDELL, LINCOLN AND UNION COUNTIES IN SOUTH CENTRAL NORTH CAROLINA ARE THE ASSOCIATION'S SERVICE AREA. STAFF, VOLUNTEERS AND AGENCY PARTNERS COLLABORATED AT 19 BRANCHES, TWO RESIDENT CAMPS AND SCHOOLS WITHIN THREE SCHOOL SYSTEMS TO 1) DEVELOP YOUTH CHARACTER AND ACADEMIC SUCCESS, 2) PREVENT DROWNING, 3) IMPROVE QUALITY OF LIFE FOR PEOPLE FACING HEALTH CHALLENGES AND 4) PROVIDE INCREASED ACCESS AND BELONGING FOR PEOPLE OF ALL AGES, ETHNICITIES, ABILITIES AND INCOME LEVELS. ACROSS ALL MEMBERSHIP AND PROGRAMMING ACTIVITIES, THE YMCA OF GREATER CHARLOTTE ENRICHED THE LIVES OF APPROXIMATELY 298,000 PEOPLE IN 2018. FINANCIAL ASSISTANCE IS AVAILABLE THROUGH MY Y PRICING WHICH IS A DISCOUNTED RATE STRUCTURE FOR MEMBERSHIP AND PROGRAM ACCESS BASED ON HOUSEHOLD INCOME. PARENT EDUCATORS AND A COMMUNITY NURSE SERVED 197 FAMILIES IN CHARLOTTE WITH CHILDREN UNDER THE AGE OF FIVE IN THE Y'S PARENTS AS TEACHERS PROGRAM. THIS EVIDENCE-BASED PROGRAM INFLUENCES PARENTS' AWARENESS OF THEMSELVES AS TEACHERS TO THEIR CHILDREN AND GUIDES PARENTS ON PRACTICAL MATTERS OF EARLY CHILDHOOD HEALTH. FAMILIES SERVED EXHIBITED AT LEAST ONE HIGH-NEED PROTECTIVE FACTOR SUCH AS LOW HOUSEHOLD INCOME, LOW PARENT EDUCATION LEVEL OR LACK OF INSURANCE. THE Y OFFERS THE Y READERS PROGRAM, WHICH SERVED 1,009 STUDENTS IN 2018. LED BY CERTIFIED TEACHERS AND SUPPORTED BY 223 COMMUNITY VOLUNTEERS, THE NATIONALLY RECOGNIZED LITERACY INTERVENTION PROGRAM IMPROVED THE READING SCORES OF KINDERGARTEN THROUGH THIRD GRADE STUDENTS, INCREASING THEIR CHANCE OF MEETING THIRD GRADE READING REQUIREMENTS AND GRADUATING FROM HIGH SCHOOL ON TIME WITH THEIR PEERS. THROUGH PARENTS AS TEACHERS, Y READERS AND BRANCH AFTERSCHOOL AT FOUR SITES, THE Y BEGAN TO TEACH PARENTS THE ABC'S OF ACTIVE READING METHOD THAT IS EVIDENCE-BASED FOR TEACHING READING COMPREHENSION SKILLS. IT IS THE READ ALOUD METHOD THAT CHARLOTTE MECKLENBURG LIBRARY AND READ CHARLOTTE ARE SCALING ACROSS MECKLENBURG COUNTY WITH THE AID OF SERVICE PROVIDOR AGENCIES SUCH AS THE Y. TEENS WERE SERVED IN Y ACHIEVERS, A COLLABORATION WITH THE Y, CHARLOTTE-MECKLENBURG SCHOOLS AND COMMUNITIES IN SCHOOLS CHARLOTTE-MECKLENBURG. THIS CAREER AND COLLEGE READINESS PROGRAM PREPARES 9TH - 12TH GRADERS TO ENVISION THEIR INDEPENDENCE AFTER HIGH SCHOOL. STAFF, VOLUNTEERS AND CERTIFIED TEACHERS TEACH WORKPLACE SKILLS, PROVIDE COLLEGE TOURS AND ARRANGE PAID INTERNSHIPS. DURING THE 2017-2018 SCHOOL YEAR, Y ACHIEVERS SERVED 390 STUDENTS. ALL SENIORS (4) GRADUATED AND ARE NOW ATTENDING COLLEGE, BESTING THE 90% GOAL. RESPONDING TO THE CHARLOTTE-MECKLENBURG OPPORTUNITY TASK FORCE REPORT (PUBLISHED IN APRIL 2017), THE Y CREATED A SUMMER PROGRAM CALLED LEVEL UP THAT SERVED 1,841 YOUTH AGES 13-17. ENLISTING APPROXIMATELY 250 VOLUNTEERS, THREE CMPD OFFICERS EACH IN-SESSION NIGHT, STAFF FROM NINE PARTNERING YOUTH-SERVING ORGANIZATIONS AND YMCA YOUTH DEVELOPMENT STAFF, SUMMER OF OPPORTUNITY PROGRAM PLANNERS ESTABLISHED TEEN-ONLY NIGHTS AT THREE YMCA BRANCHES FOR ADULTS TO INTERACT WITH AND GUIDE TEENS ON BUILDING TRUST AND INCREASING SELF-CONFIDENCE. ACTIVITIES INCLUDED NETWORKING, LEADERSHIP, ACADEMIC SKILLS, FINANCIAL LITERACY, AND CIVIC ENGAGEMENT ACTIVITIES AS WELL AS SPORTS AND FITNESS CLINICS. IN Y GUIDES, THE Y EMPHASIZED THE VITAL ROLE THAT A DAD PLAYS IN THE GROWTH AND DEVELOPMENT OF HIS CHILDREN. PROGRAM ACTIVITIES FOCUSED ON TEAMWORK, INDEPENDENCE, COOPERATION AND GOAL SETTING SO THAT CHILDREN EMERGED WITH A GREATER SENSE OF SELF-ESTEEM AND PERSONAL WORTH. THE PROGRAM SERVED 1,088 CHILDREN AND 844 FAMILIES IN 2018.

