

**Return of Organization Exempt From Income Tax**

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

Department of the Treasury  
Internal Revenue Service

The organization may have to use a copy of this return to satisfy state reporting requirements.

**A** For the 2004 calendar year, or tax year beginning **JUL 1, 2004** and ending **JUN 30, 2005**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	<b>C</b> Name of organization <b>Young Men's Christian Association of Santa Clara Valley</b>		<b>D</b> Employer identification number <b>94-1156318</b>
		Number and street (or P O box if mail is not delivered to street address) <b>1922 The Alameda, 3rd Floor</b>		Room/suite E Telephone number <b>408-298-3888</b>
		City or town, state or country, and ZIP + 4 <b>San Jose, CA 95126</b>		<b>F</b> Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify)
		• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).		<b>H and I</b> are not applicable to section 527 organizations.

**G** Website: **WWW.SCVYMCA.ORG**

**J** Organization type (check only one)  501(c) ( 3 ) (insert no)  4947(a)(1) or  527

**K** Check here  if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

**H(a)** Is this a group return for affiliates?  Yes  No  
**H(b)** If "Yes," enter number of affiliates: \_\_\_\_\_  
**H(c)** Are all affiliates included? N/A  Yes  No (If "No," attach a list.)  
**H(d)** Is this a separate return filed by an organization covered by a group ruling?  Yes  No

**I** Group Exemption Number: \_\_\_\_\_

**M** Check  if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF)

**L** Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 **32,158,354.**

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances**

<b>Revenue</b>	1	Contributions, gifts, grants, and similar amounts received:				
	a	Direct public support	1a	1,941,950.		
	b	Indirect public support	1b	122,943.		
	c	Government contributions (grants)	1c	1,672,014.		
	d	Total (add lines 1a through 1c) (cash \$ <u>3,736,907.</u> noncash \$ _____)	1d	3,736,907.		
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	15,031,110.		
	3	Membership dues and assessments	3	11,113,853.		
	4	Interest on savings and temporary cash investments	4	101,242.		
	5	Dividends and interest from securities	5	109,756.		
	6 a	Gross rents See Statement 1	6a	55,860.		
	b	Less: rental expenses	6b			
	c	Net rental income or (loss) (subtract line 6b from line 6a)	6c	55,860.		
7	Other investment income (describe _____)	7				
8 a	Gross amount from sales of assets other than inventory	(A) Securities	1,837,916.	8a		
b	Less: cost or other basis and sales expenses	(B) Other	1,888,590.	8b		
c	Gain or (loss) (attach schedule)		<50,674.>	8c		
d	Net gain or (loss) (combine line 8c, columns (A) and (B)) Stmt 2	8d	<50,674.>			
9	Special events and activities (attach schedule) If any amount is from gaming, check here <input type="checkbox"/>					
a	Gross revenue (not including \$ _____ of contributions reported on line 1a)	9a				
b	Less: direct expenses other than fundraising expenses	9b				
c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c				
10 a	Gross sales of inventory, less returns and allowances	10a	50,520.			
b	Less: cost of goods sold	10b	42,745.			
c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a) Stmt 3	10c	7,775.			
11	Other revenue (from Part VII, line 103)	11	121,190.			
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	30,227,019.			
<b>Expenses</b>	13	Program services (from line 44, column (B))	13	25,759,513.		
	14	Management and general (from line 44, column (C))	14	3,700,853.		
	15	Fundraising (from line 44, column (D))	15	380,065.		
	16	Payments to affiliates (attach schedule)	16	262,290.		
	17	Total expenses (add lines 16 and 44, column (A)) See Statement 4	17	30,102,721.		
<b>Net Assets</b>	18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	124,298.		
	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	22,168,815.		
	20	Other changes in net assets or fund balances (attach explanation) See Statement 5	20	28,312.		
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	22,321,425.		

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**Part IV Balance Sheets**

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year	(B) End of year	
Assets	45 Cash - non-interest-bearing	22,213.	45 15,427.	
	46 Savings and temporary cash investments	4,918,464.	46 4,957,660.	
	47 a Accounts receivable	47a 841,363.	833,435.	47c 799,763.
	b Less allowance for doubtful accounts	47b 41,600.		
	48 a Pledges receivable	48a 771,563.	480,116.	48c 384,671.
	b Less allowance for doubtful accounts	48b 386,892.		
	49 Grants receivable		49	
	50 Receivables from officers, directors, trustees, and key employees		50	
	51 a Other notes and loans receivable	51a		51c
	b Less allowance for doubtful accounts	51b		
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges		96,563.	53 145,804.
	54 Investments - securities	Stmnt 10 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	3,100,631.	54 2,942,708.
	55 a Investments - land, buildings, and equipment basis	55a		55c
	b Less accumulated depreciation	55b		
56 Investments - other		56		
57 a Land, buildings, and equipment basis	57a 37,369,783.	21,852,118.	57c 21,408,169.	
b Less accumulated depreciation	57b 15,961,614.			
58 Other assets (describe <input type="checkbox"/> See Statement 8 )		1,119,998.	58 1,190,351.	
59 Total assets (add lines 45 through 58) (must equal line 74)		32,423,538.	59 31,844,553.	
Liabilities	60 Accounts payable and accrued expenses	1,931,629.	60 2,109,907.	
	61 Grants payable		61	
	62 Deferred revenue	2,257,342.	62 1,803,471.	
	63 Loans from officers, directors, trustees, and key employees		63	
	64 a Tax-exempt bond liabilities		64a	
	b Mortgages and other notes payable		64b	
	65 Other liabilities (describe <input type="checkbox"/> See Statement 9 )		6,065,752.	65 5,609,750.
66 Total liabilities (add lines 60 through 65)		10,254,723.	66 9,523,128.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74			
	67 Unrestricted	20,689,413.	67 20,790,442.	
	68 Temporarily restricted	979,279.	68 997,885.	
	69 Permanently restricted	500,123.	69 533,098.	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74			
	70 Capital stock, trust principal, or current funds		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds		72	
	73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21)		22,168,815.	73 22,321,425.
	74 Total liabilities and net assets / fund balances (add lines 66 and 73)		32,423,538.	74 31,844,553.

