** TAX RETURN FILING INSTRUCTIONS **

** FORM 990 PUBLIC DISCLOSURE COPY **

FOR THE YEAR ENDING  
DECEMBER 31, 2017

| Prepared for                                      | RALPH J. STOLLE COUNTRYSIDE YOUNG MEN'S  
|                                                  | CHRISTIAN ASSOCIATION OF WARREN COUNTY  
|                                                  | 1699 DEERFIELD ROAD  
|                                                  | LEBANON, OH  45036  
| Prepared by                                      | RSM US LLP  
|                                                  | 6 S PATTERSON BLVD  
|                                                  | DAYTON, OH  45402  
| Amount due or refund                             | NOT APPLICABLE  
| Make check payable to                           | NOT APPLICABLE  
| Mail tax return and check (if applicable) to    | NOT APPLICABLE  
| Return must be mailed on or before              | NOT APPLICABLE  
| Special Instructions                             | THIS COPY OF THE RETURN IS PROVIDED ONLY FOR PUBLIC DISCLOSURE PURPOSES. ANY CONFIDENTIAL INFORMATION REGARDING LARGE DONORS HAS BEEN REMOVED.  

700941  
04-01-17
**Return of Organization Exempt From Income Tax**

**A For the 2017 calendar year, or tax year beginning and ending**

- **B Name of organization**: RALPH J. STOLLE COUNTRYSIDE YOUNG MEN'S CHRISTIAN ASSOCIATION OF WARREN COUNTY
- **D Employer identification number**: 51-0181689

**Part I Summary**

- 1. Briefly describe the organization's mission or most significant activities: **TO PRACTICE THROUGH PROGRAMS THAT BUILD HEALTHY SPIRIT, MIND & BODY FOR**
- 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) = 21
- 4. Number of independent voting members of the governing body (Part VI, line 1b) = 20
- 5. Total number of individuals employed in calendar year 2017 (Part V, line 2a) = 889
- 6. Total number of volunteers (estimate if necessary) = 2640
- 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 = 0

**Revenue**

- 8. Contributions and grants (Part VIII, line 1h) = 391,583
- 9. Program service revenue (Part VIII, line 2g) = 9,903,766
- 10. Investment income (Part VIII, column (A), lines 3, 4, and 7d) = 215,095
- 11. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) = 6,516,381
- 12. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) = 11,133,931

**Expenses**

- 13. Grants and similar amounts paid (Part IX, column (A), lines 1-3) = 229,598
- 14. Benefits paid to or for members (Part IX, column (A), line 4) = 6,516,381
- 15. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) = 6,916,914
- 16a. Professional fundraising fees (Part IX, column (A), line 11e) = 0
- 17. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) = 4,827,840
- 18. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) = 12,053,585
- 19. Revenue less expenses. Subtract line 18 from line 12 = 6,079,346

**Net Assets or Fund Balances**

- 20. Total assets (Part X, line 16) = 28,690,990
- 21. Total liabilities (Part X, line 26) = 9,008,381
- 22. Net assets or fund balances. Subtract line 21 from line 20 = 19,682,609

**Part II Signature Block**

**Sign Here**

- **Signature of officer**: RENEE M. LAY, CHIEF FINANCIAL OFFICER
- **Type or print name and title**:
- **Print/Type preparer's name**: KAREN O. CRIM
- **Preparer's signature**:
- **Preparer's PTIN**: 00368385
- **Preparer's EIN**: 42-0714325

**May the IRS discuss this return with the preparer shown above? (see instructions)**

- Yes [ ]
- No [X]

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION
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:

TO PUT CHRISTIAN PRINCIPLES INTO PRACTICE THROUGH PROGRAMS THAT BUILD
HEALTHY SPIRIT, MIND AND BODY FOR ALL.

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 $5,257,173. including grants of $ ) (Revenue $6,207,545.)

ONE AREA OF PROGRAMMING IS YOUTH DEVELOPMENT, WHERE YOUTH ARE
ENCOURAGED TO DISCOVER THEIR POTENTIAL AND LEARN WHAT THEY CAN ACHIEVE.
EACH YEAR AT COUNTRYSIDE YMCA, IN CHILDCARE AND CAMP, SEVERAL THOUSAND
YOUTH CULTIVATE THE VALUES, SKILLS AND RELATIONSHIPS THAT LEAD TO
POSITIVE BEHAVIORS, BETTER HEALTH AND EDUCATIONAL ACHIEVEMENT.

THE CHILDCARE PROGRAMS PROVIDE DAYCARE SERVICE TO CHILDREN IN THE
COMMUNITY. IN ALL CASES, THE CHILD-BASED PROGRAMMING BUILDS ON THE Y'S
CORE VALUES OF CARING, RESPECT, RESPONSIBILITY, HONESTY AND FAITH, WITH
THE GOAL TO BUILD CHILDREN OF CHARACTER. CHILDCARE AND PRESCHOOLS
PROVIDE VALUABLE SERVICES TO PARENTS AND CHILDREN. THESE PROGRAMS
PROVIDE DAY CARE, EDUCATION AND VALUES THROUGH PROGRAMS THAT STRESS

4b (Code: ) (Expenses $4,181,013. including grants of $ ) (Revenue $4,063,219.)

THE SECOND AREA OF PROGRAMMING IS HEALTHY LIVING. THE Y PROVIDES
SUPPORT, GUIDANCE AND RESOURCES NEEDED FOR PEOPLE OF ALL AGES AND
ABILITIES TO ACHIEVE GREATER HEALTH AND WELL-BEING. PROGRAMS IN
FITNESS, SPORTS, GYMNASICS, CARDIOVASCULAR EXERCISE,
SWIMMING/AQUATICS, DANCE, ARTS AND DEVELOPMENTAL EDUCATION AIM TO
DEVELOP HEALTHY LIFESTYLES FOR MEMBERS AND NON-MEMBERS THAT FOCUS ON
THE TOTAL WELLNESS OF EACH INDIVIDUAL. PROGRAMS FOSTER CONNECTIONS
THROUGH FITNESS, SPORTS, FUN AND SHARED INTERESTS. ALL HEALTHY LIVING
PROGRAMMING EXPOSES PARTICIPANTS TO THE Y'S CORE VALUES OF CARING,
RESPECT, RESPONSIBILITY, HONESTY AND FAITH. PROGRAM FINANCIAL
ASSISTANCE IS MADE AVAILABLE TO OVER 2,145 INDIVIDUALS EACH YEAR.

4c (Code: ) (Expenses $310,922. including grants of $308,831. ) (Revenue $187,176.)

THE THIRD AREA OF PROGRAMMING IS SOCIAL RESPONSIBILITY. AS A LEADING
NONPROFIT COMMITTED TO STRENGTHENING COMMUNITY, THE Y RESPONDS TO
ISSUES INFLUENCING THE COMMUNITY AND PROVIDES SUPPORT THROUGH SERVICES
FOCUSED ON CRITICAL AREAS, SUCH AS CHILD WELFARE, COMMUNITY HEALTH,
QUALITY OF LIFE AND FAMILY SERVICES. EXAMPLES OF THIS WORK INCLUDE:

COUNTRYSIDE OFFERS PROGRAMS AT LOCAL SECTION EIGHT HOUSING COMMUNITIES,
WHICH INCLUDES PRE-KINDERGARTEN EXPERIENCES TO UNDER-PRIVILEGED
PRESCHOOLERS IN AN EFFORT TO BETTER PREPARE THEM FOR KINDERGARTEN. THIS
IS PROVIDED AT NO COST TO THE CHILDREN OR THEIR FAMILIES.

ALL FOURTH GRADERS IN LEBANON CITY SCHOOLS RECEIVE LIFE-SAVING SWIMMING

4d Other program services (Describe in Schedule O.)
(Expenses $ ) (Revenue $ )

4e Total program service expenses $9,749,108.

SEE SCHEDULE O FOR CONTINUATION(S)
### Part IV Checklist of Required Schedules

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
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<tbody>
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<td>19</td>
<td>X</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>12a</th>
<th>Did the organization obtain separate, independent audited financial statements for the tax year?</th>
<th>Yes, complete Schedule D, Parts XI and XII</th>
</tr>
</thead>
<tbody>
<tr>
<td>12b</td>
<td>If &quot;Yes,&quot; and if the organization answered &quot;No&quot; to line 12a, then completing Schedule D, Parts XI and XII is optional</td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Is the organization a school described in section 170(b)(1)(A)(ii)?</td>
<td>Yes, complete Schedule E</td>
</tr>
<tr>
<td>14a</td>
<td>Did the organization maintain an office, employees, or agents outside of the United States?</td>
<td></td>
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<tr>
<td>14b</td>
<td>If &quot;Yes,&quot; complete Schedule D, Parts I and IV</td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization?</td>
<td>Yes, complete Schedule F, Parts I and IV</td>
</tr>
<tr>
<td>16</td>
<td>Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals?</td>
<td>Yes, complete Schedule F, Parts II and IV</td>
</tr>
<tr>
<td>17</td>
<td>Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e?</td>
<td>Yes, complete Schedule G, Part I</td>
</tr>
<tr>
<td>18</td>
<td>Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a?</td>
<td>Yes, complete Schedule G, Part II</td>
</tr>
<tr>
<td>19</td>
<td>Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a?</td>
<td>Yes, complete Schedule G, Part III</td>
</tr>
</tbody>
</table>
Part IV Checklist of Required Schedules (continued)

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H
   b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?
21 Did the organization report more than $5,000 of grants or other assistance to any domestic organization or
domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II
22 Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on
Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current
and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete
Schedule J
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the
last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete
Schedule K. If "No", go to line 25a
   b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?
   c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease
any tax-exempt bonds?
   d Did the organization act as an "on behalf of" issuer for outstanding at any time during the year?
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit
transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I
   b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and
that the transaction has not been reported on any of the organization’s prior Forms 990 or 990-EZ? If "Yes," complete
Schedule L, Part I
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or
former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"
complete Schedule L, Part II
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial
contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of
any of these persons? If "Yes," complete Schedule L, Part III
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV
instructions for applicable filing thresholds, conditions, and exceptions):
   a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV
   b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV
   c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,
director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV
29 Did the organization receive more than $25,000 in non-cash contributions? If "Yes," complete Schedule M
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation
contributions? If "Yes," complete Schedule M
31 Did the organization liquidate, terminate, or dissolve and cease operations?
   If "Yes," complete Schedule N, Part I
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete
Schedule N, Part II
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations
sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and
Part V, line 1
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?
   b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity
within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?
   If "Yes," complete Schedule R, Part V, line 2
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization
and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

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

1a Enter the number reported in Box 3 of Form 1096. Enter 0 if not applicable
   
   b Enter the number of Forms W-2G included in line 1a. Enter 0 if not applicable
   
   c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gambling winnings to prize winners?
   
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
   
   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)

3a Did the organization have unrelated business gross income of $1,000 or more during the year?
   
   b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O

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)?
   
   b If "Yes," enter the name of the foreign country:

5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?
   
   b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?
   
   c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?

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?
   
   b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?

7 Organizations that may receive deductible contributions under section 170(c).
   
   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?
   
   b If "Yes," did the organization notify the donor of the value of the goods or services provided?
   
   c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?
   
   d If "Yes," indicate the number of Forms 8282 filed during the year

8 Sponsoring organizations maintaining donor advised funds.
   Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?

9 Sponsoring organizations maintaining donor advised funds.
   Did the sponsoring organization make any taxable distributions under section 4966?
   
   a Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?