Form 990, Part III, Line 4c:

CAMPING/OUTDOOR RESIDENT CAMP FOLLOWS AMERICAN CAMPING ASSOCIATION ACCREDITATION GUIDELINES IT IS ONE OF THE, MOST FORMATIVE EXPERIENCES IN A YOUNG PERSON'S LIFE CAMPERS BUILD CHARACTER VALUES, DEVELOP SELF-RELIANCE, LEARN GOOD SPORTSMANSHIP AND CULTIVATE INTERPERSONAL SKILLS IN 2018, THE Y'S TWO RESIDENT CAMPS SERVED 3,666 CHILDREN IN 2018, THE ENVIRONMENTAL EDUCATION CENTER OPERATED AT CAMP THUNDERBIRD SERVED 13,262 SCHOOL-AGED CHILDREN WITH A FOCUS ON ECOLOGY AND THE ENVIRONMENT, THE EDUCATIONAL ACTIVITIES ENCOURAGED TEAM-BUILDING AND UNDERSTANDING OF SCIENCE, TECHNOLOGY, ENGINEERING AND MATH (STEM) CURRICULUM THE Y'S CONFERENCE AND RETREAT PROGRAMS SERVED 20,622 ADULTS IN 2018, OFFERING TEAM-BUILDING AND PROFESSIONAL DEVELOPMENT ACTIVITIES ON A YMCA CAMPGROUND

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
KENDALL ALLEY	10	X						0	0	0
MELISSA ANDERSON	10	X						0	0	0
JOHN BELK	10	X						0	0	0
HOWARD BISSELL III	10	X						0	0	0
MELISSA BODFORD	10	X						0	0	0
CHARLES BOWMAN	10	X						0	0	0
KENNETH BURTON	10	X						0	0	0
ARMANDO CHARDIET	10	X						0	0	0
DAVID DOOLEY	10	X						0	0	0
ROSALYN DURANT	10	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
SONJA GANTT GIBSON	10	X						0	0	0
KENSTON GRIFFIN	10	X						0	0	0
JAMES HARRIS	10	X						0	0	0
DAVID HEAD	10	X						0	0	0
CORY HOHNBAUM	10	X						0	0	0
GREGORY JOHNSON	10	X						0	0	0
GREG KILPATRICK	10	X						0	0	0
PETE LASH JR	10	X						0	0	0
REV DR NICOLE MARTIN	10	X						0	0	0
NANCY McNELIS	10	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
DIONNE NELSON	10	X						0	0	0
CHARLES O'DELL	10	X						0	0	0
THOMAS CRAWFORD POUNDS	10	X						0	0	0
CHRISTOPHER THOMAS	10	X						0	0	0
TODD TIBBITS CEO/PRESIDENT	40			X				393,676	0	49,494
DEAN JONES CHIEF DEVELOPMENT OFFICER	40			X				239,901	0	45,809
RHONDA ANDERSON CHIEF OPERATING OFFICER	40			X				236,435	0	35,761
MICHAEL DEVAUL CHIEF IMPACT OFFICER	40			X				196,131	0	41,048
SCOTT CHAGNON CHIEF INNOVATION OFFICER	40			X				189,360	0	41,344
STEVEN BOWERS EXEC VP - OPERATIONS	40			X				185,783	0	35,703

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
BROOKE REDDINGTON CHIEF HUMAN CAPITAL OFFICER	40			X				164,505	0	38,140
MICHAEL MANNING CFO	40			X				115,471	0	5,057
DAVID DOVE CFO (RETIRED IN 2018)	40			X				155,395	0	23,882
DONNA BIGHAM VP - ACCOUNTING & FINANCE	40				X			173,821	0	24,133
JAMES KEVIN DEAN SR OPERATIONAL VP	40				X			166,418	0	34,743
CHARLES BART LANDESS VP - MAJOR & PLANNED GIFTS	40				X			153,063	0	37,016
KEVIN DEVIIT VP - INFORMATION TECHNOLOGY	40					X		123,849	0	33,305
KELLY ROGERS EXECUTIVE DIRECTOR	40					X		108,120	0	21,963
CHARLA MULLER VP - MARKETING	40					X		125,521	0	23,631
SCOTT KRUEGER VP - FACILITY MANAGEMENT	40					X		145,680	0	32,303

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
DAVID PURCELL EXECUTIVE DIRECTOR	40 0					X		107,613	0	29,839

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
 Attach to Form 990 or Form 990-EZ.
 Go to www.irs.gov/Form990 for the latest information.

2018

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER CHARLOTTE

Employer identification number

56-1045299

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

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

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

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

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

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

Section A. Public Support

	Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant.")	12,503,802	13,875,876	13,405,488	14,104,933	14,474,451	68,364,550
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0
4	Total. Add lines 1 through 3	12,503,802	13,875,876	13,405,488	14,104,933	14,474,451	68,364,550
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						4,816,849
6	Public support. Subtract line 5 from line 4						63,547,701

Section B. Total Support

	Calendar year (or fiscal year beginning in) ▶	(a)2014	(b)2015	(c)2016	(d)2017	(e)2018	(f)Total
7	Amounts from line 4	12,503,802	13,875,876	13,405,488	14,104,933	14,474,451	68,364,550
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	226,734	235,472	220,148	211,898	373,413	1,267,665
9	Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	0	0	0
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	95,498	36,131	195,566	555,328	524,653	1,407,176
11	Total support. Add lines 7 through 10						71,039,391