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.



**Young Men's Christian Association of  
Santa Clara Valley**

Form 990 (2004)

94-1156318

Page 5

**Part VI Other Information**

		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76	X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.	77	X
78 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	X
b	If "Yes," has it filed a tax return on Form 990-T for this year? <span style="float:right">N/A</span>	78b	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	X
80 a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	X
b	If "Yes," enter the name of the organization <span style="float:right">and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt</span>		
81 a	Enter direct or indirect political expenditures See line 81 instructions <span style="float:right">81a   0.</span>	81b	X
b	Did the organization file Form 1120-POL for this year?		
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III) <span style="float:right">82b   N/A</span>		
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? <span style="float:right">N/A</span>	84b	
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? <span style="float:right">N/A</span>	85a	
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? <span style="float:right">N/A</span>	85b	
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year		
c	Dues, assessments, and similar amounts from members <span style="float:right">85c   N/A</span>		
d	Section 162(e) lobbying and political expenditures <span style="float:right">85d   N/A</span>		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices <span style="float:right">85e   N/A</span>		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) <span style="float:right">85f   N/A</span>		
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? <span style="float:right">N/A</span>	85g	
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? <span style="float:right">N/A</span>	85h	
86	501(c)(7) organizations. Enter a Initiation fees and capital contributions included on line 12 <span style="float:right">86a   N/A</span>		
b	Gross receipts, included on line 12, for public use of club facilities <span style="float:right">86b   N/A</span>		
87	501(c)(12) organizations. Enter a Gross income from members or shareholders <span style="float:right">87a   N/A</span>		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) <span style="float:right">87b   N/A</span>		
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	X
89 a	501(c)(3) organizations. Enter. Amount of tax imposed on the organization during the year under section 4911 <span style="float:right">0.</span> , section 4912 <span style="float:right">0.</span> , section 4955 <span style="float:right">0.</span>		
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	X
c	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 <span style="float:right">0.</span>		
d	Enter Amount of tax on line 89c, above, reimbursed by the organization <span style="float:right">0.</span>		
90 a	List the states with which a copy of this return is filed <span style="float:right">California</span>		
b	Number of employees employed in the pay period that includes March 12, 2004 <span style="float:right">90b   926</span>		
91	The books are in care of <span style="float:right">YMCA of SCV Accounting Office</span> Telephone no <span style="float:right">408-298-3888</span>		
	Located at <span style="float:right">1922 The Alameda, 3rd floor, San Jose, CA</span> ZIP + 4 <span style="float:right">95126</span>		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here <span style="float:right">92   N/A</span> and enter the amount of tax-exempt interest received or accrued during the tax year		

**Part VII Analysis of Income-Producing Activities** (See page 33 of the instructions)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue					
a Camp fees					4,573,047.
b Child care fees					7,565,835.
c Program fees					1,297,887.
d Swim fees					1,594,341.
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					11,113,853.
95 Interest on savings and temporary cash investments			14	101,242.	
96 Dividends and interest from securities			14	109,756.	
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property			16	55,860.	
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	<50,674.>	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					7,775.
103 Other revenue.					
a Miscellaneous					121,190.
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))			0.	216,184.	26,273,928.
105 Total (add line 104, columns (B), (D), and (E))					26,490,112.

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes** (See page 34 of the instructions)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
▼	See Statement 15

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See page 34 of the instructions)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts** (See page 34 of the instructions)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Yes  No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

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

Please Sign Here: Signature of officer: *[Signature]* Date: 5/15/06 Type or print name and title: DAVID G. TROSTEN, President/CEO

Paid Preparer's Use Only: Preparer's signature: *[Signature]* Date: 5/15/06 Check if self-employed:  Preparer's SSN or PTIN: Firm's name (or yours if self-employed), address, and ZIP + 4: Hood & Strong LLP, 2744 Sand Hill Road, Menlo Park, CA 94025-7019 EIN: Phone no: (650) 854-8700

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

Department of the Treasury  
Internal Revenue Service

**Organization Exempt Under Section 501(c)(3)**

(Except Private Foundation) and Section 501(e), 501(f), 501(k),  
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

**Supplementary Information-(See separate instructions.)**

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No 1545-0047

**2004**

Name of the organization **Young Men's Christian Association of Santa Clara Valley** Employer identification number **94 1156318**

**Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**

(See page 1 of the instructions. List each one. If there are none, enter "None")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
Mario Vargas 1922 The Alameda, 3rd Floor, San Jose, CA 95126	Branch Execut 40	105,506.	16,769.	126.
Cheryl Vargas 1922 The Alameda, 3rd Floor, San Jose, CA 95126	Branch Execut 40	115,314.	17,869.	100.
Barbara Cardenas 1922 The Alameda, 3rd Floor, San Jose, CA 95126	Branch Execut 40	100,793.	16,112.	175.
Maria Sparagna-Drake 1922 The Alameda, 3rd Floor, San Jose, CA 95126	Branch Execut 40	100,908.	16,202.	391.
Rick Valdez 1922 The Alameda, 3rd Floor, San Jose, CA 95126	Branch Execut 40	95,329.	15,371.	90.
Total number of other employees paid over \$50,000 ▶	26			

**Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services**

(See page 2 of the instructions. List each one (whether individuals or firms) if there are none, enter "None")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
Linda Silvius 276 N. 3rd Street #E, San Jose, CA 95112	Consulting	77,300.
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-----		
Total number of others receiving over \$50,000 for professional services ▶	0	

**Part III Statements About Activities** (See page 2 of the instructions )

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities		X
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.) See Statement 16		
a Sale, exchange, or leasing of property?		X
b Lending of money or other extension of credit?		X
c Furnishing of goods, services, or facilities?	X	
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? See Part V, Form 990	X	
e Transfer of any part of its income or assets?		X
3 a Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments) See Statement 17	X	
b Do you have a section 403(b) annuity plan for your employees?		X
4 a Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?		X
b Do you provide credit counseling, debt management, credit repair, or debt negotiation services?		X

**Part IV Reason for Non-Private Foundation Status** (See pages 3 through 6 of the instructions )

- The organization is not a private foundation because it is (Please check only ONE applicable box.)
- 5  A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
  - 6  A school Section 170(b)(1)(A)(ii). (Also complete Part V.)
  - 7  A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii)
  - 8  A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)
  - 9  A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state ▶ \_\_\_\_\_
  - 10  An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A )
  - 11a  An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A )
  - 11b  A community trust Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A.)
  - 12  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 charitable, etc., 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) (Also complete the **Support Schedule** in Part IV-A )
  - 13  An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3) )

Provide the following information about the supported organizations. (See page 5 of the instructions )

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14  An organization organized and operated to test for public safety. Section 509(a)(4) (See page 5 of the instructions )

**Young Men's Christian Association of  
Santa Clara Valley**

**Part IV-A Support Schedule** (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting.  
 Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	3,599,550.	4,081,142.	3,707,884.	2,929,794.	14,318,370.
16 Membership fees received	11183444.	11439679.	11110194.	8,696,608.	42,429,925.
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	13649919.	15049948.	16230533.	15964856.	60,895,256.
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	154,721.	168,870.	217,622.	2,926,676.	3,467,889.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets.	84,780.	85,787.	See Statement 18		170,567.
23 Total of lines 15 through 22	28672414.	30825426.	31266233.	30517934.	121282007.
24 Line 23 minus line 17	15022495.	15775478.	15035700.	14553078.	60,386,751.
25 Enter 1% of line 23	286,724.	308,254.	312,662.	305,179.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					1,207,735.
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2000 through 2003 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					0.
c Total support for section 509(a)(1) test. Enter line 24, column (e)					60,386,751.
d Add: Amounts from column (e) for lines 18 3,467,889. 19 _____ 22 170,567. 26b _____					3,638,456.
e Public support (line 26c minus line 26d total)					56,748,295.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					93.9747%
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: N/A					
(2003) (2002) (2001) (2000)					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000 (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: N/A					
(2003) (2002) (2001) (2000)					
c Add: Amounts from column (e) for lines 15 _____ 16 _____ 17 _____ 20 _____ 21 _____					N/A
d Add: Line 27a total and line 27b total					N/A
e Public support (line 27c total minus line 27d total)					N/A
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)			N/A		
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					N/A %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					N/A %
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2000 through 2003, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.					None

**Young Men's Christian Association of**

**Part V Private School Questionnaire** (See page 7 of the instructions )

N/A

**(To be completed ONLY by schools that checked the box on line 6 in Part IV)**

		Yes	No
<b>29</b>	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
<b>30</b>	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
<b>31</b>	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement )		
	_____		
	_____		
<b>32</b>	Does the organization maintain the following.		
<b>a</b>	Records indicating the racial composition of the student body, faculty, and administrative staff?		
<b>b</b>	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
<b>c</b>	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
<b>d</b>	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement )		
	_____		
<b>33</b>	Does the organization discriminate by race in any way with respect to		
<b>a</b>	Students' rights or privileges?		
<b>b</b>	Admissions policies?		
<b>c</b>	Employment of faculty or administrative staff?		
<b>d</b>	Scholarships or other financial assistance?		
<b>e</b>	Educational policies?		
<b>f</b>	Use of facilities?		
<b>g</b>	Athletic programs?		
<b>h</b>	Other extracurricular activities? If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement.)		
	_____		
	_____		
<b>34 a</b>	Does the organization receive any financial aid or assistance from a governmental agency?		
<b>b</b>	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement		
<b>35</b>	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4.05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation		