10 Section 501(c)(7) organizations. Enter:
   
   a Initiation fees and capital contributions included on Part VIII, line 12
   
   b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities

11 Section 501(c)(12) organizations. Enter:
   
   a Gross income from members or shareholders
   
   b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?
   
   b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

13 Section 501(c)(29) qualified nonprofit health insurance issuers.
   
   a Is the organization licensed to issue qualified health plans in more than one state?
   
   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
   
   c Enter the amount of reserves on hand

14a Did the organization receive any payments for indoor tanning services during the tax year?
   
   b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

Form 990 (2017)
**Section A. Governing Body and Management**

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
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<tbody>
<tr>
<td>1a Enter the number of voting members of the governing body at the end of the tax year</td>
<td></td>
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</tr>
<tr>
<td>If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.</td>
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</tr>
<tr>
<td>1b Enter the number of voting members included in line 1a, above, who are independent</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>5 Did the organization become aware during the year of a significant diversion of the organization's assets?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>6 Did the organization have members or stockholders?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td>X</td>
<td></td>
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<tr>
<td>7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?</td>
<td>X</td>
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<td>8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:</td>
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<tr>
<td>8a The governing body?</td>
<td>X</td>
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<tr>
<td>8b Each committee with authority to act on behalf of the governing body?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; provide the names and addresses in Schedule O</td>
<td>X</td>
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</table>

**Section B. Policies**

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

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>10a Did the organization have local chapters, branches, or affiliates?</td>
<td>X</td>
<td></td>
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<tr>
<td>10b If &quot;Yes,&quot; 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?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>11b Describe in Schedule O the process, if any, used by the organization to review this Form 990.</td>
<td>X</td>
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<tr>
<td>12a Did the organization have a written conflict of interest policy? If &quot;No,&quot; go to line 13</td>
<td>X</td>
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<tr>
<td>12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?</td>
<td>X</td>
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<tr>
<td>12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If &quot;Yes,&quot; describe in Schedule O how this was done</td>
<td>X</td>
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<td>13 Did the organization have a written whistleblower policy?</td>
<td>X</td>
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<tr>
<td>14 Did the organization have a written document retention and destruction policy?</td>
<td>X</td>
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<td>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?</td>
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<td>15a The organization’s CEO, Executive Director, or top management official</td>
<td>X</td>
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<tr>
<td>15b Other officers or key employees of the organization</td>
<td>X</td>
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<td>If &quot;Yes&quot; to line 15a or 15b, describe the process in Schedule O (see instructions).</td>
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<tr>
<td>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?</td>
<td>X</td>
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</tr>
<tr>
<td>16b If &quot;Yes,&quot; 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?</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

**Section C. Disclosure**

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>17 List the states with which a copy of this Form 990 is required to be filed</td>
<td>OH</td>
<td></td>
</tr>
<tr>
<td>18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Own website</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Another's website</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Upon request</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Other (explain in Schedule O)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>20 State the name, address, and telephone number of the person who possesses the organization’s books and records:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>RENE M. LAY - (513)932-1424</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1699 DEERFIELD ROAD, LEBANON, OH 45036</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(A)</td>
<td>Name and Title</td>
<td>(B) Average hours per week</td>
</tr>
<tr>
<td>-----</td>
<td>-----------------------</td>
<td>-----------------------------</td>
</tr>
<tr>
<td>(1)</td>
<td>BECKY HILL</td>
<td>1.00</td>
</tr>
<tr>
<td></td>
<td>DIRECTOR</td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td>BILL HAYNES</td>
<td>2.00</td>
</tr>
<tr>
<td></td>
<td>DIRECTOR</td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td>CATHY HOWELL</td>
<td>2.00</td>
</tr>
<tr>
<td></td>
<td>DIRECTOR</td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td>CHRIS ROMANO</td>
<td>1.00</td>
</tr>
<tr>
<td></td>
<td>DIRECTOR</td>
<td></td>
</tr>
<tr>
<td>(5)</td>
<td>DAVID NEWMAN</td>
<td>2.00</td>
</tr>
<tr>
<td></td>
<td>DIRECTOR</td>
<td></td>
</tr>
<tr>
<td>(6)</td>
<td>GEORGE LEASURE</td>
<td>2.00</td>
</tr>
<tr>
<td></td>
<td>DIRECTOR AND TRUSTEE</td>
<td></td>
</tr>
<tr>
<td>(7)</td>
<td>JANET COLLINS</td>
<td>2.00</td>
</tr>
<tr>
<td></td>
<td>DIRECTOR</td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td>KATHLEEN STOLLE</td>
<td>1.00</td>
</tr>
<tr>
<td></td>
<td>TRUSTEE</td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td>MARY KAUFMAN</td>
<td>2.00</td>
</tr>
<tr>
<td></td>
<td>TRUSTEE</td>
<td></td>
</tr>
<tr>
<td>(10)</td>
<td>RANDY KRONOUR</td>
<td>1.00</td>
</tr>
<tr>
<td></td>
<td>DIRECTOR</td>
<td></td>
</tr>
<tr>
<td>(11)</td>
<td>ROY MCKAY</td>
<td>1.00</td>
</tr>
<tr>
<td></td>
<td>TRUSTEE</td>
<td></td>
</tr>
<tr>
<td>(12)</td>
<td>SPENCE CROPPER</td>
<td>3.00</td>
</tr>
<tr>
<td></td>
<td>DIRECTOR</td>
<td></td>
</tr>
<tr>
<td>(13)</td>
<td>STEPHEN WILSON</td>
<td>1.00</td>
</tr>
<tr>
<td></td>
<td>TRUSTEE</td>
<td></td>
</tr>
<tr>
<td>(14)</td>
<td>TED RIPPERGER</td>
<td>2.00</td>
</tr>
<tr>
<td></td>
<td>DIRECTOR</td>
<td></td>
</tr>
<tr>
<td>(15)</td>
<td>TODD YOHEY</td>
<td>1.00</td>
</tr>
<tr>
<td></td>
<td>DIRECTOR</td>
<td></td>
</tr>
<tr>
<td>(16)</td>
<td>WILLIAM FALKNOR</td>
<td>1.00</td>
</tr>
<tr>
<td></td>
<td>TRUSTEE</td>
<td></td>
</tr>
<tr>
<td>(17)</td>
<td>LARRY HOLLINGSHEAD</td>
<td>3.00</td>
</tr>
<tr>
<td></td>
<td>SECRETARY</td>
<td></td>
</tr>
</tbody>
</table>
### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

**Form 990 (2017)**

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week</th>
<th>(C) Position</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(18) HOPE BONE</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>TREASURER</td>
<td>2.00</td>
<td>X X</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>(19) GEORGE SABERT</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>VICE CHAIR</td>
<td>3.00</td>
<td>X X</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>(20) ERIC MEILSTRUP</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CHAIRPERSON</td>
<td>4.00</td>
<td>X X</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>(21) SCOTT BRUNKA</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DIRECTOR</td>
<td>3.00</td>
<td>X X</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>(22) MIKE CARROLL</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CEO/PRESIDENT</td>
<td>50.00</td>
<td>X</td>
<td>108,859.00</td>
<td>0.00</td>
<td>16,603.00</td>
</tr>
<tr>
<td>(23) GEORGE SABERT</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>INTERIM CEO</td>
<td>25.00</td>
<td>X</td>
<td>48,000.00</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>(24) RENEE LAY</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CFO</td>
<td>45.00</td>
<td>X</td>
<td>80,726.00</td>
<td>0.00</td>
<td>22,510.00</td>
</tr>
</tbody>
</table>

1b Sub-total: 237,585.00  0.00  39,113.00

c Total from continuation sheets to Part VII, Section A: 0.00  0.00  0.00

d Total (add lines 1b and 1c): 237,585.00  0.00  39,113.00

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization: 1

3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual: ✔

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? If "Yes," complete Schedule J for such individual: ✔

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person: ✔

### Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

<table>
<thead>
<tr>
<th>(A) Name and business address</th>
<th>(B) Description of services</th>
<th>(C) Compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td>CONGER CONSTRUCTION, INC</td>
<td>CONSTRUCTION</td>
<td>450,600.00</td>
</tr>
<tr>
<td>PO BOX 1069, LEBANON, OH 45036</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization: 1
## Part VIII Statement of Revenue

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

<table>
<thead>
<tr>
<th>Contributions, Gifts, Grants and Other Similar Amounts</th>
<th>Total revenue</th>
<th>Related or exempt function revenue</th>
<th>Unrelated business revenue</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 a Federated campaigns</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 b Membership dues</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 c Fundraising events</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 d Related organizations</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 e Government grants (contributions)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 f All other contributions, gifts, grants, and similar amounts not included above</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 g Noncash contributions included in lines 1a-1f</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>h Total. Add lines 1a-1f</td>
<td>2,138,961.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Program Service Revenue</th>
<th>Business Code</th>
<th>Total revenue</th>
</tr>
</thead>
<tbody>
<tr>
<td>2 a MEMBERSHIP DUES</td>
<td>900099</td>
<td>5,242,251.</td>
</tr>
<tr>
<td>2 b PROGRAM FEES</td>
<td>900099</td>
<td>5,215,689.</td>
</tr>
<tr>
<td>2 c</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 d</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 e</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 f All other program service revenue</td>
<td></td>
<td></td>
</tr>
<tr>
<td>g Total. Add lines 2a-2f</td>
<td>10,457,940.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Revenue excluded from tax under sections 512-514</th>
<th>Total revenue</th>
</tr>
</thead>
<tbody>
<tr>
<td>3 Investment income (including dividends, interest, and other similar amounts)</td>
<td>201,659.</td>
</tr>
<tr>
<td>4 Income from investment of tax-exempt bond proceeds</td>
<td></td>
</tr>
<tr>
<td>5 Royalties</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Royalties</th>
<th>(i) Real</th>
<th>(ii) Personal</th>
</tr>
</thead>
<tbody>
<tr>
<td>6 a Gross rents</td>
<td>314,335.</td>
<td></td>
</tr>
<tr>
<td>6 b Less: rental expenses</td>
<td>80,000.</td>
<td></td>
</tr>
<tr>
<td>6 c Rental income or (loss)</td>
<td>234,335.</td>
<td></td>
</tr>
<tr>
<td>6 d Net rental income or (loss)</td>
<td>234,335.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Royalties</th>
<th>(i) Securities</th>
<th>(ii) Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>7 a Gross amount from sales of assets other than inventory</td>
<td>2,730,330.</td>
<td></td>
</tr>
<tr>
<td>7 b Less: cost or other basis and sales expenses</td>
<td>2,628,023.</td>
<td></td>
</tr>
<tr>
<td>7 c Gain or (loss)</td>
<td>102,307.</td>
<td></td>
</tr>
<tr>
<td>7 d Net gain or (loss)</td>
<td>6,385.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Royalties</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>8 a Gross income from fundraising events (not including $44,817. of contributions reported on line 1c). See Part IV, line 18</td>
<td>146,047.</td>
</tr>
<tr>
<td>8 b Less: direct expenses</td>
<td>58,093.</td>
</tr>
<tr>
<td>8 c Net income or (loss) from fundraising events</td>
<td>87,955.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Royalties</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>9 a Gross income from gaming activities. See Part IV, line 19</td>
<td></td>
</tr>
<tr>
<td>9 b Less: direct expenses</td>
<td></td>
</tr>
<tr>
<td>9 c Net income or (loss) from gaming activities</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Royalties</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>10 a Gross sales of inventory, less returns and allowances</td>
<td>43,899.</td>
</tr>
<tr>
<td>10 b Less: cost of goods sold</td>
<td>28,672.</td>
</tr>
<tr>
<td>10 c Net income or (loss) from sales of inventory</td>
<td>15,227.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Miscellaneous Revenue</th>
<th>Business Code</th>
<th>Total revenue</th>
</tr>
</thead>
<tbody>
<tr>
<td>11 a MISCELLANEOUS INCOME</td>
<td>722210</td>
<td>115,184.</td>
</tr>
<tr>
<td>11 b LOSS ON LEASE AMENDMENT</td>
<td>900099</td>
<td>-566,983.</td>
</tr>
<tr>
<td>11 c</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 d All other revenue</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 e Total. Add lines 1a-1d</td>
<td>-451,799.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Miscellaneous Revenue</th>
<th>Total revenue. See instructions.</th>
</tr>
</thead>
<tbody>
<tr>
<td>12 Total revenue.</td>
<td>12,690,663.</td>
</tr>
</tbody>
</table>
### 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.