12 Gross receipts from related activities, etc (see instructions) **12** 361,215,072

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) **14** 89.45%

15 Public support percentage for 2017 Schedule A, Part II, line 14 **15** 90.76%

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

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

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

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

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

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

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

Section A. Public Support

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

Section B. Total Support

Calendar year (or fiscal year beginning in) ►		(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	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 assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

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

Section D. Computation of Investment Income Percentage

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

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

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

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally-Integrated Supporting Organizations

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

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

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

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

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

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

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

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

Facts And Circumstances Test

990 Schedule A, Supplemental Information

Return Reference	Explanation
Schedule A, Part II, Line 10 Other Income	DESCRIPTION - OTHER INCOME, COLUMN A - 95498 0, COLUMN B - 36131 0, COLUMN C - 195566 0, C OLUMN D - 555328 0, COLUMN E - 524653 0, COLUMN F - 1407176 0,

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities
For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.
▶Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

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

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

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

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

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

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

Name of the organization YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER CHARLOTTE	Employer identification number 56-1045299
--	--

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

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

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

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

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

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

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

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

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

Limits on Lobbying Expenditures
(The term "expenditures" means amounts paid or incurred.)

(a) Filing organization's totals	(b) Affiliated group totals
----------------------------------	-----------------------------

- 1a** Total lobbying expenditures to influence public opinion (grass roots lobbying)
- b** Total lobbying expenditures to influence a legislative body (direct lobbying)
- c** Total lobbying expenditures (add lines 1a and 1b)
- d** Other exempt purpose expenditures
- e** Total exempt purpose expenditures (add lines 1c and 1d)
- f** Lobbying nontaxable amount Enter the amount from the following table in both columns

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over \$500,000	20% of the amount on line 1e
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000
Over \$17,000,000	\$1,000,000

- g** Grassroots nontaxable amount (enter 25% of line 1f)
- h** Subtract line 1g from line 1a If zero or less, enter -0-
- i** Subtract line 1f from line 1c If zero or less, enter -0-
- j** If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?

Yes No

4-Year Averaging Period Under section 501(h)

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

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

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

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

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a Volunteers?		No	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		No	
c Media advertisements?		No	
d Mailings to members, legislators, or the public?		No	
e Publications, or published or broadcast statements?		No	
f Grants to other organizations for lobbying purposes?	Yes		10,982
g Direct contact with legislators, their staffs, government officials, or a legislative body?		No	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
i Other activities?		No	
j Total Add lines 1c through 1i			10,982
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

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

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

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

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

Part IV Supplemental Information

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

Return Reference	Explanation
Schedule C, Part II-B, Line 1 DETAILED DESCRIPTION OF THE LOBBYING ACTIVITY	THE YMCA OF GREATER CHARLOTTE PAYS DUES TO BE A PART OF THE NORTH CAROLINA ALLIANCE OF YMCA'S AS PART OF IT'S MISSION, THE ALLIANCE WORKS WITH KEY DECISION MAKERS IN THEIR MUNICIPALITIES, COUNTIES AND AT THE STATE AND FEDERAL LEVELS TO ADVANCE THE MISSION OF THE YMCA A PORTION OF THE DUES ARE USED BY THE ALLIANCE FOR LOBBYING ACTIVITIES ON BEHALF OF ITS MEMBERS IN AREAS OF INTEREST TO THE MISSION OF THE YMCA
Schedule C, Part II-B, Line 1 DETAILED DESCRIPTION OF THE LOBBYING ACTIVITY	THE YMCA OF GREATER CHARLOTTE PAYS DUES TO BE A PART OF THE NORTH CAROLINA ALLIANCE OF YMCA'S AS PART OF IT'S MISSION, THE ALLIANCE WORKS WITH KEY DECISION MAKERS IN THEIR MUNICIPALITIES, COUNTIES AND AT THE STATE AND FEDERAL LEVELS TO ADVANCE THE MISSION OF THE YMCA A PORTION OF THE DUES ARE USED BY THE ALLIANCE FOR LOBBYING ACTIVITIES ON BEHALF OF ITS MEMBERS IN AREAS OF INTEREST TO THE MISSION OF THE YMCA

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047
2018
Open to Public Inspection

Name of the organization
YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER CHARLOTTE

Employer identification number
56-1045299

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

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

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

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

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

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

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

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

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

4 Number of states where property subject to conservation easement is located ▶ _____

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Part IV Escrow and Custodial Arrangements.

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

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	14,269,357	12,791,144	12,357,586	13,105,654	13,228,446
b Contributions	55,650	2,540	139,766	4,296	130,806
c Net investment earnings, gains, and losses	-861,572	1,928,241	724,943	-311,666	478,240
d Grants or scholarships					0
e Other expenditures for facilities and programs	439,802	395,930	370,151	355,898	634,362
f Administrative expenses	58,140	56,638	61,000	84,800	97,476
g End of year balance	12,965,493	14,269,357	12,791,144	12,357,586	13,105,654

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as
- a** Board designated or quasi-endowment ▶ 93 %
 - b** Permanent endowment ▶ 7 %
 - c** Temporarily restricted endowment ▶ 0 %
- The percentages on lines 2a, 2b, and 2c should equal 100%
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by
- | | Yes | No |
|--|-----|----|
| (i) unrelated organizations | Yes | |
| (ii) related organizations | | No |
| b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? | | |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		18,929,022		18,929,022
b Buildings		166,895,556	61,329,301	105,566,255
c Leasehold improvements		4,966,512	3,324,760	1,641,752
d Equipment		30,276,392	21,473,472	8,802,920
e Other		36,734,728	20,364,937	16,369,791
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) . . . ▶				151,309,740

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A) ENDOWMENTS	12,965,493	F
(B) BENEFICIAL INTEREST IN PERPETUAL TRUSTS	4,203,347	F
(C) BENEFICIAL INTEREST IN SPLIT INTEREST AGREEMENT	47,618	F
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	17,216,458	