**Part VI-A Lobbying Expenditures by Electing Public Charities** (See page 9 of the instructions)  
 (To be completed ONLY by an eligible organization that filed Form 5768)

N/A

Check  a if the organization belongs to an affiliated group Check  b if you checked "a" and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
		N/A	
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
41	Lobbying nontaxable amount Enter the amount from the following table - If the amount on line 40 is -                      The lobbying nontaxable amount is - Not over \$500,000                      20% of the amount on line 40 Over \$500,000 but not over \$1,000,000                      \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,500,000                      \$175,000 plus 10% of the excess over \$1,000,000 Over \$1,500,000 but not over \$17,000,000                      \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000                      \$1,000,000	41	
42	Grassroots nontaxable amount (enter 25% of line 41)	42	
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43	
44	Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44	

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

**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 instructions for lines 45 through 50 on page 11 of the instructions)

Calendar year (or fiscal year beginning in)	Lobbying Expenditures During 4-Year Averaging Period				N/A (e) Total
	(a) 2004	(b) 2003	(c) 2002	(d) 2001	
45	Lobbying nontaxable amount				0.
46	Lobbying ceiling amount (150% of line 45(e))				0.
47	Total lobbying expenditures				0.
48	Grassroots nontaxable amount				0.
49	Grassroots ceiling amount (150% of line 48(e))				0.
50	Grassroots lobbying expenditures				0.

**Part VI-B Lobbying Activity by Nonelecting Public Charities**

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.)

N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:

- a Volunteers
- b Paid staff or management (Include compensation in expenses reported on lines c through h.)
- c Media advertisements
- d Mailings to members, legislators, or the public
- e Publications, or published or broadcast statements
- f Grants to other organizations for lobbying purposes
- g Direct contact with legislators, their staffs, government officials, or a legislative body
- h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i Total lobbying expenditures (Add lines c through h.)

Yes	No	Amount
		0.

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities



**Y-Mutual Insurance, Ltd.**  
**Statement Regarding Form 5471**  
**For the year ended December 31, 2004**

The following shareholder (member) of Y-Mutual Insurance, Ltd. ("Y-Mutual"), meeting the requirements under Regulation Section 1.6038-2(j) to file Form 5471, Schedule J, Schedule O and related statements on behalf of all eligible US shareholders, will file the aforementioned documents on behalf of all eligible US shareholders of Y-Mutual:

Shareholder filing on behalf of all  
eligible US shareholders:

YMCA of Greater Houston Area  
1600 Louisiana Street  
Houston, Texas 77002-7309

Taxpayer Identification No.:

74-1109737

Type of Return Filed:

Form 990

IRS Service Center where  
tax return is filed:

Ogden, Utah 84201-0027

Schedule I, line 6 of Form 5471 indicates that each of the shareholder's pro rata share of Y-Mutual's Subpart F income for the year ended December 31, 2004 was "None."

This statement is intended to satisfy the reporting requirements under Sections 6038 and 6046 and the related regulations as they relate to US shareholders defined under Section 953(c) and the Revenue Reconciliation Act of 1989 as it relates to US shareholders of a controlled foreign corporation.

**YMCA of SANTA CLARA VALLEY**  
**Metropolitan Board of Directors – All Non-Compensated**  
**(Various hours per week devoted to positions)**  
**94-1156318**

**OFFICERS**

Roy Bigge, Chair  
1922 The Alameda, 3<sup>rd</sup> Floor  
San Jose, CA 95126

John Pencer, Chair-Elect  
1922 The Alameda, 3<sup>rd</sup> Floor  
San Jose, CA 95126

Robert Archer, Vice Chair  
1922 The Alameda, 3<sup>rd</sup> Floor  
San Jose, CA 95126

Richard Lowenthal, Vice Chair  
1922 The Alameda, 3<sup>rd</sup> Floor  
San Jose, CA 95126

Michael D. Moul Vice Chair  
1922 The Alameda, 3<sup>rd</sup> Floor  
San Jose, CA 95126

Sharon Kreider, Treasurer  
1922 The Alameda, 3<sup>rd</sup> Floor  
San Jose, CA 95126

Lydia Tai, Asst. Treasurer  
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San Jose, CA 95126

Jane Light, Secretary  
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San Jose, CA 95126

Colleen Wilcox, Immediate Past Chair  
1922 The Alameda, 3<sup>rd</sup> Floor  
San Jose, CA 95126

Richard Alejandro, At-Large Member  
1922 The Alameda, 3<sup>rd</sup> Floor  
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Bob Lee, At-Large Member  
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Henry Manayan At-Large Member  
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San Jose, CA 95126

Phillip Sims, At-Large Member  
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San Jose, CA 95126

Jim Walker At-Large Member  
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**MEMBERS**

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Shomit Ghose  
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San Jose, CA 95126

Pat Wolfe  
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**ACTIVE LIFE MEMBERS**

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Robert Rhodes  
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George Royer  
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San Jose, CA 95126

**LIFE MEMBERS:**

Gary Burke  
1922 The Alameda, 3<sup>rd</sup> Floor  
San Jose, CA 95126

Lowell S. Clark  
1922 The Alameda, 3<sup>rd</sup> Floor  
San Jose, CA 95126

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San Jose, CA 95126

Ronald R. James  
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San Jose, CA 95126