<table>
<thead>
<tr>
<th></th>
<th>(A) Total expenses</th>
<th>(B) Program service expenses</th>
<th>(C) Management and general expenses</th>
<th>(D) Fundraising expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21</td>
<td>308,831</td>
<td>308,831</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Grants and other assistance to domestic individuals. See Part IV, line 22</td>
<td>308,831</td>
<td>308,831</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Benefits paid to or for members</td>
<td>276,698</td>
<td>236,567</td>
<td>37,133</td>
</tr>
<tr>
<td>5</td>
<td>Compensation of current officers, directors, trustees, and key employees</td>
<td>5,292,560</td>
<td>4,749,875</td>
<td>498,630</td>
</tr>
<tr>
<td>6</td>
<td>Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)</td>
<td>332,879</td>
<td>284,601</td>
<td>44,671</td>
</tr>
<tr>
<td>7</td>
<td>Other salaries and wages</td>
<td>535,289</td>
<td>457,654</td>
<td>71,836</td>
</tr>
<tr>
<td>8</td>
<td>Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)</td>
<td>479,488</td>
<td>421,818</td>
<td>53,362</td>
</tr>
<tr>
<td>9</td>
<td>Other employee benefits</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Payroll taxes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Fees for services (non-employees):</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Management</td>
<td>30,325</td>
<td>30,325</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Legal</td>
<td>38,821</td>
<td>10,821</td>
<td>28,000</td>
</tr>
<tr>
<td>c</td>
<td>Accounting</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>Lobbying</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>Professional fundraising services. See Part IV, line 17</td>
<td>45,359</td>
<td>45,359</td>
<td></td>
</tr>
<tr>
<td>f</td>
<td>Investment management fees</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g</td>
<td>Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Advertising and promotion</td>
<td>300,409</td>
<td>64,776</td>
<td>204,239</td>
</tr>
<tr>
<td>13</td>
<td>Office expenses</td>
<td>69,896</td>
<td>48,738</td>
<td>21,158</td>
</tr>
<tr>
<td>14</td>
<td>Information technology</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Royalties</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Occupancy</td>
<td>1,076,246</td>
<td>943,823</td>
<td>132,423</td>
</tr>
<tr>
<td>17</td>
<td>Travel</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18</td>
<td>Payments of travel or entertainment expenses for any federal, state, or local public officials</td>
<td>16,853</td>
<td>10,638</td>
<td>6,215</td>
</tr>
<tr>
<td>19</td>
<td>Conferences, conventions, and meetings</td>
<td>274,822</td>
<td>274,822</td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>Interest</td>
<td>172,148</td>
<td>103,289</td>
<td>68,859</td>
</tr>
<tr>
<td>21</td>
<td>Payments to affiliates</td>
<td>1,203,123</td>
<td>868,786</td>
<td>334,337</td>
</tr>
<tr>
<td>22</td>
<td>Depreciation, depletion, and amortization</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>23</td>
<td>Insurance</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24</td>
<td>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.)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>SUPPLIES</td>
<td>929,175</td>
<td>869,032</td>
<td>60,143</td>
</tr>
<tr>
<td>b</td>
<td>MISCELLANEOUS</td>
<td>283,934</td>
<td>103,676</td>
<td>180,258</td>
</tr>
<tr>
<td>c</td>
<td>EQUIP RENTAL &amp; MAINTENA</td>
<td>217,539</td>
<td>142,547</td>
<td>74,992</td>
</tr>
<tr>
<td>d</td>
<td>REPAIR EXPENSE</td>
<td>123,636</td>
<td>123,636</td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>All other expenses</td>
<td>45,554</td>
<td>45,554</td>
<td></td>
</tr>
</tbody>
</table>

Total functional expenses. Add lines 1 through 24e 12,053,585 9,749,108 2,212,316 92,161.

Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

Check here if following SOP 98-2 (ASC 958-720)
### Balance Sheet

**Part X**

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

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Cash - non-interest-bearing</td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>Savings and temporary cash investments</td>
<td>2,975,781</td>
<td>2,367,379.</td>
</tr>
<tr>
<td>3</td>
<td>Pledges and grants receivable, net</td>
<td>303,200</td>
<td>2,011,882.</td>
</tr>
<tr>
<td>4</td>
<td>Accounts receivable, net</td>
<td>236,166</td>
<td>287,420.</td>
</tr>
<tr>
<td>5</td>
<td>Loans and other receivables from current and former officers, directors,</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>trustees, key employees, and highest compensated employees. Complete Part II</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>of Schedule L</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Loans and other receivables from other disqualified persons</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>(as defined under section 4958(f)(1)), persons described in section 4958(c)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>(3)(B), and contributing employers and sponsoring organizations of section</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>501(c)(9) voluntary employees' beneficiary organizations (see instr).</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Complete Part II of Sch L</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Notes and loans receivable, net</td>
<td>13,512</td>
<td>96,671.</td>
</tr>
<tr>
<td>8</td>
<td>Inventories for sale or use</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Prepaid expenses and deferred charges</td>
<td>36,004,705</td>
<td>18,638,917.</td>
</tr>
<tr>
<td>10a</td>
<td>Land, buildings, and equipment: cost or other basis. Complete Part VI of</td>
<td>10a 36,004,705</td>
<td>18,638,917.</td>
</tr>
<tr>
<td></td>
<td>Schedule D</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10b</td>
<td>Less: accumulated depreciation</td>
<td>17,863,403</td>
<td>18,141,302.</td>
</tr>
<tr>
<td>11</td>
<td>Investments - publicly traded securities</td>
<td>5,834,210</td>
<td>6,037,078.</td>
</tr>
<tr>
<td>12</td>
<td>Investments - other securities. See Part IV, line 11</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Investments - program-related. See Part IV, line 11</td>
<td></td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>Intangible assets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Other assets. See Part IV, line 11</td>
<td>689,204</td>
<td>129,633.</td>
</tr>
<tr>
<td>16</td>
<td><strong>Total assets.</strong> Add lines 1 through 15 (must equal line 34)</td>
<td>28,690,990</td>
<td>29,071,365.</td>
</tr>
<tr>
<td>17</td>
<td>Accounts payable and accrued expenses</td>
<td>902,571</td>
<td>459,447.</td>
</tr>
<tr>
<td>18</td>
<td>Grants payable</td>
<td></td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>Tax-exempt bond liabilities</td>
<td>7,932,425</td>
<td>7,599,003.</td>
</tr>
<tr>
<td>21</td>
<td>Escrow or custodial account liability. Complete Part IV of Schedule D</td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Loans and other payables to current and former officers, directors, trustees,</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>key employees, highest compensated employees, and disqualified persons.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Complete Part II of Schedule L</td>
<td></td>
<td></td>
</tr>
<tr>
<td>23</td>
<td>Secured mortgages and notes payable to unrelated third parties</td>
<td></td>
<td></td>
</tr>
<tr>
<td>24</td>
<td>Unsecured notes and loans payable to unrelated third parties</td>
<td></td>
<td></td>
</tr>
<tr>
<td>25</td>
<td>Other liabilities (including federal income tax, payables to related third</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>parties, and other liabilities not included on lines 17-24). Complete Part X</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>of Schedule D</td>
<td></td>
<td></td>
</tr>
<tr>
<td>26</td>
<td><strong>Total liabilities.</strong> Add lines 17 through 25 (must equal line 34)</td>
<td>9,008,381</td>
<td>8,306,915.</td>
</tr>
<tr>
<td>27</td>
<td>Unrestricted net assets</td>
<td>18,671,974</td>
<td>17,991,058.</td>
</tr>
<tr>
<td>28</td>
<td>Temporarily restricted net assets</td>
<td>945,773</td>
<td>2,708,466.</td>
</tr>
<tr>
<td>29</td>
<td>Permanently restricted net assets</td>
<td>64,862</td>
<td>64,926.</td>
</tr>
<tr>
<td>30</td>
<td>Capital stock or trust principal, or current funds</td>
<td></td>
<td></td>
</tr>
<tr>
<td>31</td>
<td>Paid-in or capital surplus, or land, building, or equipment fund</td>
<td></td>
<td></td>
</tr>
<tr>
<td>32</td>
<td>Retained earnings, endowment, accumulated income, or other funds</td>
<td></td>
<td></td>
</tr>
<tr>
<td>33</td>
<td><strong>Total net assets or fund balances</strong></td>
<td>19,682,609</td>
<td>20,764,450.</td>
</tr>
<tr>
<td>34</td>
<td><strong>Total liabilities and net assets/fund balances</strong></td>
<td>28,690,990</td>
<td>29,071,365.</td>
</tr>
</tbody>
</table>
### Part XI Reconciliation of Net Assets

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

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue (must equal Part VIII, column (A), line 12)</td>
</tr>
<tr>
<td>2</td>
<td>Total expenses (must equal Part IX, column (A), line 25)</td>
</tr>
<tr>
<td>3</td>
<td>Revenue less expenses. Subtract line 2 from line 1</td>
</tr>
<tr>
<td>4</td>
<td>Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))</td>
</tr>
<tr>
<td>5</td>
<td>Net unrealized gains (losses) on investments</td>
</tr>
<tr>
<td>6</td>
<td>Donated services and use of facilities</td>
</tr>
<tr>
<td>7</td>
<td>Investment expenses</td>
</tr>
<tr>
<td>8</td>
<td>Prior period adjustments</td>
</tr>
<tr>
<td>9</td>
<td>Other changes in net assets or fund balances (explain in Schedule O)</td>
</tr>
<tr>
<td>10</td>
<td>Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))</td>
</tr>
</tbody>
</table>

### Part XII Financial Statements and Reporting

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

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Accounting method used to prepare the Form 990: Cash [X] Accrual [ ] Other [ ]</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>2a</td>
<td>Were the organization's financial statements compiled or reviewed by an independent accountant? [X]</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>If &quot;Yes,&quot; 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:</td>
</tr>
<tr>
<td></td>
<td>□ Separate basis □ Consolidated basis □ Both consolidated and separate basis</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>2b</td>
<td>Were the organization's financial statements audited by an independent accountant? [X]</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>If &quot;Yes,&quot; check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:</td>
</tr>
<tr>
<td></td>
<td>[X] Separate basis □ Consolidated basis □ Both consolidated and separate basis</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>2c</td>
<td>If &quot;Yes&quot; 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? [X]</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>3a</td>
<td>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? [X]</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>3b</td>
<td>If &quot;Yes,&quot; 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</td>
</tr>
</tbody>
</table>
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)(ii).
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)(v).  (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 section 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.

g □ Enter the number of supported organizations .............................................................

Provide the following information about the supported organization(s).