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

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

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

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

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

(a) Description of liability	(b) Book value
(1) Federal income taxes	
INTEREST RATE SWAP AGREEMENTS	2,577,982
OTHER LIABILITIES	1,911,369
CAPITAL LEASE LIABILITY	362,905
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	4,852,256

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

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

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

1	Total revenue, gains, and other support per audited financial statements		1	92,378,914
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d	760,853	
e	Add lines 2a through 2d		2e	760,853
3	Subtract line 2e from line 1		3	91,618,061
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b	0	
c	Add lines 4a and 4b		4c	0
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)		5	91,618,061

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

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

1	Total expenses and losses per audited financial statements		1	91,826,384
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII)	2d	760,853	
e	Add lines 2a through 2d		2e	760,853
3	Subtract line 2e from line 1		3	91,065,531
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b	0	
c	Add lines 4a and 4b		4c	0
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)		5	91,065,531

Part XIII Supplemental Information

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

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID: 18007697

Software Version: 2018v3.1

EIN: 56-1045299

Name: YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER
CHARLOTTE

Supplemental Information

Return Reference	Explanation
Schedule D, Part XI, Line 2(d) AND PART XII, LINE 2D	SCHEDULE D SUPPLEMENTAL INFORMATION CERTAIN EXPENSES ARE DEDUCTED FROM REVENUE IN PART VI II, LINE 8B (\$635,890) AND LINE 10B (\$124,963) AS PER FORM 990 INSTRUCTIONS, BUT THESE EXPENSES ARE NOT NETTED AGAINST REVENUE FOR AUDITED FINANCIAL STATEMENT PURPOSES

Supplemental Information

Return Reference	Explanation
Schedule D, Part V, Line 4 Intended uses of endowment funds	THE YMCA OF GREATER CHARLOTTE'S ENDOWMENT FUNDS ARE USED TO HELP SATISFY THE ONGOING NEEDS OF ITS MISSION THIS MISSION IS TO PUT CHRISTIAN PRINCIPLES INTO PRACTICE THROUGH PROGRAM S THAT BUILD HEALTHY SPIRIT, MIND AND BODY FOR ALL THE YMCA OF GREATER CHARLOTTE'S PROGRA MS ARE DESCRIBED IN MORE DETAIL IN PART III

Supplemental Information

Return Reference	Explanation
Schedule D, Part X, Line 2 FIN 48 (ASC 740) footnote	THE YMCA AND ITS SUBSIDIARY, CAMP THUNDERBIRD, ARE NOT-FOR-PROFIT ORGANIZATIONS THAT ARE EXEMPT FROM INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. ADDITIONALLY, THEY ARE NOT PRIVATE FOUNDATIONS PURSUANT TO INTERNAL REVENUE CODE SECTION 509(A)(1). THE YMCA DOES NOT BELIEVE THAT THERE ARE ANY MATERIAL UNCERTAIN TAX POSITIONS AND ACCORDINGLY, IT WILL NOT RECOGNIZE ANY ASSET OR LIABILITY FOR UNRECOGNIZED TAX BENEFITS OR OBLIGATIONS.

Supplemental Information

Return Reference	Explanation
Schedule D, Part XI, Line 2(d) Other revenues in audited financial statements not in form 990	SPECIAL EVENTS DIRECT EXPENSES - 635890 COST OF GOODS SOLD - MERCHANDISE SALES - 124963 - - - - - -

Supplemental Information

Return Reference	Explanation
Schedule D, Part XII, Line 2(d) Other expenses in audited financial statements not in form 990	SPECIAL EVENTS DIRECT EXPENSES - 635890 COST OF GOODS SOLD - MERCHANDISE SALES - 124963

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

OMB No 1545-0047
2018
Open to Public Inspection

Name of the organization
YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER CHARLOTTE

Employer identification number
56-1045299

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

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

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

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	SUPPORT OF YMCA PRIMARY SCHOOL AND GENERAL BRANCH OPERATIONS	10,000	Check		N/A	N/A

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

3 Enter total number of other organizations or entities ▶ 0

Part IV Foreign Forms

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

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

Revenue		(a)Event #1	(b) Event #2	(c)Other events	(d)
		AUCTION (event type)	RACE (event type)	22 (total number)	Total events (add col (a) through col (c))
Revenue	1 Gross receipts	263,223	196,210	1,469,960	1,929,393
	2 Less Contributions	230,046	173,231	1,308,518	1,711,795
	3 Gross income (line 1 minus line 2)	33,177	22,979	161,442	217,598
Direct Expenses	4 Cash prizes	0	0	0	0
	5 Noncash prizes	0	0	0	0
	6 Rent/facility costs		0	117,244	117,244
	7 Food and beverages	33,177		53,635	86,812
	8 Entertainment	5,650		107,972	113,622
	9 Other direct expenses	23,968	80,393	213,852	318,213
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				635,891
	11 Net income summary Subtract line 10 from line 3, column (d) ▶				-418,293

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

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

9 Enter the state(s) in which the organization conducts gaming activities _____

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

b If "No," explain _____

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

b If "Yes," explain _____

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

a	The organization's facility	%
b	An outside facility	%

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

Name ▶
 Address ▶

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

- b** If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____
- c** If "Yes," enter name and address of the third party

Name ▶
 Address ▶

16 Gaming manager information

Name ▶
 Gaming manager compensation ▶ \$

Description of services provided ▶

Director/officer Employee Independent contractor

17 Mandatory distributions

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

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

Return Reference	Explanation
------------------	-------------

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization
YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER CHARLOTTE