Allen Johnson, M.D.  
1922 The Alameda, 3<sup>rd</sup> Floor  
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Marlin S. Krebs  
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Harry N. Lalor,  
1922 The Alameda, 3<sup>rd</sup> Floor  
San Jose, CA 95126

Kenneth J. Newfarmer  
1922 The Alameda, 3<sup>rd</sup> Floor  
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Ernest Renzel, Jr.  
1922 The Alameda, 3<sup>rd</sup> Floor  
San Jose, CA 95126

Donald B. Richardson, Jr.  
1922 The Alameda, 3<sup>rd</sup> Floor  
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Britton W. Saterlee  
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Dale Swanson  
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San Jose, CA 95126

Dave Tatsuno  
1922 The Alameda, 3<sup>rd</sup> Floor  
San Jose, CA 95126

**BRANCH REPRESENTATIVES**

**CENTRAL**

Jackie Rose  
1922 The Alameda, 3<sup>rd</sup> Floor  
San Jose, CA 95126

**EAST VALLEY**

Edward Barrera  
1922 The Alameda, 3<sup>rd</sup> Floor  
San Jose, CA 95126

**MT. MADONNA**

Jan Hagemann  
1922 The Alameda, 3<sup>rd</sup> Floor  
San Jose, CA 95126

**NORTHWEST**

Larry Dean  
1922 The Alameda, 3<sup>rd</sup> Floor  
San Jose, CA 95126

**SOUTHWEST**

Sharon Stranahan  
1922 The Alameda, 3<sup>rd</sup> Floor  
San Jose, CA 95126

**REDWOODS**

Tim Kohler  
1922 The Alameda, 3<sup>rd</sup> Floor  
San Jose, CA 95126

**SOUTH VALLEY**

Hilda Carpenter  
1922 The Alameda, 3<sup>rd</sup> Floor  
San Jose, CA 95126

The YMCA of Santa Clara Valley (the Association) is a California nonprofit corporation founded in 1867. The Association's mission is based upon Judeo – Christian principles. It is committed to strengthening and enriching the development of individuals and families through quality programs and services that build a healthy spirit, mind and body for all.

#### Health and Wellness

The Association's health enhancement programs help achieve the unity of personal health in spirit, mind, and body through wellness-based programs that emphasize exercise, nutrition, stress management, and health education.

The Association offers a lifelong progression of health and fitness activities, experiences, and education, including programs for children, teens, families, and older adults. Members enjoy important fitness programs, such as pre and post natal exercise, preschool movement, parent/child exercise, rock climbing, aerobics, strength training, senior fitness, Pilates, yoga, Tai Chi, kick boxing and group cycling. People with disabilities and those with chronic ailments, such as arthritis, find Association programs that are tailored to them, including arthritis aqua fitness, seated aerobics and yoga, therapeutic Pilates and therapeutic yoga.

The Association's programs are designed to attract people of all ages, all abilities, and all incomes. The Association offers a welcoming atmosphere, where new members feel comfortable and receive the support they need to lead a healthier lifestyle. Association financial assistance enables individuals with limited financial resources the opportunity to pursue a healthier lifestyle.

#### Child Care

The Association is dedicated to providing high-quality, affordable child care for pre-school and school age children living in our community. Our 33 licensed child-care centers (with capacity for over 2,150 children), 15 after school sites (with capacity for over 1,200 children) and 12 collaborations with school districts (with capacity for over 960 children) provide family-centered, value-based programs to nurture children's healthy development. Well-trained staff provides safe, affordable, high-quality care and activities so that more than 3,500 children have enriching after school time and experiences. Our staff members work as partners with parents and other caregivers, collaborating to help kids grow up healthy, happy and strong. Like all Y programs, child care and after school programs are open to all, with financial assistance available to those who qualify. Nationally, the YMCA is the largest provider of child care programs.

Youth, Teen and Camping Programs

Youth programs promote an appreciation of one's own worth and build essential developmental assets. Youth sports focus on the full and equal participation of all: every child plays in every game. YMCA youth sports programs also help to strengthen families. Parents coach teams and attend games, often with brothers and sisters, to watch kids play. Young people participating in sports build lifelong positive attitudes, healthy habits of exercise, teamwork and learn ways to have fun as adults.

Youth sports programs value cooperation over competition, fair play over winning at any cost, good feeling and good health over a good score, and building self esteem over beating the opponent. The Association knows that with this approach everyone wins—victorious in spirit, mind, and body.

Parent/Child programs such as Y Adventure-guides, that bring fathers and children together, nurture the important bond between parents and children. Association Parent/Child programs emphasize the importance of quality time spent together, and dispels the myth that family time must be expensive and hectic.

Association teen programs provide young adults with healthy, positive role models to help them develop and enhance self-esteem, build assets and good values, including, cooperation, respect for one's body, good citizenship, and a strong work ethic. Teen activities are among the most rapidly growing YMCA programs nationwide, reflecting the growing awareness that adolescents need structure and activities, especially in the after-school hours. Our Y engages teens in activities through Youth and Government, youth service clubs, Y-Achievers, Citizen School and Teen Centers, and special events.

