EXTENDED TO NOVEMBER 15, 2024

Return of Organization Exempt From Income Tax

Open to Public

Form 990 (2023)

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2023 calendar year, or tax year beginning and ending C Name of organization Check if applicable: D Employer identification number Address change YMCA OF KANAWHA VALLEY, INC. Name change **-***7058 Doing business as Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ 100 YMCA DRIVE 304-340-3540 ated City or town, state or province, country, and ZIP or foreign postal code 5,182,591. G Gross receipts \$ Amended CHARLESTON, WV 25311 H(a) Is this a group return Applica-F Name and address of principal officer: SARAH BOLYARD __Yes X No for subordinates? pending SAME AS C ABOVE H(b) Are all subordinates included? I Tax-exempt status: X 501(c)(3) 4947(a)(1) or 501(c) ((insert no.) If "No," attach a list. See instructions YMCAOFKV.ORG J Website: H(c) Group exemption number K Form of organization: X Corporation Trust Association Other L Year of formation: 1906 M State of legal domicile: WV Part | Summary Briefly describe the organization's mission or most significant activities: THE YMCA OF KANAWHA VALLEY IS A Activities & Governance CHARITABLE, SOCIAL SERVICE ORGANIZATION DEDICTED TO YOUTH 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) 19 19 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 287 5 Total number of individuals employed in calendar year 2023 (Part V, line 2a) 19 Total number of volunteers (estimate if necessary) 0. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 b Net unrelated business taxable income from Form 990-T, Part I, line 11 **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) 1,302,038. 700,635. Revenue 4,143,680. 4,229,666. 9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 6,054. 98,481. 108,557. 135,311. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 5,560,329. 5,164,093. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 86,076. 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 89,429. 0. 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 3,017,875. 3,257,099. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 1,784,677. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1,879,131. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 4,888,628. 5,225,659. 671,701. 19 Revenue less expenses. Subtract line 18 from line 12 -61,566. Beginning of Current Year End of Year 8,301,823. 8,032,036. 20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 2,645,929. 2,286,819. Jet / 5,655,894. 5,745,217. Net assets or fund balances. Subtract line 21 from line 20 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Sign SARAH BOLYARD, CEO Here Type or print name and title Print/Type preparer's name Preparer's signature 06/13/24 self-employed Paid MIRI D. HUNTER, CPA MIRI D. HUNTER, P01297361 Firm's EIN **-***8163 SUTTLE & STALNAKER, PLLC Preparer Firm's name Use Only Firm's address 1411 VIRGINIA ST., E, STE 100 CHARLESTON, WV 25301 Phone no. (304) 343-4126 X Yes No May the IRS discuss this return with the preparer shown above? See instructions