Employer identification number
56-1045299

Part I Questions Regarding Compensation

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

Part III Supplemental Information

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

Return Reference	Explanation
Schedule J, Part I, Line 1a Housing allowance or residence for personal use	A RESIDENCE IS PROVIDED ON CAMP HARRISON'S PROPERTY FOR THE EXECUTIVE DIRECTOR WHO IS INCLUDED ON FORM 990, PART VII, SECTION A, LINE 1A. THE LODGING MEETS THE IRS TESTS AS SET FORTH IN PUBLICATION 15-B.
Schedule J, Part I, Line 1a Personal services	EXPLANATION: FINANCIAL PLANNING SERVICES AND TAX PREPARATION BENEFITS ARE PROVIDED TO THE PRESIDENT AND SENIOR VICE PRESIDENTS. THIS TAXABLE BENEFIT WAS AVAILABLE TO NINE EMPLOYEES OF THE YMCA OF GREATER CHARLOTTE IN 2018.
Schedule J, Part I, Line 5a Compensation contingent on revenues of the organization	A PORTION OF INCENTIVE COMPENSATION IS BASED ON TARGETED REVENUE GROWTH.
Schedule J, Part I, Line 6a Compensation contingent on net earnings of the organization	A PORTION OF INCENTIVE COMPENSATION IS BASED ON TARGETED NET POSITIVE VARIANCE.

Additional Data

Software ID: 18007697
Software Version: 2018v3.1
EIN: 56-1045299
Name: YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER CHARLOTTE

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 TODD TIBBITS	(i)	337,744	50,700	5,232	33,000	16,494	443,170	0
CEO/PRESIDENT	(ii)	0	0	0	0	0	0	0
1 DEAN JONES	(i)	221,571	15,935	2,395	28,482	17,327	285,710	0
CHIEF DEVELOPMENT OFFICER	(ii)	0	0	0	0	0	0	0
2 RHONDA ANDERSON	(i)	226,138	8,775	1,522	27,743	8,018	272,196	0
CHIEF OPERATING OFFICER	(ii)	0	0	0	0	0	0	0
3 MICHAEL DEVAUL	(i)	173,814	21,152	1,165	23,721	17,327	237,179	0
CHIEF IMPACT OFFICER	(ii)	0	0	0	0	0	0	0
4 SCOTT CHAGNON	(i)	175,158	12,660	1,542	24,017	17,327	230,704	0
CHIEF INNOVATION OFFICER	(ii)	0	0	0	0	0	0	0
5 STEVEN BOWERS	(i)	176,923	7,778	1,082	22,950	12,753	221,486	0
EXEC VP - OPERATIONS	(ii)	0	0	0	0	0	0	0
6 BROOKE REDDINGTON	(i)	164,215	0	290	21,035	17,105	202,645	0
CHIEF HUMAN CAPITAL OFFICER	(ii)	0	0	0	0	0	0	0
7 MICHAEL MANNING	(i)	115,471	0	0	0	5,057	120,528	0
CFO	(ii)	0	0	0	0	0	0	0
8 DAVID DOVE	(i)	135,623	18,479	1,293	17,012	6,870	179,277	0
CFO (RETIRED IN 2018)	(ii)	0	0	0	0	0	0	0
9 DONNA BIGHAM	(i)	172,629	0	1,192	20,921	3,212	197,954	0
VP - ACCOUNTING & FINANCE	(ii)	0	0	0	0	0	0	0
10 JAMES KEVIN DEAN	(i)	155,049	9,660	1,709	21,033	13,710	201,161	0
SR OPERATIONAL VP	(ii)	0	0	0	0	0	0	0
11 CHARLES BART LANDESS	(i)	151,979	0	1,084	19,722	17,294	190,079	0
VP - MAJOR & PLANNED GIFTS	(ii)	0	0	0	0	0	0	0
12 KEVIN DEVITT	(i)	122,760	0	1,089	16,156	17,149	157,154	0
VP - INFORMATION TECHNOLOGY	(ii)	0	0	0	0	0	0	0
13 SCOTT KRUEGER	(i)	144,799	0	881	18,640	13,663	177,983	0
VP - FACILITY MANAGEMENT	(ii)	0	0	0	0	0	0	0

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

Schedule K (Form 990)

Supplemental Information on Tax-Exempt Bonds

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

▶ Attach to Form 990.

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

OMB No 1545-0047

2018

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER CHARLOTTE

Employer identification number

56-1045299

Part I Bond Issues

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
						Yes	No	Yes	No	Yes	No
A PUBLIC FINANCE AUTHORITY	27-3866124	000000000	10-27-2016	50,000,000	SEE PART VI		X		X		X

Part II Proceeds

		A	B	C	D				
1	Amount of bonds retired	32,160,000							
2	Amount of bonds legally defeased	0							
3	Total proceeds of issue	50,000,000							
4	Gross proceeds in reserve funds	0							
5	Capitalized interest from proceeds	0							
6	Proceeds in refunding escrows	0							
7	Issuance costs from proceeds	89,375							
8	Credit enhancement from proceeds	0							
9	Working capital expenditures from proceeds	0							
10	Capital expenditures from proceeds	17,750,625							
11	Other spent proceeds	0							
12	Other unspent proceeds	0							
13	Year of substantial completion	2018							
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?	X							
15	Were the bonds issued as part of an advance refunding issue?		X						
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 proceeds?	X							

Part III Private Business Use

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

Part III Private Business Use (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts that may result in private business use of bond-financed property?		X						
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?		X						
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶	0 %							
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶	0 %							
6 Total of lines 4 and 5	0 %							
7 Does the bond issue meet the private security or payment test?		X						
8a Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X						
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of								
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
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 1.145-2?								