The Association day, resident and specialty camps provide fun for kids while they make new friends, build new skills and grow in self-reliance. Many of our Association's day, resident and family camps use natural settings to teach youth about the wonders of the world around them and how they can take good care of it. All camps teach and reinforce the Y's four core values: Caring, Honesty, Respect and Responsibility, while emphasizing healthy, positive character development. Our Association serves more than 18,500 people through traditional day camps, sports, arts, and specialty day camps, as well as resident and travel camps for youth and teens, and family camps designed for the whole family.

Financial assistance is available for participation in all Association programs to qualifying individuals.

The Association generates its revenues primarily from membership and program fees, contributions, and fees and grants from government agencies.

The Association serves the Santa Clara Valley in California through its seven branches.

**YMCA of Santa Clara Valley**  
**Fiscal Year Ended 06/30/05**  
**94-1156318**

**Land, Buildings and Equipment:**

At June 30, 2005, land, buildings and equipment and accumulated depreciation and amortization were as follows:

Land	\$ 1,765,825
Land improvements	2,558,043
Buildings and improvements	26,361,265
Leasehold improvements	419,026
Furniture, equipment and vehicles	6,162,319
Construction in progress	103,305
	<hr/>
	37,369,783
Less accumulated depreciation and amortization	(15,961,614)
	<hr/>
	\$21,408,169

**Related Party Transactions during the twelve months ended June 30, 2005**

Y-Mutual Insurance, Ltd.

The Association is a participant in Y-Mutual, a mutual insurance company, which provides primary coverage for property, general liability, automobile and workers' compensation. The Association's CEO is a member of Y-Mutual's Board of Directors, serving in a non-compensatory position. The Association paid general liability and workers' compensation premiums of \$855,525 to Y-Mutual during the year.

Members of the Association Board of Directors

Certain Board members are employed by companies that provide banking (accounts on deposit, processing credit cards), legal (general services), investment (holds some investments) and other services (supplies) to the Association.

Members of branch boards of managers:

Certain members of branch boards of managers own or are employed by companies that provided architectural (\$13,470), janitorial (\$323,693), construction (\$340,824) and equestrian day camp (\$13,865) services to the branches during the year.

Officers/employees:

The Association CFO holds the CFO position for both the Association and the YMCA of the Mid-Peninsula (Mid-Pen). During the year, the Association received \$243,388 from Mid-Pen for a portion of the CFO's and the information technology staff's shared salaries and benefits, and \$50,994 for services related to billing and collections. Beginning in 2005, SCV was a sub-recipient from Mid-Pen for a federal grant.

Form 990	Rental Income	Statement	1
Kind and Location of Property		Activity Number	Gross Rental Income
Facilities Rental		1	55,860.
Total to Form 990, Part I, line 6a			55,860.

Form 990	Gain (Loss) From Publicly Traded Securities	Statement	2	
Description	Gross Sales Price	Cost or Other Basis	Expense of Sale	Net Gain or (Loss)
Publicly traded securities	1,837,916.	1,888,590.	0.	<50,674.>
To Form 990, Part I, line 8	1,837,916.	1,888,590.	0.	<50,674.>

Form 990

Income and Cost of Goods Sold  
Included on Part I, Line 10

Statement 3

Income

1. Gross receipts . . . . .	50,520	
2. Returns and allowances . . . . .		
3. Line 1 less line 2 . . . . .		50,520
4. Cost of goods sold (line 13) . . . . .	42,745	
5. Gross profit (line 3 less line 4) . . . . .		7,775

Cost of Goods Sold

6. Inventory at beginning of year . . . . .		
7. Merchandise purchased . . . . .		
8. Cost of labor . . . . .		
9. Materials and supplies . . . . .	42,745	
10. Other costs . . . . .		
11. Add lines 6 through 10 . . . . .		42,745
12. Inventory at end of year . . . . .		
13. Cost of goods sold (line 11 less line 12). . . . .		42,745



Form 990 Statement of Organization's Primary Exempt Purpose Statement 7  
Part III

Explanation

The Association's mission is based upon Judeo-Christian principles. It is committed to strengthening and enriching the development of individuals and families through quality programs and services that build a healthy spirit, mind and body for all.

Form 990 Other Assets Statement 8

<u>Description</u>	<u>Amount</u>
Certificate issue costs	158,756.
Certificate proceeds held in trust	816,647.
Deposits	214,948.
Total to Form 990, Part IV, line 58, Column B	1,190,351.

Form 990 Other Liabilities Statement 9

<u>Description</u>	<u>Amount</u>
Certificates of participation	5,455,000.
Deferred Rent	154,750.
Total to Form 990, Part IV, line 65, Column B	5,609,750.

Form 990 Other Securities Statement 10

<u>Security Description</u>	<u>Cost/FMV</u>	<u>Other Securities</u>
Equity securities	FMV	1,625,119.
Government and corporate notes and bonds	FMV	1,005,097.
Money market funds	FMV	194,786.
Mutual funds	FMV	117,706.
To Form 990, line 54, Col B		2,942,708.