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

Total

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 732021 10-06-17 Schedule A (Form 990 or 990-EZ) 2017
### Section A. Public Support

**Calendar year (or fiscal year beginning in):**

<table>
<thead>
<tr>
<th></th>
<th>(a) 2013</th>
<th>(b) 2014</th>
<th>(c) 2015</th>
<th>(d) 2016</th>
<th>(e) 2017</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Gifts, grants, contributions, and membership fees received (Do not include any &quot;unusual grants.&quot;)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Tax revenues levied for the organization's benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td><strong>Total. Add lines 1 through 3</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>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)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td><strong>Public support. Subtract line 5 from line 4.</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section B. Total Support

**Calendar year (or fiscal year beginning in):**

<table>
<thead>
<tr>
<th></th>
<th>(a) 2013</th>
<th>(b) 2014</th>
<th>(c) 2015</th>
<th>(d) 2016</th>
<th>(e) 2017</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>Amounts from line 4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Net income from unrelated business activities, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td><strong>Total support. Add lines 7 through 10</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Gross receipts from related activities, etc. (see instructions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>12</td>
</tr>
<tr>
<td>13</td>
<td><strong>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.</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section C. Computation of Public Support Percentage

<table>
<thead>
<tr>
<th></th>
<th>(a) 2013</th>
<th>(b) 2014</th>
<th>(c) 2015</th>
<th>(d) 2016</th>
<th>(e) 2017</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>14</td>
<td>Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f))</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Public support percentage from 2016 Schedule A, Part II, line 14</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**16a 33 1/3% support test - 2017.** 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.

**16b 33 1/3% support test - 2016.** 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 - 2017.** 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. The organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.

**17b 10% - Facts-and-circumstances test - 2016.** 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. 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.
### Section A. Public Support

#### Calendar year (or fiscal year beginning in)

<table>
<thead>
<tr>
<th></th>
<th>(a) 2013</th>
<th>(b) 2014</th>
<th>(c) 2015</th>
<th>(d) 2016</th>
<th>(e) 2017</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Gifts, grants, contributions, and membership fees received. (Do not include any &quot;unusual grants.&quot;)</td>
<td>345,279</td>
<td>362,988</td>
<td>431,078</td>
<td>515,006</td>
<td>386,062</td>
</tr>
<tr>
<td>2</td>
<td>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</td>
<td>902,374</td>
<td>902,558</td>
<td>979,160</td>
<td>995,014</td>
<td>1,050,183</td>
</tr>
<tr>
<td>3</td>
<td>Gross receipts from activities that are not an unrelated trade or business under section 513</td>
<td>81,348</td>
<td>46,907</td>
<td>55,208</td>
<td>52,734</td>
<td>51,972</td>
</tr>
<tr>
<td>4</td>
<td>Tax revenues levied for the organization’s benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Total. Add lines 1 through 5</td>
<td>936,901</td>
<td>938,857</td>
<td>1,022,268</td>
<td>1,046,514</td>
<td>1,088,790</td>
</tr>
<tr>
<td>7a</td>
<td>Amounts included on lines 1, 2, and 3 received from disqualified persons</td>
<td>81,348</td>
<td>46,907</td>
<td>55,208</td>
<td>52,734</td>
<td>51,972</td>
</tr>
<tr>
<td>7b</td>
<td>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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Add lines 7a and 7b</td>
<td>81,348</td>
<td>46,907</td>
<td>55,208</td>
<td>52,734</td>
<td>51,972</td>
</tr>
</tbody>
</table>

#### Section B. Total Support

<table>
<thead>
<tr>
<th></th>
<th>(a) 2013</th>
<th>(b) 2014</th>
<th>(c) 2015</th>
<th>(d) 2016</th>
<th>(e) 2017</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>9</td>
<td>Amounts from line 6</td>
<td>936,901</td>
<td>938,857</td>
<td>1,022,268</td>
<td>1,046,514</td>
<td>1,088,790</td>
</tr>
<tr>
<td>10a</td>
<td>Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources</td>
<td>924,554</td>
<td>872,647</td>
<td>786,079</td>
<td>775,221</td>
<td>515,994</td>
</tr>
<tr>
<td>10b</td>
<td>Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975</td>
<td>924,554</td>
<td>872,647</td>
<td>786,079</td>
<td>775,221</td>
<td>515,994</td>
</tr>
<tr>
<td>11</td>
<td>Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on</td>
<td>73,640</td>
<td>92,365</td>
<td>50,353</td>
<td>47,223</td>
<td>115,184</td>
</tr>
<tr>
<td>12</td>
<td>Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Total support. (Add lines 9, 10a, 11, and 12)</td>
<td>1,036,721</td>
<td>1,035,358</td>
<td>1,105,911</td>
<td>1,128,759</td>
<td>1,151,907</td>
</tr>
<tr>
<td>14</td>
<td>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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section C. Computation of Public Support Percentage

<table>
<thead>
<tr>
<th></th>
<th>15 Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))</th>
<th>15</th>
<th>91.68 %</th>
</tr>
</thead>
<tbody>
<tr>
<td>16</td>
<td>Public support percentage from 2016 Schedule A, Part III, line 15</td>
<td>16</td>
<td>90.82 %</td>
</tr>
</tbody>
</table>

### Section D. Computation of Investment Income Percentage

<table>
<thead>
<tr>
<th></th>
<th>17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))</th>
<th>17</th>
<th>7.10 %</th>
</tr>
</thead>
<tbody>
<tr>
<td>18</td>
<td>Investment income percentage from 2016 Schedule A, Part III, line 17</td>
<td>18</td>
<td>8.05 %</td>
</tr>
</tbody>
</table>

#### 33 1/3% support tests - 2017

- 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.

- If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions.
Part IV
Supporting Organizations

Section A. All Supporting Organizations

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. [Yes No] 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). [Yes No] 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. [Yes No] 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. [Yes No] 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. [Yes No] 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. [Yes No] 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. [Yes No] 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. [Yes No] 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). [Yes No] 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? [Yes No] 5b

c. Substitutions only. Was the substitution the result of an event beyond the organization's control? [Yes No] 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. [Yes No] 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). [Yes No] 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). [Yes No] 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. [Yes No] 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. [Yes No] 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. [Yes No] 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 10b below. [Yes No] 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.) [Yes No] 10b
Part IV Supporting Organizations (continued)

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? If "Yes" to a, b, or c, provide detail in Part VI.

Section B. Type I Supporting Organizations

1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization’s directors or trustees at all times during the tax year? If "No," describe in 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.

2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).

3 By reason of the relationship described in (2), did the organization’s supported organizations have a significant voice in the organization’s investment policies and in directing the use of the organization’s income or assets at all times during the tax year? If "Yes," explain in Part VI the role the organization’s supported organizations played in this regard.

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 The organization satisfied the Activities Test. Complete line 2 below.
   b The organization is the parent of each of its supported organizations. Complete line 3 below.
   c 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? 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.
   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? 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.

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? Provide details in Part VI.
   b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.
### Part V: Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

#### Section A - Adjusted Net Income

<table>
<thead>
<tr>
<th></th>
<th>(A) Prior Year</th>
<th>(B) Current Year (optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Net short-term capital gain</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>Recoveries of prior-year distributions</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>Other gross income (see instructions)</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Add lines 1 through 3</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>Depreciation and depletion</td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>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)</td>
<td>6</td>
</tr>
<tr>
<td>7</td>
<td>Other expenses (see instructions)</td>
<td>7</td>
</tr>
<tr>
<td>8</td>
<td>Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)</td>
<td>8</td>
</tr>
</tbody>
</table>

#### Section B - Minimum Asset Amount

<table>
<thead>
<tr>
<th></th>
<th>(A) Prior Year</th>
<th>(B) Current Year (optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Average monthly value of securities</td>
<td>1a</td>
</tr>
<tr>
<td>b</td>
<td>Average monthly cash balances</td>
<td>1b</td>
</tr>
<tr>
<td>c</td>
<td>Fair market value of other non-exempt-use assets</td>
<td>1c</td>
</tr>
<tr>
<td>d</td>
<td>Total (add lines 1a, 1b, and 1c)</td>
<td>1d</td>
</tr>
<tr>
<td>e</td>
<td>Discount claimed for blockage or other factors (explain in detail in Part VI):</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Acquisition indebtedness applicable to non-exempt-use assets</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2 from line 1d</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>Net value of non-exempt-use assets (subtract line 4 from line 3)</td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>Multiply line 5 by .035</td>
<td>6</td>
</tr>
<tr>
<td>7</td>
<td>Recoveries of prior-year distributions</td>
<td>7</td>
</tr>
<tr>
<td>8</td>
<td>Minimum Asset Amount (add line 7 to line 6)</td>
<td>8</td>
</tr>
</tbody>
</table>

#### Section C - Distributable Amount

<table>
<thead>
<tr>
<th></th>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Adjusted net income for prior year (from Section A, line 8, Column A)</td>
</tr>
<tr>
<td>2</td>
<td>Enter 85% of line 1</td>
</tr>
<tr>
<td>3</td>
<td>Minimum asset amount for prior year (from Section B, line 8, Column A)</td>
</tr>
<tr>
<td>4</td>
<td>Enter greater of line 2 or line 3</td>
</tr>
<tr>
<td>5</td>
<td>Income tax imposed in prior year</td>
</tr>
<tr>
<td>6</td>
<td>Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)</td>
</tr>
</tbody>
</table>

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).
### Section D - Distributions

<table>
<thead>
<tr>
<th>Current Year</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Amounts paid to supported organizations to accomplish exempt purposes</td>
</tr>
<tr>
<td>2</td>
<td>Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity</td>
</tr>
<tr>
<td>3</td>
<td>Administrative expenses paid to accomplish exempt purposes of supported organizations</td>
</tr>
<tr>
<td>4</td>
<td>Amounts paid to acquire exempt-use assets</td>
</tr>
<tr>
<td>5</td>
<td>Qualified set-aside amounts (prior IRS approval required)</td>
</tr>
<tr>
<td>6</td>
<td>Other distributions (describe in <strong>Part VI</strong>), See instructions.</td>
</tr>
<tr>
<td>7</td>
<td><strong>Total annual distributions.</strong> Add lines 1 through 6.</td>
</tr>
<tr>
<td>8</td>
<td>Distributions to attentive supported organizations to which the organization is responsive (provide details in <strong>Part VI</strong>), See instructions.</td>
</tr>
<tr>
<td>9</td>
<td>Distributable amount for 2017 from Section C, line 6</td>
</tr>
<tr>
<td>10</td>
<td>Line 8 amount divided by line 9 amount</td>
</tr>
</tbody>
</table>

### Section E - Distribution Allocations (see instructions)

<table>
<thead>
<tr>
<th>(i) Excess Distributions</th>
<th>(ii) Underdistributions Pre-2017</th>
<th>(iii) Distributable Amount for 2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Line 1 Distributable amount for 2017 from Section C, line 6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Line 2 Underdistributions, if any, for years prior to 2017 (reasonable cause required- explain in <strong>Part VI</strong>), See instructions.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Line 3 Excess distributions carryover, if any, to 2017</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b From 2013</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c From 2014</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d From 2015</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e From 2016</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Line 4 Total of lines 3a through e</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Line 5 Applied to underdistributions of prior years</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Line 6 Applied to 2017 distributable amount</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Line 7 Carryover from 2012 not applied (see instructions)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Line 8 Remainder. Subtract lines 3g, 3h, and 3i from 3f.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Line 9 Distributions for 2017 from Section D, line 7:</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td>a Applied to underdistributions of prior years</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Applied to 2017 distributable amount</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Remainder. Subtract lines 4a and 4b from 4.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Line 10 Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in <strong>Part VI</strong>. See instructions.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Line 11 Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in <strong>Part VI</strong>. See instructions.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Line 12 Excess distributions carryover to 2018. Add lines 3j and 4c.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Line 13 Breakdown of line 7:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Excess from 2013</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Excess from 2014</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Excess from 2015</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Excess from 2016</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e Excess from 2017</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
SCHEDULE A, LIST OF UNUSUAL GRANTS RECEIVED:

DESCRIPTION: LONG-TERM DEBT REPAYMENT

DATE: 01/01/17      AMOUNT: 1898944.