Part IV Arbitrage

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X						
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?	X							
b Exception to rebate?								
c No rebate due?								
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
3 Is the bond issue a variable rate issue?	X							
4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?	X							
b Name of provider	SEE PART VI							
c Term of hedge	1800 %							
d Was the hedge superintegrated?		X						
e Was the hedge terminated?		X						

Part IV Arbitrage (Continued)

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

Part V Procedures To Undertake Corrective Action

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

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

Return Reference	Explanation
Schedule K, Part I, Column (e)	THE BONDS CONSTITUTE A "DRAW DOWN LOAN" WITHIN THE MEANING OF TREASURY REGULATIONS 1 150-1(c)(4) \$50,000,000 REPRESENTS THE MAXIMUM PRINCIPAL AMOUNT OF BONDS THAT MAY BE ISSUED AS PART OF THE ISSUANCE, WHICH IS THE EXPECTED ISSUE PRICE OF THE BOND ISSUE AS OF THE DATE OF ISSUANCE OF THE BONDS, \$35,210,000 WAS DRAWN DOWN

Return Reference	Explanation
Schedule K, Part I, Column (f)	PROCEEDS OF THE BONDS WERE APPLIED TO (A) REFUND THE OUTSTANDING NORTH CAROLINA FACILITIES FINANCE AGENCY VARIABLE RATE RECREATIONAL FACILITIES REVENUE BONDS (THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER CHARLOTTE PROJECT), SERIES 2007A, AND NORTH CAROLINA CAPITAL FACILITIES FINANCE AGENCY VARIABLE RATE RECREATIONAL FACILITIES REVENUE BONDS (THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER CHARLOTTE PROJECT), SERIES 2007B, AND (B) FINANCE A NEW PARKING DECK, RENOVATIONS AND AN ADDITION TO THE YMCA'S DOWD BRANCH IN CHARLOTTE, NORTH CAROLINA, AND THE CONSTRUCTION AND EQUIPPING OF SARA'S YMCA BRANCH IN CHARLOTTE, NORTH CAROLINA

Return Reference	Explanation
Schedule K, Part II, Line 3	THE BONDS CONSTITUTE A "DRAW DOWN LOAN" WITHIN THE MEANING OF TREASURY REGULATIONS 1 150-1(c) (4) \$50,000,000 REPRESENTS THE MAXIMUM PRINCIPAL AMOUNT OF BONDS THAT MAY BE ISSUED AS PART OF THE ISSUANCE AS OF THE DATE OF ISSUANCE OF THE BONDS, \$35,210,000 WAS DRAWN DOWN THE ADDITIONAL \$14,790,000 OF THE PROCEEDS WAS USED FOR \$14,700,625 OF CAPITAL EXPENDITURES AND \$89,375 OF ISSUANCE COSTS AS OF DECEMBER 31, 2018 ALL AMOUNTS HAVE BEEN DRAWN

Return Reference	Explanation
Schedule K, Part II, Line 10	THE BONDS CONSTITUTE A "DRAW DOWN LOAN" WITHIN THE MEANING OF TREASURY REGULATIONS 1 150-1(c) (4) \$50,000,000 REPRESENTS THE MAXIMUM PRINCIPAL AMOUNT OF BONDS THAT MAY BE ISSUED AS PART OF THE ISSUANCE AS OF THE DATE OF ISSUANCE OF THE BONDS, \$35,210,000 WAS DRAWN DOWN THE ADDITIONAL \$14,790,000 OF THE PROCEEDS WAS USED FOR \$14,700,625 OF CAPITAL EXPENDITURES AND \$89,375 OF ISSUANCE COSTS AS OF DECEMBER 31, 2018 ALL AMOUNTS HAVE BEEN DRAWN

Return Reference	Explanation
Schedule K, Part IV, Line 4b	THE YMCA HAS ENTERED INTO 3 INTEGRATED INTEREST RATE SWAPS WITH RESPECT TO THE BONDS SEE BELOW COUNTERPARTY - BRANCH BANKING AND TRUST COMPANY, TERM - OCTOBER 27, 2016 THROUGH DECEMBER 1, 2034 COUNTERPARTY - BRANCH BANKING AND TRUST COMPANY , TERM - OCTOBER 27, 2016 THROUGH APRIL 1, 2029 COUNTERPARTY - BRANCH BANKING AND TRUST COMPANY, TERM - APRIL 1, 2017 THROUGH APRIL 1, 2029

Return Reference	Explanation
Schedule K, Part IV, Line 4c	THE YMCA HAS ENTERED INTO 3 INTEGRATED INTEREST RATE SWAPS WITH RESPECT TO THE BONDS SEE BELOW COUNTERPARTY - BRANCH BANKING AND TRUST COMPANY, TERM - OCTOBER 27, 2016 THROUGH DECEMBER 1, 2034 COUNTERPARTY - BRANCH BANKING AND TRUST COMPANY , TERM - OCTOBER 27, 2016 THROUGH APRIL 1, 2029 COUNTERPARTY - BRANCH BANKING AND TRUST COMPANY, TERM - APRIL 1, 2017 THROUGH APRIL 1, 2029

Additional Data**Software ID:** 18007697**Software Version:** 2018v3.1**EIN:** 56-1045299**Name:** YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER CHARLOTTE