Form 990	Other Revenue Included on Form 990	Statement	11
<u>Description</u>		<u>Amount</u>	
	Cost of goods sold		<42,745.>
	Investment fees		24,104.
Total to Form 990, Part IV-A			<18,641.>

Form 990	Other Expenses Included on Form 990	Statement	12
<u>Description</u>		<u>Amount</u>	
	Cost of goods sold		<42,745.>
	Investment fees		24,104.
Total to Form 990, Part IV-B			<18,641.>

Form 990	Part V - List of Officers, Directors, Trustees and Key Employees	Statement	13
----------	--	-----------	----

<u>Name and Address</u>	<u>Title and Avg Hrs/Wk</u>	<u>Compensation</u>	<u>Employee Ben Plan Contrib</u>	<u>Expense Account</u>
David Thornton 1922 The Alameda, 3rd Floor San Jose, CA 95126	President/CEO 40	221,692.	31,026.	6,691.
Pamela Von Wiegand 1922 The Alameda, 3rd Floor San Jose, CA 95126	Executive VP 40	135,637.	20,277.	715.
Robert Hermanson 1922 The Alameda, 3rd Floor San Jose, CA 95126	VP, Fund Development 40	116,222.	14,770.	498.
Kathy Cheng 1922 The Alameda, 3rd Floor San Jose, CA 95126	VP, Finance 40	180,149.	25,822.	603.
Kathy Cheng-Reimbursed by YMCA of 1922 The Alameda, 3rd Floor San Jose, CA 95126	Mid-Peninsula, VP, Finance -20	<88,273.>	<12653.>	<295.>

Janet Dale 1922 The Alameda, 3rd Floor San Jose, CA 95126	VP, Human Resources 40	100,855.	16,196.	524.
Deane Shokes 1922 The Alameda, 3rd Floor San Jose, CA 95126	VP, Operations 40	121,417.	18,730.	862.
John Remy 1922 The Alameda, 3rd Floor San Jose, CA 95126	VP, Operations 40	115,079.	17,921.	322.
Mary Hoshiko 1922 The Alameda, 3rd Floor San Jose, CA 95126	VP, Program/Comm Develpmt 40	96,083.	15,608.	142.
Non-compensated directors - Stmt A Board Members 1922 The Alameda, 3rd Floor San Jose, CA 95126	Various	0.	0.	0.
Totals Included on Form 990, Part V		<u>998,861.</u>	<u>147697.</u>	<u>10,062.</u>

Form 990 Part V - Officer Compensation from Statement 14  
Related Organizations

Officer's Name	Name and EIN of Related Organization	Compen- sation	Employee Ben Plan Contrib	Expense Account
Kathy Cheng	YMCA of the Mid-Peninsula - 94-1212140	88,273.	12,653.	295.

Form 990 Part VIII - Relationship of Activities to Statement 15  
Accomplishment of Exempt Purposes

Line	Explanation of Relationship of Activities
93A	Camp Fees - Revering nature and the fullness of God's bounty is a major program goal for the YMCA. Y camping programs are educational; they promote spiritual awareness, mental development, physical well-being, a respect for the environment, and they build developmental assets. Through a variety of activities and the use of natural surroundings, YMCA camping seeks to help participants achieve their fullest potential in spirit, mind, and body. In many instances, camping programs serve as child care for parents in the summertime, allowing them to remain gainfully employed. The program is offered on a below-cost basis to parents unable to afford the full fee.
93B	Child care fees - The main focus of all YMCA child care programs is to

foster growth and development, not only in children but also in their parents and families. These educational programs help kids develop moral and ethical behavior, self-esteem, and leadership. These programs help build the developmental assets children and youth need to thrive in today's world. Parents play an important role in policy and program decisions. For many, Y child care allow parents of the children in our programs to remain gainfully employed knowing that their children are thriving in a safe, supportive environment. For parents who cannot afford the full fee, care is provided on a below-cost basis.

- 93C Special interest classes - The YMCA offers classes and programs to special target groups such as families, teens, active older adults, and those with physical and mental disabilities. These programs help people grow as responsible members of families, give kids good role models to help them develop good values, and provide adults with social, fitness, and volunteer opportunities.
- 93D Swim school fees - YMCA aquatics programs are part of the Y's overall goal of building healthy spirit, mind, and body. In addition to providing specific swimming and water safety skills, they promote good health through regular exercise. They also promote teamwork, self-confidence, and leadership. These programs are offered at fees affordable to the community at large, with financial assistance to those who can't afford the full fee.
- 94 Membership dues and assessments - The YMCA is essentially a membership association of men, women and children of all ages, abilities, incomes, races, and religions. It is dedicated to building healthy body, mind, spirit of individuals and families. It puts Christian value into practice through programs that promote good health, strong families, youth leadership, community development, and international understanding. YMCA members have access to all programs activities, and facilities, all of which further our charitable purpose, described above in this section and in part III.
- 97b Rental - The YMCA is a non-profit, community service agency dedicated to building healthy body, mind and spirit for member individuals and families. Community spirit involves sharing resources with local agencies. This YMCA provides facility usage for neighbor non-profit agencies at nominal cost in support of the total community.
- 102 Sales to the public - Income from the sale of educational materials, equipment and other items needed by participants for effective participation in YMCA programs.
- 103 The goals of all YMCA programs and practices are to help participants
- Grow as responsible members of families and communities.
  - Recognize that everyone is a child of God and worthy of respect.
  - Understand that well-being means a healthy body, mind, and spirit.
  - Build self esteem - An appreciation of one's own worth.
  - Work for worldwide understanding.
  - Develop skills for leadership.
  - Revere nature and the fullness of God's bounty.
  - To build a healthy, asset-rich community for all children and youth.