SCHEDULE A, LINE 12, OTHER INCOME IS COMPRISED OF:

WORKERS COMPENSATION REFUNDS - 64262

OTHER MISCELLANEOUS INCOME - 50922
** PUBLIC DISCLOSURE COPY **

<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>Employer identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td>RALPH J. STOLLE COUNTRYSIDE YOUNG MEN'S CHRISTIAN ASSOCIATION OF WARREN COUNTY</td>
<td>51-0181689</td>
</tr>
</tbody>
</table>

**Organization type**

Select the appropriate box under "Filers of:

- Form 990 or 990-EZ
  - X 501(c)(3) (enter number) organization
  - 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
  - 527 political organization

- Form 990-PF
  - 501(c)(3) exempt private foundation
  - 4947(a)(1) nonexempt charitable trust treated as a private foundation
  - 501(c)(3) taxable private foundation

**Check if your organization is covered by the General Rule or a Special Rule.**

**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

- X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling $5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of the greater of (1) $5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 **exclusively** for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions **exclusively** for religious, charitable, etc., purposes, but no such contributions totaled more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an **exclusively** religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received **nonexclusively** religious, charitable, etc., contributions totaling $5,000 or more during the year ................................................... $

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).
## Part I Contributors

(see instructions). Use duplicate copies of Part I if additional space is needed.

<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
<th>Total contributions</th>
<th>Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td>$10,000.</td>
<td>Person ☒ Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash ☐</td>
</tr>
<tr>
<td>2</td>
<td></td>
<td>$5,000.</td>
<td>Person ☒ Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash ☐</td>
</tr>
<tr>
<td>3</td>
<td></td>
<td>$15,000.</td>
<td>Person ☒ Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash ☐</td>
</tr>
<tr>
<td>4</td>
<td></td>
<td>$8,000.</td>
<td>Person ☒ Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash ☐</td>
</tr>
<tr>
<td>5</td>
<td></td>
<td>$5,000.</td>
<td>Person ☒ Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash ☐</td>
</tr>
<tr>
<td>6</td>
<td></td>
<td>$30,000.</td>
<td>Person ☒ Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash ☐</td>
</tr>
</tbody>
</table>
### Part I Contributors

(see instructions). Use duplicate copies of Part I if additional space is needed.

<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
<th>Total contributions</th>
<th>Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td></td>
<td>$5,000.</td>
<td>Person X Payroll X Noncash</td>
</tr>
<tr>
<td>8</td>
<td></td>
<td>$10,000.</td>
<td>Person X Payroll X Noncash</td>
</tr>
<tr>
<td>9</td>
<td></td>
<td>$10,000.</td>
<td>Person X Payroll X Noncash</td>
</tr>
<tr>
<td>10</td>
<td></td>
<td>$5,000.</td>
<td>Person X Payroll X Noncash</td>
</tr>
<tr>
<td>11</td>
<td></td>
<td>$5,000.</td>
<td>Person X Payroll X Noncash</td>
</tr>
<tr>
<td>12</td>
<td></td>
<td>$5,000.</td>
<td>Person X Payroll X Noncash</td>
</tr>
</tbody>
</table>

(Complete Part II for noncash contributions.)

**Name of organization**
RALPH J. STOLLE COUNTRYSIDE YOUNG MEN'S
CHRISTIAN ASSOCIATION OF WARREN COUNTY

**Employer identification number**
51-0181689
### Part I Contributors

<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
<th>Total contributions</th>
<th>Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>13</td>
<td></td>
<td>$1,898,944</td>
<td>Person X Payroll Noncash</td>
</tr>
</tbody>
</table>

(Complete Part II for noncash contributions.)
### Part II  Noncash Property  
(see instructions).  Use duplicate copies of Part II if additional space is needed.

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Description of noncash property given</th>
<th>(c) FMV (or estimate)</th>
<th>(d) Date received</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>$</td>
<td></td>
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<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>$</td>
<td></td>
</tr>
</tbody>
</table>

Name of organization:  RALPH J. STOLLE COUNTRYSIDE YOUNG MEN'S CHRISTIAN ASSOCIATION OF WARREN COUNTY

Employer identification number:  51-0181689
<table>
<thead>
<tr>
<th>No. from Part I</th>
<th>Purpose of gift</th>
<th>Use of gift</th>
<th>Description of how gift is held</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Transfer of gift**

Transferee's name, address, and ZIP + 4

<table>
<thead>
<tr>
<th>Relationship of transferor to transferee</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

(a) No. from Part I

<table>
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<th>Purpose of gift</th>
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**Transfer of gift**

Transferee's name, address, and ZIP + 4

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**Transfer of gift**

Transferee's name, address, and ZIP + 4

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**Transfer of gift**

Transferee's name, address, and ZIP + 4

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</tbody>
</table>

(a) No. from Part I

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**Transfer of gift**

Transferee's name, address, and ZIP + 4

<table>
<thead>
<tr>
<th>Relationship of transferor to transferee</th>
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<td></td>
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</table>

(a) No. from Part I

<table>
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<tr>
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<th>Use of gift</th>
<th>Description of how gift is held</th>
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</thead>
<tbody>
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<td></td>
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</tbody>
</table>
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.

2017
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 organization: RALPH J. STOLLE COUNTRYSIDE YOUNG MEN'S CHRISTIAN ASSOCIATION OF WARREN COUNTY
Employer identification number: 51-0181689

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.
2. Political campaign activity expenditures
3. Volunteer hours for political campaign activities

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?
4a. Was a correction made?
   a. Yes
   b. No

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?
   a. Yes
   b. 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.

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

Schedule C (Form 990 or 990-EZ) 2017

LHA
732041 11-09-17

19030710 402777 776-133-7 2017.04000 RALPH J. STOLLE COUNTRYSIDE 776-1I01
If the amount on line 1e, column (a) or (b) is:

<table>
<thead>
<tr>
<th></th>
<th>(a) Filing organization's totals</th>
<th>(b) Affiliated group totals</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th></th>
<th>(a) Filing organization's totals</th>
<th>(b) Affiliated group totals</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a</td>
<td>Total lobbying expenditures to influence public opinion (grass roots lobbying)</td>
<td></td>
</tr>
<tr>
<td>1b</td>
<td>Total lobbying expenditures to influence a legislative body (direct lobbying)</td>
<td></td>
</tr>
<tr>
<td>1c</td>
<td>Total lobbying expenditures (add lines 1a and 1b)</td>
<td></td>
</tr>
<tr>
<td>1d</td>
<td>Other exempt purpose expenditures</td>
<td></td>
</tr>
<tr>
<td>1e</td>
<td>Total exempt purpose expenditures (add lines 1c and 1d)</td>
<td></td>
</tr>
<tr>
<td>1f</td>
<td>Lobbying nontaxable amount. Enter the amount from the following table in both columns.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>If the amount on line 1e, column (a) or (b) is:</th>
<th>The lobbying nontaxable amount is:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not over $500,000</td>
<td>20% of the amount on line 1e.</td>
</tr>
<tr>
<td>Over $500,000 but not over $1,000,000</td>
<td>$100,000 plus 15% of the excess over $500,000.</td>
</tr>
<tr>
<td>Over $1,000,000 but not over $1,500,000</td>
<td>$175,000 plus 10% of the excess over $1,000,000.</td>
</tr>
<tr>
<td>Over $1,500,000 but not over $17,000,000</td>
<td>$225,000 plus 5% of the excess over $1,500,000.</td>
</tr>
<tr>
<td>Over $17,000,000</td>
<td>$1,000,000.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>g</th>
<th>Grassroots nontaxable amount (enter 25% of line 1f)</th>
</tr>
</thead>
<tbody>
<tr>
<td>h</td>
<td>Subtract line 1g from line 1a. If zero or less, enter 0-</td>
</tr>
<tr>
<td>i</td>
<td>Subtract line 1f from line 1c. If zero or less, enter 0-</td>
</tr>
<tr>
<td>j</td>
<td>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?</td>
</tr>
</tbody>
</table>

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.)

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2014</th>
<th>(b) 2015</th>
<th>(c) 2016</th>
<th>(d) 2017</th>
<th>(e) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a</td>
<td>Lobbying nontaxable amount</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Lobbying ceiling amount (150% of line 2a, column(e))</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Total lobbying expenditures</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>Grassroots nontaxable amount</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>Grassroots ceiling amount (150% of line 2d, column (e))</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f</td>
<td>Grassroots lobbying expenditures</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Schedule C (Form 990 or 990-EZ) 2017
**Part II-B**

Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5788 (election under section 501(h)).

<table>
<thead>
<tr>
<th>(a)</th>
<th>(b)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

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

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? [X] 2,231
   - b. Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? [X]
   - c. Media advertisements? [X]
   - d. Mailings to members, legislators, or the public? [X]
   - e. Publications, or published or broadcast statements? [X]
   - f. Grants to other organizations for lobbying purposes? [X]
   - g. Direct contact with legislators, their staffs, government officials, or a legislative body? [X]
   - h. Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? [X]
   - i. Other activities? [x] 2,231.

Total, Add lines 1c through 1i

2. Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? [X]
   - a. If "Yes," enter the amount of any tax incurred under section 4912 [X]
   - b. If "Yes," enter the amount of any tax incurred by organization managers under section 4912 [X]

3. Did the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? [X]

**Part III-A**

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

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

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 campaign activity 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."

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

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).
   - a. Current year [2a]
   - b. Carryover from last year [2b]
   - c. Total [2c]

3. Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues [3]

4. If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? [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.

**PART II-B, LINE 1, LOBBYING ACTIVITIES:**

LOBBYING EXPENSE PAID TO THE OHIO ALLIANCE OF YMCAS.
### 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.

<table>
<thead>
<tr>
<th></th>
<th>(a) Donor advised funds</th>
<th>(b) Funds and other accounts</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total number at end of year</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Aggregate value of contributions to (during year)</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Aggregate value of grants from (during year)</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Aggregate value at end of year</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>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?</td>
<td>Yes</td>
</tr>
<tr>
<td>6</td>
<td>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?</td>
<td>Yes</td>
</tr>
</tbody>
</table>

### 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 a historically important land area
   - 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.

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

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.

1. 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.

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:

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>a</td>
<td>Revenue included on Form 990, Part VIII, line 1</td>
</tr>
<tr>
<td>b</td>
<td>Assets included in Form 990, Part X</td>
</tr>
</tbody>
</table>
**Part III** Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets

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:

<table>
<thead>
<tr>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1c</td>
</tr>
<tr>
<td>1d</td>
</tr>
<tr>
<td>1e</td>
</tr>
<tr>
<td>1f</td>
</tr>
</tbody>
</table>

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 on Part XIII.

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

1a Beginning of year balance

<table>
<thead>
<tr>
<th>(a) Current year</th>
<th>(b) Prior year</th>
<th>(c) Two years back</th>
<th>(d) Three years back</th>
<th>(e) Four years back</th>
</tr>
</thead>
<tbody>
<tr>
<td>64,862.</td>
<td>68,231.</td>
<td>67,900.</td>
<td>67,619.</td>
<td>67,200.</td>
</tr>
</tbody>
</table>

b Contributions

c Net investment earnings, gains, and losses

112. 331. 281. 419.

d Grants or scholarships

3,481.

e Other expenditures for facilities and programs

f Administrative expenses

<table>
<thead>
<tr>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>65,507.</td>
</tr>
</tbody>
</table>

1 End of year balance

<table>
<thead>
<tr>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>65,507.</td>
</tr>
</tbody>
</table>

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment [ ] 0.00 %

b Permanent endowment [ ] 100.00 %

c Temporarily restricted endowment [ ] 0.00 %

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:

(i) unrelated organizations [ ] Yes [ ] No

(ii) related organizations [ ] Yes [ ] No

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? [ ] Yes [ ] No

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.