Return Reference	Explanation
Schedule K, Part I, Column (e)	THE BONDS CONSTITUTE A "DRAW DOWN LOAN" WITHIN THE MEANING OF TREASURY REGULATIONS 1 150-1(c) (4) \$50,000,000 REPRESENTS THE MAXIMUM PRINCIPAL AMOUNT OF BONDS THAT MAY BE ISSUED AS PART OF THE ISSUANCE, WHICH IS THE EXPECTED ISSUE PRICE OF THE BOND ISSUE AS OF THE DATE OF ISSUANCE OF THE BONDS, \$35,210,000 WAS DRAWN DOWN
Schedule K, Part I, Column (f)	PROCEEDS OF THE BONDS WERE APPLIED TO (A) REFUND THE OUTSTANDING NORTH CAROLINA FACILITIES FINANCE AGENCY VARIABLE RATE RECREATIONAL FACILITIES REVENUE BONDS (THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER CHARLOTTE PROJECT), SERIES 2007A, AND NORTH CAROLINA CAPITAL FACILITIES FINANCE AGENCY VARIABLE RATE RECREATIONAL FACILITIES REVENUE BONDS (THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER CHARLOTTE PROJECT), SERIES 2007B, AND (B) FINANCE A NEW PARKING DECK, RENOVATIONS AND AN ADDITION TO THE YMCA'S DOWD BRANCH IN CHARLOTTE, NORTH CAROLINA, AND THE CONSTRUCTION AND EQUIPPING OF SARA'S YMCA BRANCH IN CHARLOTTE, NORTH CAROLINA
Schedule K, Part II, Line 3	THE BONDS CONSTITUTE A "DRAW DOWN LOAN" WITHIN THE MEANING OF TREASURY REGULATIONS 1 150-1(c) (4) \$50,000,000 REPRESENTS THE MAXIMUM PRINCIPAL AMOUNT OF BONDS THAT MAY BE ISSUED AS PART OF THE ISSUANCE AS OF THE DATE OF ISSUANCE OF THE BONDS, \$35,210,000 WAS DRAWN DOWN THE ADDITIONAL \$14,790,000 OF THE PROCEEDS WAS USED FOR \$14,700,625 OF CAPITAL EXPENDITURES AND \$89,375 OF ISSUANCE COSTS AS OF DECEMBER 31, 2018 ALL AMOUNTS HAVE BEEN DRAWN
Schedule K, Part II, Line 10	THE BONDS CONSTITUTE A "DRAW DOWN LOAN" WITHIN THE MEANING OF TREASURY REGULATIONS 1 150-1(c) (4) \$50,000,000 REPRESENTS THE MAXIMUM PRINCIPAL AMOUNT OF BONDS THAT MAY BE ISSUED AS PART OF THE ISSUANCE AS OF THE DATE OF ISSUANCE OF THE BONDS, \$35,210,000 WAS DRAWN DOWN THE ADDITIONAL \$14,790,000 OF THE PROCEEDS WAS USED FOR \$14,700,625 OF CAPITAL EXPENDITURES AND \$89,375 OF ISSUANCE COSTS AS OF DECEMBER 31, 2018 ALL AMOUNTS HAVE BEEN DRAWN
Schedule K, Part IV, Line 4b	THE YMCA HAS ENTERED INTO 3 INTEGRATED INTEREST RATE SWAPS WITH RESPECT TO THE BONDS SEE BELOW COUNTERPARTY - BRANCH BANKING AND TRUST COMPANY, TERM - OCTOBER 27, 2016 THROUGH DECEMBER 1, 2034 COUNTERPARTY - BRANCH BANKING AND TRUST COMPANY, TERM - OCTOBER 27, 2016 THROUGH APRIL 1, 2029 COUNTERPARTY - BRANCH BANKING AND TRUST COMPANY, TERM - APRIL 1, 2017 THROUGH APRIL 1, 2029
Schedule K, Part IV, Line 4c	THE YMCA HAS ENTERED INTO 3 INTEGRATED INTEREST RATE SWAPS WITH RESPECT TO THE BONDS SEE BELOW COUNTERPARTY - BRANCH BANKING AND TRUST COMPANY, TERM - OCTOBER 27, 2016 THROUGH DECEMBER 1, 2034 COUNTERPARTY - BRANCH BANKING AND TRUST COMPANY, TERM - OCTOBER 27, 2016 THROUGH APRIL 1, 2029 COUNTERPARTY - BRANCH BANKING AND TRUST COMPANY, TERM - APRIL 1, 2017 THROUGH APRIL 1, 2029

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No 1545-0047

2018

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER CHARLOTTE

Employer identification number
56-1045299

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes	X	2	17,500	Market value
8 Intellectual property				
9 Securities—Publicly traded	X	15	732,543	Market value
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other	X		540,353	Cost
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (MISC AUCTION/PROG ITEMS)	X	283	71,586	Market value
26 Other ▶ (BARGAIN RENT/LEASE)	X	3	47,746	Market value
27 Other ▶ (_____)				
28 Other ▶ (_____)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29** 2

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

Part II Supplemental Information.

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

Return Reference	Explanation
Schedule M, Part I, Line 32b Third parties used to solicit, process, or sell noncash contributions	A THIRD PARTY BROKER IS USED TO SELL PUBLICALLY TRADED SECURITIES
Schedule M, Part I Explanations of reporting method for number of contributions	Other - MISC AUCTION/PROG ITEMS NUMBER OF CONTRIBUTIONS Securities - Publicly traded - NUMBER OF CONTRIBUTIONS Other - BARGAIN RENT/LEASE NUMBER OF CONTRIBUTIONS Boats and planes - NUMBER OF CONTRIBUTIONS AND ITEMS RECEIVED Real estate - Other - BUILDING IMPROVEMENTS NUMBER OF CONTRIBUTIONS