- If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only **Part II** and check this box  **X**
- Note:** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.
- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

<b>Part II Additional (not automatic) 3-Month Extension of Time - Must file Original and One Copy.</b>		
Type or print.  File by the extended due date for filing the return. See instructions.	Name of Exempt Organization <b>Young Men's Christian Association of Santa Clara Valley</b>	Employer identification number <b>94-1156318</b>
	Number, street, and room or suite no. If a P.O. box, see instructions. <b>1922 The Alameda, 3rd Floor</b>	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>San Jose, CA 95126</b>	

Check type of return to be filed (File a separate application for each return):

- Form 990   
  Form 990-EZ   
  Form 990-T (sec. 401(a) or 408(a) trust)   
  Form 1041-A   
  Form 5227   
  Form 8870  
 Form 990-BL   
  Form 990-PF   
  Form 990-T (trust other than above)   
  Form 4720   
  Form 6069

**STOP: Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.**

- The books are in the care of **Kathy Cheng**  
Telephone No. **408-298-3888** FAX No. \_\_\_\_\_
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_. If this is for the **whole group**, check this box . If it is for **part of the group**, check this box  and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until **May 15, 2006**.

5 For calendar year \_\_\_\_\_, or other tax year beginning **JUL 1, 2004** and ending **JUN 30, 2005**.

6 If this tax year is for less than 12 months, check reason:  Initial return     Final return     Change in accounting period

7 State in detail why you need the extension  
**Additional time is necessary to gather information required to file a complete and accurate return.**

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions \$ \_\_\_\_\_

b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868 \$ \_\_\_\_\_

c **Balance Due.** Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions \$ \_\_\_\_\_ **N/A**

**Signature and Verification**

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature **[Handwritten Signature]** Title **Accountant for taxpayer** Date **2/14/06**

**Notice to Applicant - To Be Completed by the IRS**

- We have approved this application. Please attach this form to the organization's return.
- We have not approved this application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of the organization's return (including any prior extensions). This grace period is considered to be an extension of time for elections otherwise required to be made on a timely return. Please attach this form to the organization's return.
- We have not approved this application. After considering the reasons stated in item 7, we cannot grant your request for an extension of time to file. We are not granting a 10-day grace period.
- We cannot consider this application because it was filed after the extended due date of the return for which an extension was requested.
- Other \_\_\_\_\_

**EXTENSION APPROVED**  
**MAR 08 2006**  
 FIELD DIRECTOR  
 SUBMISSION PROCESSING, CGDEN

Director \_\_\_\_\_ By \_\_\_\_\_ Date \_\_\_\_\_

**Alternate Mailing Address** - Enter the address if you want the copy of this application for an additional 3-month extension returned to an address different than the one entered above.

Type or print	Name <b>Hood &amp; Strong LLP</b>
	Number and street (include suite, room, or apt. no.) or a P.O. box number <b>2744 Sand Hill Road</b>
	City or town, province or state, and country (including postal or ZIP code) <b>Menlo Park, CA 94025-7019</b>

## Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

▶ File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box
  - If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).
- Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.**

**Part I Automatic 3-Month Extension of Time - Only submit original (no copies needed)**

**Form 990-T corporations** requesting an automatic 6-month extension - check this box and complete Part I only

*All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs, and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041.*

**Electronic Filing (e-file).** Form 8868 can be filed electronically if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for corporate Form 990-T filers). However, you cannot file it electronically if you want the additional (not automatic) 3-month extension, instead you must submit the fully completed signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile).

<b>Type or print</b>	Name of Exempt Organization <b>Young Men's Christian Association of Santa Clara Valley</b>	Employer identification number <b>94-1156318</b>
File by the due date for filing your return. See instructions	Number, street, and room or suite no. If a P.O. box, see instructions. <b>1922 The Alameda, 3rd Floor</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>San Jose, CA 95126</b>	

**Check type of return to be filed (file a separate application for each return):**

- |  |   |                                    |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation)                 | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL         | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ         | <input type="checkbox"/> Form 990-T (trust other than above)      | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF         | <input type="checkbox"/> Form 1041-A                              | <input type="checkbox"/> Form 8870 |

- The books are in the care of ▶ **Kathy Cheng**  
 Telephone No. ▶ **408-298-3888** FAX No. ▶ \_\_\_\_\_
- If the organization does **not** have an office or place of business in the United States, check this box
- If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_. If this is for the **whole group**, check this box . If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension will cover.

- 1 I request an automatic 3-month (6-months for a **Form 990-T corporation**) extension of time until **February 15, 2006** to file the exempt organization return for the organization named above. The extension is for the organization's return for:
  - ▶  calendar year \_\_\_\_\_ or
  - ▶  tax year beginning **JUL 1, 2004**, and ending **JUN 30, 2005**
- 2 If this tax year is for less than 12 months, check reason:  Initial return  Final return  Change in accounting period
- 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions \_\_\_\_\_ \$
- b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit \_\_\_\_\_ \$
- c **Balance Due.** Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions \_\_\_\_\_ \$ **N/A**

**Caution.** If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form **8868** (Rev. 12-2004)