Forn	n 990 (2023) YMCA OF KANAWHA VALLEY,	INC.	**-***7058	Page 2
Pa	rt III Statement of Program Service Accomplishments			
	Check if Schedule O contains a response or note to any line in this P	art III		X
1	Briefly describe the organization's mission: THE YMCA OF KANAWHA VALLEY IS A CHARI' ORGANIZATION DEDICTED TO YOUTH DEVELOTESPONSIBILITY. WITH A MISSION TO PUT	PMENT, HEALTHY LI	VING AND SOCIA	L
	PRACTICE THROUGH PROGRAMS THAT BUILD A			
2	Did the organization undertake any significant program services during the		MIND AND BODI	
2	prior Form 990 or 990-EZ?		Yes [X No
•	If "Yes," describe these new services on Schedule O.		? Yes	₹
3	Did the organization cease conducting, or make significant changes in how If "Yes," describe these changes on Schedule O.	it conducts, any program services	5?Yes L	_A_ No
4	Describe the organization's program service accomplishments for each of it	te three largest program sonvices	a managered by expenses	
•	Section 501(c)(3) and 501(c)(4) organizations are required to report the amo			nd.
	revenue, if any, for each program service reported.	one of grants and anocations to of	riers, the total expenses, an	iu
4a	(Code:) (Expenses \$ 644,333 • including grants of \$	57,612.) (Rev	enue \$ 1,608,5	13.)
	SPORTS AND RECREATION- YMCA SPORTS PRO			
	SPORTMANSHIP, CHARACTER BUILDING, MOT			CA
	PHILOSOPHY AND GOALS ARE THAT EVERYON	E PLAYS AND HAS FU	JN. YOUTH SPO	RTS
	PROGRAMS HELP TO DEVELOP CHILDREN IN 1	MIND, BODY, AND SI	PIRIT. THE	
	OBJECTIVE IS TO NOT ONLY HELP YOUTH TO	BECOME BETTER AT	THLETES, BUT A	LSO
	BECOME BETTER INDIVIDUALS, THROUGH SPO	ORTMANSHIP, CHARAG	CTER BUILDING,	
	AND SOCIAL RESPONSIBILITIES. NOT EVER	RY PARTICIPANT CAI	WIN EVERY	
	CONTEST, BUT EVERY PARTICIPANT CAN BE	A WINNER. THE PI	ROGRAMS INVOLV	E
	CHILDREN FROM AGES THREE TO EIGHTEEN Y	YEARS AS WELL AS A	ADULTS OF ALL	
	AGES. YOUTH PARTICIPATED IN A WIDE VA			
	THAT INCLUDED BASKETBALL, TEEBALL, LAC			
	VOLLEYBALL, SOCCER, FLAG FOOTBALL, SUN			
4b	(Code:) (Expenses \$ 384,784 · including grants of \$ HEALTH ENHANCEMENT - THE YMCA PROMOTES		O PEOPLE OF A	LL
		JR HEALTH AND FITM		
	GEARED TOWARD IMPROVING A PERSON'S SPI			SS_
	CENTER OFFERS A WIDE VARIETY OF CARDIO			
	EQUIPMENT, WHICH ALLOWS OUR MEMBERS TO			E
	ADVANTAGE OF OUR NUMEROUS PERSONAL TRAFFITNESS CLASS OPTIONS INCLUDING BOOT		OFFER MANY	_
	YOGA, PILATES, WATER AEROBICS AND MANY			Ġ,
	POPULATION, INCLUDING SILVER SNEAKERS.			7
	WEIGHT MANAGEMENT PROGRAM, HOSTS THE A			
	A FARMER'S MARKET VENDOR HERE WEEKLY 1			
	PERIODICALLY OFFERS WELLNESS WORKSHOPS			C.
4c	1 000 007		nue \$ 1,481,2:	
	CHILD DEVELOPMENT CROSS LANES - YMCA			
	LICENSED CHILD CARE FACILITY THROUGH T	HE WV DHHR BUREAU	FOR CHILDREN	
	AND FAMILIES, DIVISION OF EARLY CARE A			
	SERVE 245 CHILDREN DAILY, AGES 6 WEEKS	TO 12 YEARS OLD.	OUR CENTER	
	OPERATES MONDAY THRU FRIDAY FROM 6:00			TAH
	IT IS OUR SOCIAL RESPONSIBILITY TO OFF	ER THE HIGHEST QU	ALITY OF CARE	
	AND EDUCATION IN ALL OF OUR YOUTH DEVE			
	DAYCARE, PRESCHOOL, KANAWHA COUNTY SCH			
	SCHOOL CARE, AND SUMMER DAY CAMPS. AL			
	EMPLOYEES RECEIVE FIVE SEPARATE BACKGR			
	TRAINING IN CHILD ABUSE AND NEGLECT PR			
	ORIENTATION PRIOR TO HIRE, ALL TEACHER	S AND/OR COUNSELC	RS MUST EITHER	3
4d	Other program services (Describe on Schedule O.)	210 999	444 600 "	
	Expenses \$ 1,285,733 • including grants of \$ 16	, 3 1 U •) (Revenue \$	111,693.)	
4e	Total program service expenses 3,403,137.			