<table>
<thead>
<tr>
<th>Description of property</th>
<th>(a) Cost or other basis (investment)</th>
<th>(b) Cost or other basis (other)</th>
<th>(c) Accumulated depreciation</th>
<th>(d) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Land</td>
<td>144,238.</td>
<td>1,555,881.</td>
<td>1,700,119.</td>
<td></td>
</tr>
<tr>
<td>b Buildings</td>
<td>1,098,960.</td>
<td>29,417,560.</td>
<td>15,303,784.</td>
<td>15,212,736.</td>
</tr>
<tr>
<td>c Leasehold improvements</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Equipment</td>
<td>3,788,066.</td>
<td>2,559,619.</td>
<td>1,228,447.</td>
<td></td>
</tr>
<tr>
<td>e Other</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total: Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) [ ] 18,141,302.
### 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.

<table>
<thead>
<tr>
<th>Description of security or category (including name of security)</th>
<th>Book value</th>
<th>Method of valuation: Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Financial derivatives</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Closely-held equity interests</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) Other</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(a) (b) (c)

| (A)                                                                 |            |                                                     |
| (B)                                                                 |            |                                                     |
| (C)                                                                 |            |                                                     |
| (D)                                                                 |            |                                                     |
| (E)                                                                 |            |                                                     |
| (F)                                                                 |            |                                                     |
| (G)                                                                 |            |                                                     |
| (H)                                                                 |            |                                                     |

**Total.** (Col. (b) must equal Form 990, Part X, col. (B) line 12.)

### Part VIII Investments - Program Related.

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

<table>
<thead>
<tr>
<th>Description of investment</th>
<th>Book value</th>
<th>Method of valuation: Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
<td></td>
</tr>
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<tr>
<td>(8)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Total.** (Col. (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.

<table>
<thead>
<tr>
<th>Description</th>
<th>Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
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<td>(7)</td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
</tr>
</tbody>
</table>

**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.

<table>
<thead>
<tr>
<th>Description of liability</th>
<th>Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Federal income taxes</td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
</tr>
<tr>
<td>(5)</td>
<td></td>
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<tr>
<td>(6)</td>
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<tr>
<td>(7)</td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
</tr>
</tbody>
</table>

**Total.** (Column (b) must equal Form 990, Part X, col. (B) line 25.)

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. [X]
### 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.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue, gains, and other support per audited financial statements</td>
</tr>
<tr>
<td>2</td>
<td>Amounts included on line 1 but not on Form 990, Part VIII, line 12:</td>
</tr>
<tr>
<td>a</td>
<td>Net unrealized gains (losses) on investments</td>
</tr>
<tr>
<td>b</td>
<td>Donated services and use of facilities</td>
</tr>
<tr>
<td>c</td>
<td>Recoveries of prior year grants</td>
</tr>
<tr>
<td>d</td>
<td>Other (Describe in Part XIII.)</td>
</tr>
<tr>
<td>e</td>
<td>Add lines 2a through 2d</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1</td>
</tr>
<tr>
<td>4</td>
<td>Amounts included on Form 990, Part VIII, line 12, but not on line 1:</td>
</tr>
<tr>
<td>a</td>
<td>Investment expenses not included on Form 990, Part VIII, line 7b</td>
</tr>
<tr>
<td>b</td>
<td>Other (Describe in Part XIII.)</td>
</tr>
<tr>
<td>c</td>
<td>Add lines 4a and 4b</td>
</tr>
<tr>
<td>5</td>
<td>Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)</td>
</tr>
</tbody>
</table>

### 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.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total expenses and losses per audited financial statements</td>
</tr>
<tr>
<td>2</td>
<td>Amounts included on line 1 but not on Form 990, Part IX, line 25:</td>
</tr>
<tr>
<td>a</td>
<td>Donated services and use of facilities</td>
</tr>
<tr>
<td>b</td>
<td>Prior year adjustments</td>
</tr>
<tr>
<td>c</td>
<td>Other losses</td>
</tr>
<tr>
<td>d</td>
<td>Other (Describe in Part XIII.)</td>
</tr>
<tr>
<td>e</td>
<td>Add lines 2a through 2d</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1</td>
</tr>
<tr>
<td>4</td>
<td>Amounts included on Form 990, Part IX, line 25, but not on line 1:</td>
</tr>
<tr>
<td>a</td>
<td>Investment expenses not included on Form 990, Part VIII, line 7b</td>
</tr>
<tr>
<td>b</td>
<td>Other (Describe in Part XIII.)</td>
</tr>
<tr>
<td>c</td>
<td>Add lines 4a and 4b</td>
</tr>
<tr>
<td>5</td>
<td>Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)</td>
</tr>
</tbody>
</table>

### 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.

**PART V, LINE 4:**

THE ASSOCIATION'S ENDOWMENT CONSISTS OF A DONOR-RESTRICTED FUND CREATED TO MAINTAIN AND IMPROVE THE ASSOCIATION'S NATURE TRAIL.

**PART X, LINE 2:**

INCOME TAX FOOTNOTE FROM THE DECEMBER 31, 2017 AUDITED FINANCIAL STATEMENTS:

THE ASSOCIATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER CODE SECTION 501(C)(3), AND IS CLASSIFIED AS OTHER THAN A PRIVATE FOUNDATION BY THE INTERNAL REVENUE SERVICE.
Ralph J. Stolle Countryside Young Men's Christian Association of Warren County 51-0181689

THE ASSOCIATION'S FEDERAL INFORMATION RETURNS ARE NO LONGER SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE FOR YEARS BEFORE 2014.

**PART XI, LINE 2D - OTHER ADJUSTMENTS:**

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Special Events Expense Reported with Revenue</td>
<td>58,092</td>
</tr>
<tr>
<td>COGS Reported with Revenue</td>
<td>28,672</td>
</tr>
<tr>
<td>Rental Expenses Reported with Revenue</td>
<td>80,000</td>
</tr>
<tr>
<td>Loss on Disposal of Assets</td>
<td>95,922</td>
</tr>
<tr>
<td>Loss on Lease Amendment</td>
<td>566,983</td>
</tr>
<tr>
<td><strong>Total to Schedule D, Part XI, Line 2D</strong></td>
<td><strong>829,669</strong></td>
</tr>
</tbody>
</table>

**PART XII, LINE 2D - OTHER ADJUSTMENTS:**

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Special Events Expense Reported with Revenue</td>
<td>58,092</td>
</tr>
<tr>
<td>COGS Reported with Revenue</td>
<td>28,672</td>
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<td>80,000</td>
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<tr>
<td>Loss on Disposal of Assets</td>
<td>95,922</td>
</tr>
<tr>
<td>Loss on Lease Amendment</td>
<td>566,983</td>
</tr>
<tr>
<td><strong>Total to Schedule D, Part XII, Line 2D</strong></td>
<td><strong>829,669</strong></td>
</tr>
</tbody>
</table>
Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1. Indicate whether the organization raised funds through any of the following activities. Check all that apply.
   a. Mail solicitations
   b. Internet and email solicitations
   c. Phone solicitations
   d. In-person solicitations

2. Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  
   a. Yes  
   b. No

3. If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization.

<table>
<thead>
<tr>
<th>(i) Name and address of individual or entity (fundraiser)</th>
<th>(ii) Activity</th>
<th>(iii) Did fundraiser have custody or control of contributions?</th>
<th>(iv) Gross receipts from activity</th>
<th>(v) Amount paid to (or retained by) fundraiser listed in col. (i)</th>
<th>(vi) Amount paid to (or retained by) organization</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tr>
</tbody>
</table>

Total

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

<table>
<thead>
<tr>
<th></th>
<th></th>
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<th></th>
<th></th>
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</thead>
<tbody>
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</tr>
</tbody>
</table>

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule G (Form 990 or 990-EZ) 2017

19030710 402777 776-133-7 2017.04000 RALPH J. STOLLE COUNTRYSIDE 776-1I01
### 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.

<table>
<thead>
<tr>
<th>Event Type</th>
<th>Earnings</th>
<th>Expenses</th>
<th>Total Events</th>
</tr>
</thead>
<tbody>
<tr>
<td>GALA</td>
<td>124,169</td>
<td>34,333</td>
<td>190,864</td>
</tr>
<tr>
<td>GOLF OUTING</td>
<td>34,917</td>
<td>9,900</td>
<td>44,817</td>
</tr>
<tr>
<td></td>
<td>89,252</td>
<td>24,433</td>
<td>146,047</td>
</tr>
</tbody>
</table>

### 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.

<table>
<thead>
<tr>
<th>Earnings</th>
<th>Expenses</th>
<th>Total Gaming</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bingo</td>
<td>124,169</td>
<td>34,333</td>
</tr>
<tr>
<td>Pull tabs/progressive bingo</td>
<td>34,917</td>
<td>9,900</td>
</tr>
<tr>
<td>Other gaming</td>
<td>89,252</td>
<td>24,433</td>
</tr>
<tr>
<td>190,864</td>
<td>44,817</td>
<td>146,047</td>
</tr>
</tbody>
</table>

### Additional Information
- Enter the state(s) in which the organization conducts gaming activities:
- Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?

**Schedule G (Form 990 or 990-EZ) 2017**

RALPH J. STOLLE COUNTRYSIDE YOUNG MEN'S CHRISTIAN ASSOCIATION OF WARREN COUNTY 51-0181689
Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No

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

Indicate the percentage of gaming activity conducted in:

| a. The organization's facility | 13a % |
| b. An outside facility | 13b % |

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

Name ►
Address ►

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

If "Yes," enter the amount of gaming revenue received by the organization ► $ and the amount of gaming revenue retained by the third party ► $.

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

Name ►
Address ►

Gaming manager information:

Name ►
Gaming manager compensation ► $
Description of services provided ►

☐ Director/officer ☐ Employee ☐ Independent contractor

Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization’s own exempt activities during the tax year ► $.