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2018

Open to Public Inspection

Department of the Treasury

Name of the organization

YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER CHARLOTTE

Employer identification number

56-1045299

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 11b Review of form 990 by governing body	<p>EXPLANATION THE FOLLOWING REPRESENTS THE FORM 990 REVIEW PROCESS IN CHRONOLOGICAL ORDER</p> <p>1 REVIEW BY THE YMCA'S SENIOR MANAGEMENT STAFF THE FORM 990 IS SENT ELECTRONICALLY TO THE SENIOR MANAGEMENT STAFF AND THE OPPORTUNITY TO ASK QUESTIONS IS EXTENDED</p> <p>2 REVIEW BY THE ASSOCIATION AUDIT COMMITTEE THE FORM 990 IS SENT ELECTRONICALLY TO ALL MEMBERS PRIOR TO THE AUDIT COMMITTEE MEETING DURING THE MEETING, THE COMMITTEE REVIEWS THE FORM 990 AND DISCUSSES PROCEDURES FOR ITS COMPLETION COMMITTEE QUESTIONS ARE ADDRESSED</p> <p>3 A COPY OF THE FORM 990 IS PROVIDED TO EACH MEMBER OF THE ASSOCIATION BOARD OF DIRECTORS THE FORM 990 IS SENT TO ALL MEMBERS VIA E-MAIL AND QUESTIONS ARE INVITED BY TELEPHONE, E-MAIL OR IN PERSON</p> <p>4 THE FORM 990 IS FILED AFTER COMPLETION OF ALL LEVELS OF REVIEW</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 12c Conflict of interest policy	EXPLANATION THE YMCA OF GREATER CHARLOTTE HAS A WRITTEN CONFLICT OF INTEREST POLICY ALL BOARD MEMBERS ARE REQUIRED TO COMPLETE AND SIGN AN ANNUAL DISCLOSURE STATEMENT ADDITIONALLY, OFFICERS AND KEY MANAGEMENT EMPLOYEES OF THE YMCA ARE REQUIRED TO COMPLETE AND SIGN AN ANNUAL DISCLOSURE STATEMENT THIS POLICY REQUIRES IMMEDIATE DISCLOSURE OF INTERESTS THAT COULD GIVE RISE TO CONFLICTS

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 15a Process to establish compensation of top management official	EXPLANATION THE YMCA OF GREATER CHARLOTTE HAS A DETAILED AND RIGOROUS PROCESS FOR THE REVIEW AND DETERMINATION OF CEO/ PRESIDENT COMPENSATION THAT PROCESS INCLUDES AN EXECUTIVE COMPENSATION COMMITTEE COMPRISED OF INDEPENDENT VOLUNTEERS THESE VOLUNTEERS REVIEW INFORMATION INCLUDING INDEPENDENTLY GENERATED SURVEY INFORMATION FOR COMPARISON OF LIKE POSITIONS

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 15b Process to establish compensation of other employees	EXPLANATION THE YMCA OF GREATER CHARLOTTE HAS A DETAILED AND RIGOROUS PROCESS FOR THE REVIEW AND DETERMINATION OF CEO/PRESIDENT AND EXECUTIVE COMPENSATION THAT PROCESS INCLUDES AN EXECUTIVE COMPENSATION COMMITTEE COMPRISED OF INDEPENDENT VOLUNTEERS THESE VOLUNTEERS REVIEW INFORMATION INCLUDING INDEPENDENTLY GENERATED SURVEY INFORMATION FOR COMPARISON OF LIKE POSITIONS FOR 2018 THE COMPENSATION COMMITTEE REVIEWED SURVEY DATA PROVIDED BY SULLIVAN-COTTER, A COMPENSATION AND HUMAN RESOURCES MANAGEMENT FIRM, AND CASAGRANDE CONSULTING, AN INDEPENDENT EXECUTIVE COMPENSATION CONSULTING FIRM, TO ENSURE CONTINUED REASONABLENESS OF OVERALL COMPENSATION IN COMPARISON TO OTHER YMCA AND SIMILAR ORGANIZATIONS THE COMMITTEE MEETS WITHOUT YMCA STAFF TO REVIEW, DISCUSS AND DETERMINE COMPENSATION FOR THE CEO/PRESIDENT AND THE COMMITTEE REVIEWS AND APPROVES THE CEO/PRESIDENT'S RECOMMENDATIONS OF OTHER EXECUTIVES' COMPENSATION NOTES ARE TAKEN DURING THE MEETING AND MINUTES ARE PRODUCED FOR THE COMMITTEE MEMBERS AND RECORD KEEPING PURPOSES THIS PROCESS WAS LAST USED IN FEBRUARY 2019 FOR THE FOLLOWING POSITIONS CEO/PRESIDENT EXECUTIVE VICE PRESIDENT - CHIEF OPERATING OFFICER SENIOR VICE PRESIDENT - CHIEF FINANCIAL OFFICER SENIOR VICE PRESIDENT - CHIEF DEVELOPMENT OFFICER

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 19 Required documents available to the public	EXPLANATION THE YMCA OF GREATER CHARLOTTE'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE MADE AVAILABLE UPON REQUEST

990 Schedule O, Supplemental Information

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

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2018

**Open to Public
Inspection**

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.**
▶ **Attach to Form 990.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

Department of the Treasury
Internal Revenue Service

Name of the organization
YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER CHARLOTTE

Employer identification number
56-1045299

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1)CAMP THUNDERBIRD 400 E MOREHEAD ST CHARLOTTE, NC 28202 90-0329292	RESIDENT CAMP	NC	501(c)(3)	7	YMCA OF GREATER CHARLOTTE		No

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512(b) (13) controlled entity?	
								Yes	No

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	No
b Gift, grant, or capital contribution to related organization(s)	1b	No
c Gift, grant, or capital contribution from related organization(s)	1c	No
d Loans or loan guarantees to or for related organization(s)	1d	No
e Loans or loan guarantees by related organization(s)	1e	No
f Dividends from related organization(s)	1f	No
g Sale of assets to related organization(s)	1g	No
h Purchase of assets from related organization(s)	1h	No
i Exchange of assets with related organization(s)	1i	No
j Lease of facilities, equipment, or other assets to related organization(s)	1j	No
k Lease of facilities, equipment, or other assets from related organization(s)	1k	No
l Performance of services or membership or fundraising solicitations for related organization(s)	1l	No
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	No
o Sharing of paid employees with related organization(s)	1o	No
p Reimbursement paid to related organization(s) for expenses	1p	No
q Reimbursement paid by related organization(s) for expenses	1q	No
r Other transfer of cash or property to related organization(s)	1r	No
s Other transfer of cash or property from related organization(s)	1s	No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference	Explanation