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.
### General Information on Grants and Assistance

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?</td>
</tr>
<tr>
<td>2</td>
<td>Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.</td>
</tr>
</tbody>
</table>

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

<table>
<thead>
<tr>
<th>1 (a)</th>
<th>Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tr>
</tbody>
</table>

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

3 Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**Part III Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

### Schedule I (Form 990) (2017)

Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Type of grant or assistance</th>
<th>(b) Number of recipients</th>
<th>(c) Amount of cash grant</th>
<th>(d) Amount of non-cash assistance</th>
<th>(e) Method of valuation (book, FMV, appraisal, other)</th>
<th>(f) Description of noncash assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>SCHOLARSHIPS FOR MEMBERSHIPS TO YMCA - APPROXIMATELY 690 SCHOLARSHIPS RANGING IN AMOUNT FROM $50 TO $550 WERE AWARDED ON A SLIDING SCALE BASED ON INCOME LEVELS</td>
<td>690</td>
<td>0</td>
<td>127,717</td>
<td>MEMBERSHIPS ARE VALUED AT A COST/MEMBER RATE. MEMBERSHIP RATES ARE DETERMINED BY SLIDING SCALE (DISCOUNTED)</td>
<td>MEMBERSHIPS ARE VALUED AT A COST/MEMBER RATE. MEMBERSHIP RATES ARE DETERMINED BY SLIDING SCALE (DISCOUNTED)</td>
</tr>
<tr>
<td>PROGRAM SCHOLARSHIPS</td>
<td>366</td>
<td>0</td>
<td>121,114</td>
<td>MEMBERSHIPS ARE VALUED AT A COST/MEMBER RATE. MEMBERSHIP RATES ARE DETERMINED BY SLIDING SCALE (DISCOUNTED)</td>
<td>MEMBERSHIPS ARE VALUED AT A COST/MEMBER RATE. MEMBERSHIP RATES ARE DETERMINED BY SLIDING SCALE (DISCOUNTED)</td>
</tr>
<tr>
<td>CHILDCARE SCHOLARSHIPS</td>
<td>79</td>
<td>0</td>
<td>60,000</td>
<td>MEMBERSHIPS ARE VALUED AT A COST/MEMBER RATE. MEMBERSHIP RATES ARE DETERMINED BY SLIDING SCALE (DISCOUNTED)</td>
<td>MEMBERSHIPS ARE VALUED AT A COST/MEMBER RATE. MEMBERSHIP RATES ARE DETERMINED BY SLIDING SCALE (DISCOUNTED)</td>
</tr>
</tbody>
</table>

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

**PART I, LINE 2:**

**ANNUAL MEMBERSHIPS IN THE ORGANIZATION OR FEES FOR SPECIFIC WELLNESS PROGRAMS AND CHILD CARE SCHOLARSHIPS ARE PROVIDED AT EITHER NO COST OR AT A REDUCED COST TO INDIVIDUALS MEETING INCOME LEVEL ELIGIBILITY GUIDELINES. COUNTRYSIDE YMCA MAINTAINS RECORDS DOCUMENTING THE RECIPIENTS OF THESE BENEFITS, TERMED SCHOLARSHIPS, AND SUPPORTING ELIGIBILITY INFORMATION.**
**Part I Questions Regarding Compensation**

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1a</strong> 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.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>First-class or charter travel</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Travel for companions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tax indemnification and gross-up payments</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Discretionary spending account</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Housing allowance or residence for personal use</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Payments for business use of personal residence</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Health or social club dues or initiation fees</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Personal services (such as, maid, chauffeur, chef)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>1b</strong> If any of the boxes on 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 &quot;No,&quot; complete Part III to explain</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td><strong>2</strong> Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td><strong>3</strong> 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.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Compensation committee</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Independent compensation consultant</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Form 990 of other organizations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Written employment contract</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Compensation survey or study</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Approval by the board or compensation committee</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td><strong>4</strong> 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:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Receive a severance payment or change-of-control payment?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Participate in, or receive payment from, an equity-based compensation arrangement?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If &quot;Yes&quot; to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>5</strong> 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:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a The organization?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>b Any related organization?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td><strong>6</strong> 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:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a The organization?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>b Any related organization?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td><strong>7</strong> For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If &quot;Yes,&quot; describe in Part III</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>8</strong> 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 &quot;Yes,&quot; describe in Part III</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>9</strong> If &quot;Yes&quot; on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

**Schedule J (Form 990) 2017**

**OMB No. 1545-0047**

**Department of the Treasury Internal Revenue Service**

**732111 10-17-17**
**Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is needed.

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

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

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Breakdown of W-2 and/or 1099-MISC compensation</th>
<th>(C) Retirement and other deferred compensation</th>
<th>(D) Nontaxable benefits</th>
<th>(E) Total of columns (B)(i)-(D)</th>
<th>(F) Compensation in column (B) reported as deferred on prior Form 990</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(i) Base compensation</td>
<td>(ii) Bonus &amp; incentive compensation</td>
<td>(iii) Other reportable compensation</td>
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<td>(i)</td>
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</tr>
</tbody>
</table>

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**Schedule J (Form 990) 2017**

**Ralph J. Stolle Countryside Young Men's Christian Association of Warren County**

**51-0181689**
PART I, LINE 1A:
MIKE CARROLL RECEIVES A COMPLIMENTARY YMCA MEMBERSHIP, AS DO ALL FULL TIME YMCA EMPLOYEES.

PART I, LINE 1B:
UNDER IRC SECTION 132(B) THE VALUE OF AN EMPLOYEE'S YMCA MEMBERSHIP IS EXCLUDED FROM WAGES AS A "NO-ADDITIONAL-COST SERVICE."
## Supplemental Information on Tax-Exempt Bonds

**Name of the organization**: RALPH J. STOLLE COUNTRYSIDE YOUNG MEN'S CHRISTIAN ASSOCIATION OF WARREN COUNTY

### Part I — Bond Issues

<table>
<thead>
<tr>
<th>(a) Issuer name</th>
<th>(b) Issuer EIN</th>
<th>(c) CUSIP #</th>
<th>(d) Date issued</th>
<th>(e) Issue price</th>
<th>(f) Description of purpose</th>
<th>(g) Defeased</th>
<th>(h) On behalf of issuer</th>
<th>(i) Pooled financing</th>
</tr>
</thead>
<tbody>
<tr>
<td>WARREN COUNTY PORT AUTHORITY</td>
<td>26-0432442935163731</td>
<td>06/30/14</td>
<td>8,800,000.</td>
<td>SERIES 2009 BONDS</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

### Part II — Proceeds

<table>
<thead>
<tr>
<th>1 Amount of bonds retired</th>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1,131,791.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Amount of bonds legally defeased</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Total proceeds of issue</td>
<td>7,696,012.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Gross proceeds in reserve funds</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>5 Capitalized interest from proceeds</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Proceeds in refunding escrows</td>
<td></td>
<td></td>
<td></td>
<td>68,385.</td>
</tr>
<tr>
<td>7 Issuance costs from proceeds</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Credit enhancement from proceeds</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 Working capital expenditures from proceeds</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 Capital expenditures from proceeds</td>
<td></td>
<td></td>
<td></td>
<td>7,627,627.</td>
</tr>
<tr>
<td>11 Other spent proceeds</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>12 Other unspent proceeds</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13 Year of substantial completion</td>
<td></td>
<td>2016</td>
<td></td>
<td></td>
</tr>
<tr>
<td>14 Were the bonds issued as part of a current refunding issue?</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>15 Were the bonds issued as part of an advance refunding issue?</td>
<td></td>
<td></td>
<td></td>
<td>Yes</td>
</tr>
<tr>
<td>16 Has the final allocation of proceeds been made?</td>
<td></td>
<td></td>
<td></td>
<td>Yes</td>
</tr>
<tr>
<td>17 Does the organization maintain adequate books and records to support the final allocation of proceeds?</td>
<td></td>
<td></td>
<td></td>
<td>Yes</td>
</tr>
</tbody>
</table>

### Part III — Private Business Use

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

---

For Paperwork Reduction Act Notice, see the Instructions for Form 990.44
### Part III Private Business Use (Continued)

<table>
<thead>
<tr>
<th></th>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
</tr>
</thead>
<tbody>
<tr>
<td>3a</td>
<td>Are there any management or service contracts that may result in private business use of bond-financed property?</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>If &quot;Yes&quot; 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?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Are there any research agreements that may result in private business use of bond-financed property?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>If &quot;Yes&quot; to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>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</td>
<td>%</td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td>5</td>
<td>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</td>
<td>%</td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td>6</td>
<td>Total of lines 4 and 5</td>
<td>%</td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td>7</td>
<td>Does the bond issue meet the private security or payment test?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8a</td>
<td>Has there been a sale or disposition of any of the bond-financed property to a non-governmental person other than a 501(c)(3) organization since the bonds were issued?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>If &quot;Yes&quot; to line 8a, enter the percentage of bond-financed property sold or disposed of</td>
<td>%</td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td>c</td>
<td>If &quot;Yes&quot; to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>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?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Part IV Arbitrage

<table>
<thead>
<tr>
<th></th>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
</tr>
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<td></td>
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<tr>
<td>2</td>
<td>If &quot;No&quot; to line 1, did the following apply?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Rebate not due yet?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Exception to rebate?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>No rebate due?</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>If &quot;Yes&quot; to line 2c, provide in Part VI the date the rebate computation was performed</td>
<td></td>
<td></td>
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<tr>
<td>3</td>
<td>Is the bond issue a variable rate issue?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4a</td>
<td>Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Name of provider</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Term of hedge</td>
<td></td>
<td></td>
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<tr>
<td>d</td>
<td>Was the hedge superintegrated?</td>
<td></td>
<td></td>
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<tr>
<td>e</td>
<td>Was the hedge terminated?</td>
<td></td>
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732122 10-18-17
## Part IV Arbitrage (Continued)

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

## Part V Procedures To Undertake Corrective Action

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<th>D</th>
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<tbody>
<tr>
<td></td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
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</table>

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 isn’t available under applicable regulations? X

## Part VI Supplemental Information

Provide additional information for responses to questions on Schedule K. See instructions

### SCHEDULE K, PART I, BOND ISSUES:

(A) **ISSUER NAME:** WARREN COUNTY PORT AUTHORITY

(F) **DESCRIPTION OF PURPOSE:**

REFUNDING OF SERIES 2009 BONDS; PHASE 3 2017 BUILDING RENOVATION PROJECT

### SCHEDULE K, PART II, LINE 3

**THE TOTAL PROCEEDS FROM THE ISSUE ARE NOT IDENTICAL TO THE ISSUE PRICE BECAUSE $1,103,988 OF THE PROCEEDS WERE USED TO REFUND THE PRIOR ISSUE.**
### Part I Excess Benefit Transactions

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

<table>
<thead>
<tr>
<th>(a) Name of disqualified person</th>
<th>(b) Relationship between disqualified person and organization</th>
<th>(c) Description of transaction</th>
<th>(d) Corrected?</th>
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</thead>
<tbody>
<tr>
<td></td>
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<td>Yes</td>
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</table>

1. Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 $__________

2. Enter the amount of tax, if any, on line 2, above, reimbursed by the organization $__________

### Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

<table>
<thead>
<tr>
<th>(a) Name of interested person</th>
<th>(b) Relationship with organization</th>
<th>(c) Purpose of loan</th>
<th>(d) Loan to or from the organization? To From</th>
<th>(e) Original principal amount</th>
<th>(f) Balance due</th>
<th>(g) In default? Yes No</th>
<th>(h) Approved by board or committee? Yes No</th>
<th>(i) Written agreement? Yes No</th>
</tr>
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Total $__________

### Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

<table>
<thead>
<tr>
<th>(a) Name of interested person</th>
<th>(b) Relationship between interested person and the organization</th>
<th>(c) Amount of assistance</th>
<th>(d) Type of assistance</th>
<th>(e) Purpose of assistance</th>
</tr>
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<tbody>
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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
### Part IV Business Transactions Involving Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

<table>
<thead>
<tr>
<th>(a) Name of interested person</th>
<th>(b) Relationship between interested person and the organization</th>
<th>(c) Amount of transaction</th>
<th>(d) Description of transaction</th>
<th>(e) Sharing of organization's revenues?</th>
</tr>
</thead>
<tbody>
<tr>
<td>BRETT WILSON</td>
<td>SON OF TRUSTEE STEVE WILSON</td>
<td>29,862 YMCA EMPLOYEE</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

### Part V Supplemental Information

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

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: BRETT WILSON

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:
SON OF TRUSTEE STEVE WILSON

(C) AMOUNT OF TRANSACTION $ 29,862.

(D) DESCRIPTION OF TRANSACTION: YMCA EMPLOYEE

(E) SHARING OF ORGANIZATION REVENUES? = NO
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

ALL. THE ORGANIZATION'S AREAS OF FOCUS ARE YOUTH DEVELOPMENT, HEALTHY LIVING, & SOCIAL RESPONSIBILITY. EVERY DAY, THE Y ENSURES THAT EVERYONE, REGARDLESS OF AGE, INCOME OR BACKGROUND, HAS THE OPPORTUNITY TO LEARN, GROW, AND THRIVE. COUNTRYSIDE YMCA IS A MEMBERSHIP ASSOCIATION OF FAMILIES, MEN, WOMEN AND CHILDREN OF ALL AGES, ABILITIES, INCOME, RACES AND RELIGIONS. COUNTRYSIDE YMCA SERVES MORE THAN 24,267 PERSONS AS MEMBERS AND PROGRAM PARTICIPANTS IN A SERVICE AREA OF APPROXIMATELY 200,000 PERSONS. ANNUALLY, COUNTRYSIDE YMCA PROVIDES FINANCIAL AID THROUGH SCHOLARSHIP MEMBERSHIPS TO 700+ FAMILIES, AFFECTING APPROX 2145 INDIVIDUALS IN THE WARREN COUNTY SERVICE AREA. EACH YEAR APPROX 21 POLICY MAKING VOLUNTEERS DONATE 1,100+ HOURS VALUED AT $26,000 ($23.56 PER HOUR). IN ADDITION 2,640 INDIVIDUAL VOLUNTEERS DONATED 9,332 HOURS TO THE ORGANIZATION.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

POSITIVE USE OF LEISURE TIME. COUNTRYSIDE YMCA OPERATES AN EARLY LEARNING LITERACY PRESCHOOL PROGRAM AT TWO AREA SECTION EIGHT HOUSING COMPLEXES TO PROVIDE PRE-KINDERGARTEN EXPERIENCES TO UNDER-PRIVILEGED PRESCHOOLERS IN AN EFFORT TO BETTER PREPARE THEM FOR KINDERGARTEN. BEFORE AND AFTER SCHOOL PROGRAMS, OFFERED AT FIVE DIFFERENT LOCATIONS THROUGHOUT WARREN COUNTRY, PROVIDE A SAFE, AFFORDABLE AND ENRICHING OPPORTUNITY TO YOUTH, AND ACCOMMODATE WORKING PARENTS. OVER 660 DIFFERENT CHILDREN ARE SERVED ANNUALLY IN ALL THE CHILDCARE PROGRAMS, AND MANY OF THESE RECEIVE FINANCIAL AID BECAUSE OF AN INABILITY TO PAY.
SUMMER DAY CAMP SERVES OVER 300 CHILDREN PER DAY AND DEVELOPS SOCIAL SKILLS AND PHYSICAL ABILITIES, PROVIDES SUPERVISED OUTDOOR PLAY TIME, FOSTERS APPRECIATION OF THE ENVIRONMENT, AND EXPOSES CHILDREN TO THE ARTS. CAMPERS DEVELOP LEADERSHIP CHARACTERISTICS LIKE SELF-RELIANCE AND INDEPENDENT DECISION MAKING. ALL CAMPS ARE VALUE-BASED AND STRESS THE Y'S CORE VALUES OF CARING, RESPECT, HONESTY, RESPONSIBILITY AND FAITH. PROGRAM FINANCIAL ASSISTANCE IS MADE AVAILABLE TO THOSE IN FINANCIAL NEED.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

PHYSICAL PROGRAMS CONSIST OF YOUTH SPORTS, INCLUDING GYMNASTICS, AND SKILL CLASSES; ADULT SPORTS AND FITNESS PROGRAMS, AND A HOST OF INDIVIDUAL ACTIVITIES AND LEAGUES THAT SERVE TO ENHANCE HEALTHY LIFESTYLES, BUILD VALUES, IMPROVE FITNESS AND REDUCE STRESS.

AQUATIC PROGRAMS INCLUDE SWIM LESSONS, COMPETITIVE SWIMMING, ADAPTIVE SWIMMING FOR THOSE WITH SPECIAL NEEDS, LIFE GUARD TRAINING, SCUBA, DIVING, AND WATER FITNESS. OVER 5,212 CHILDREN A YEAR LEARN LIFE-SAVING SWIMMING SKILLS DURING SWIM LESSONS. IN ADDITION TO PROVIDING SPECIFIC SWIMMING, EXERCISE, AND WATER SAFETY SKILLS, THESE PROGRAMS PROMOTE GOOD HEALTH THROUGH REGULAR EXERCISE. THEY ALSO PROMOTE TEAMWORK, SELF-CONFIDENCE, AND LEADERSHIP.

THE ARTS AND EDUCATION PROGRAMS ENRICH THE LIVES OF 2,258 INDIVIDUALS ANNUALLY AND ALLOW OPPORTUNITIES FOR CHILDREN AND ADULTS TO PURSUE NEW INTERESTS AND DEVELOP HOBBIES. CLASSES ARE OFFERED IN DANCE, MUSIC, THEATER, ART, AND EDUCATION INCLUDING CPR, FIRST AID CERTIFICATION, FINANCIAL COURSES AND BIBLE STUDIES. YOUTH SPECIFICALLY BENEFIT FROM...
YOUTH LEADERSHIP PROGRAMS INCLUDING VENTURE CREW AND YOUTH IN GOVERNMENT.

COUNTRYSIDE YMCA PROVIDES SPECIFIC HEALTHY LIVING PROGRAMMING FOR THOSE AGES 50 AND ABOVE. THE STOLLE CENTER AT THE LEBANON BRANCH, AND THE BRANCH AT OTTERBEIN RETIREMENT COMMUNITY BOTH SERVE THE SENIOR AUDIENCE WITH FITNESS, SWIMMING, AND EDUCATIONAL PROGRAMMING TAILORED TO THE ABILITIES OF THIS AUDIENCE. EACH YEAR, OVER 2,300 MEMBERS ENJOY THESE FACILITIES AND PROGRAMS.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:
LESSONS DURING THE SCHOOL YEAR AT NO COST TO THEM OR THEIR FAMILIES.

RESPITE CARE GIVES THE PARENTS OF CHILDREN WITH SPECIAL NEEDS (40+ FAMILIES) A TIME TO GET AWAY FOR SOME REST AND FUN WHILE THEIR CHILD/CHILDREN HAVE FUN AT THE Y. THIS IS PROVIDED AT NO COST TO THE FAMILIES.

MILITARY FAMILIES RECEIVE HELP WITH MEMBERSHIP COSTS THROUGH A PARTNERSHIP WITH THE ARMED SERVICES YMCA AND THE DEPARTMENT OF DEFENSE.

COUNTRYSIDE YMCA PARTNERS WITH OTHER CHARITABLE AND COMMUNITY SERVICE ORGANIZATIONS INCLUDING: ATRIUM MEDICAL CENTER, ANTIOCH CHURCH, WARREN COUNTY EDUCATIONAL SERVICES, BOY SCOUTS OF AMERICA, LEBANON CITY SCHOOLS, WCBDD, KINGS SCHOOLS, LITTLE MIAMI SCHOOLS, CLINTON MASSIE SCHOOLS, LEBANON FIRE DEPARTMENT, LEBANON POLICE DEPARTMENT, ARTHRITIS FOUNDATION, KIWANIS OF LEBANON, NAVY SEALS, TOYS FOR TOTS, SUICIDE COALITION OF WARREN COUNTY, AREA PROGRESS COUNCIL, HISTORIC DOWNTOWN LEBANON, LEBANON ROTARY, LEBANON CHAMBER OF COMMERCE, LEBANON FOOD
Name of the organization | RALPH J. STOLLE COUNTRYSIDE YOUNG MEN'S CHRISTIAN ASSOCIATION OF WARREN COUNTY | Employer identification number | 51-0181689
---|---|---|---

PANTRY, WARREN COUNTY SHERIFF'S DEPARTMENT, SPECIAL OLYMPICS,
INTERFAITH HOSPITALITY NETWORK AND VARIOUS GROUP HOMES IN WARREN COUNTY.

FORM 990, PART VI, SECTION A, LINE 2:
TRUSTEE STEPHEN WILSON, DIRECTOR GEORGE LEASURE, DIRECTOR ERIC MEILSTRUP, AND TRUSTEE SPENCE CROPPER HAVE A BUSINESS RELATIONSHIP.

FORM 990, PART VI, SECTION A, LINE 6:
THOSE WHO PAY TO JOIN THE ASSOCIATION ARE MEMBERS. ANYONE WHO IS 18 YEARS OR OLDER IS A VOTING MEMBER.

FORM 990, PART VI, SECTION A, LINE 7A:
ANY MEMBER WHO IS 18 YEARS OF AGE IS A VOTING MEMBER OF THE ASSOCIATION.
EACH MEMBER RECEIVES ONE VOTE AND THE RESPONSIBILITIES OF THE VOTING MEMBERS ARE:

A. TO MAINTAIN THEIR MEMBERSHIP IN THE ASSOCIATION IN PROPER STATUS
B. TO AMEND THE CONSTITUTION
C. TO NOMINATE AND ELECT THE BOARD OF DIRECTORS
D. TO VOTE, AND IF ELIGIBLE AND ELECTED, TO HOLD OFFICE
E. TO COOPERATE ACTIVELY IN ACHIEVING THE PURPOSES AND PROGRAM OF THE ASSOCIATION THROUGH SERVICE ON COMMITTEES OR IN OTHER WAYS.
F. TO REPRESENT THE ASSOCIATION IN THE REGIONAL ASSEMBLY OF THE YMCA OF THE USA IF AND WHEN DULY AUTHORIZED UNDER THE STATED REQUIREMENTS OF SUCH REPRESENTATIONS.

FORM 990, PART VI, SECTION A, LINE 7B:
VOTING MEMBERS MAY AMEND THE CONSTITUTION BY THE VOTE OF TWO-THIRDS OF THE
VOTING MEMBERS PRESENT AT ANY REGULARLY CONSTITUTED MEETING OF THE
ASSOCIATION PROVIDED THE SUBSTANCE OF SUCH AMENDMENT(S) SHALL HAVE BEEN
SUBMITTED BY THE BOARD OF DIRECTORS BY MAIL TO THE VOTING MEMBERSHIP AT
LEAST 30 DAYS PRIOR TO THE MEETING CALLED FOR SUCH PURPOSE.

FORM 990, PART VI, SECTION B, LINE 11B:
ANNUALLY THE FORM 990 IS REVIEWED BY THE EXECUTIVE DIRECTOR AND CFO WHO
THEN PRESENT IT TO THE FINANCE COMMITTEE FOR APPROVAL PRIOR TO THE TIME OF
FILING FORM 990 WITH THE IRS. COPIES OF THE FORM 990 ARE MADE AVAILABLE TO
THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION B, LINE 12C:
QUESTIONNAIRES ARE SENT TO ALL OFFICERS, TRUSTEES AND KEY EMPLOYEES ON AN
ANNUAL BASIS.

FORM 990, PART VI, SECTION B, LINE 15A:
The compensation committee of the board conducts a salary comparison to
determine proper compensation for the CEO (executive director). The CEO is
evaluated on the prior year’s performance and completion of goals. The
committee’s compensation decision is documented by the board chair.

FORM 990, PART VI, SECTION C, LINE 19:
The association makes available to the public its governing documents,
conflict of interest policy and financial statements upon request.

FORM 990, PART XII, LINE 2C:
The process has not changed from prior year.
**Name of the organization**  
RALPH J. STOLLE COUNTRYSIDE YOUNG MEN'S CHRISTIAN ASSOCIATION OF WARREN COUNTY

**Employer identification number**  
51-0181689