Form 990 (2023) YMCA OF KANAWHA VALLEY, INC.
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	-		-
•	during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments other securities in Part X, line 12, that is 5% or more of its total	445		x
С	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	11b	-	
·	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in	110		
-	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			37
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	13	-	X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business.	14a		
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	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? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		_X_
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	- 1		
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19	-	X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u>X</u>
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	20b	-	
21	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
_	consists and are any occurring the real consists of and are are any			

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Part IV	Checklist	of Required	Schedules	(continued)

	and the state of t		_	_
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
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	23		X
24a	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23	1	+
	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	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
6	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		-
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	240		1
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	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	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,	20		
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):		-	300
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	28a		X
b	"Yes," complete Schedule L, Part IV A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?/f			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			77
31	contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	30		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		
	Schedule N, Part II	32		Х
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	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
25-	Part V, line 1	34	Х	x
	Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	35a		
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			77
00	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	_	_X_
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	x	
Par		30		_
	Check if Schedule O contains a response or note to any line in this Part V			
	N N		Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0	-		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	х	
332004	12-21-23		990 (2023)
			1,	/

Form 990 (2023) YMCA OF KANAWHA VALLEY, INC.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			Yes	No
2a	1 2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			
	filed for the calendar year ending with or within the year covered by this return 2a 28	7		
þ	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
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)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с		
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?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
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?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
þ	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	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 10b			
11	Section 501(c)(12) organizations. Enter:		- 4	
а	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.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	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.		-	
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
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			
	Enter the amount of reserves on hand			- 77
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	-	<u>X</u>
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	-	_
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			v
	excess parachute payment(s) during the year?	15	-	<u>X</u>
46	If "Yes," see the instructions and file Form 4720, Schedule N.			37
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		<u>X</u>
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities	_		
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	ction A. Governing Body and Management			
	91 19		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year1	9		
	If there are material differences in voting rights among members of the governing body, or if the governing	138		-
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent	9		
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?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		Х
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?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
0			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	Х	
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?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16 a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sect	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3	s only) availa	ble
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website X Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, ar	d finar	ncial	
	statements available to the public during the tax year.			
	State the name, address, and telephone number of the person who possesses the organization's books and records			
	SARAH BOLYARD - 304-340-3540			
	100 YMCA DRIVE, CHARLESTON, WV 25311			

Form 990 (2023) YMCA OF KANAWHA VALLEY, INC. **-** [Part VII] Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week	Position (do not check more than one box, unless person is both an officer and a director/trustee)					one h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key emplayee	Highest compensated employee	Former	the organization (W-2/1099·MISC/ 1099·NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) SARAH BOLYARD PRESIDENT & CEO	40.00			X				129,288.	0.	12,923.
(2) ERIN DYDLAND	40.00			Λ				125,200.	0.	12,925.
COO	1000			х				73,716.	0.	17,537.
(3) MATT BONAR	1.00									,
DIRECTOR		X						0.	0.	0.
(4) WILLIAM "WILL" H. ROBINSON III	1.00									
CHAIR		X		Х				0.	0.	0.
(5) BARBARA BUCK	1.00									
DIRECTOR	1 00	Х						0.	0.	0.
(6) DANIELLE WALTZ	1.00									
DIRECTOR	1 00	Х			_		_	0.	0.	0.
(7) MARK GRIGSBY	1.00	.,						0.		0
(8) BISHOP WAYNE CROZIER	1.00	Х	-	-	_			0.	0.	0.
DIRECTOR	1.00	x						0.	0.	0.
(9) BRADY CAMPBELL	1.00	Λ						0.	0.	0.
DIRECTOR	1.00	x						0.	0.	0.
(10) TREY JONES	1.00		\neg							
DIRECTOR		x						0.	0.	0.
(11) TOM WILLIAMS	1.00		\neg							
DIRECTOR		x						0.	0.	0.
(12) MATT SPANGLER	1.00									
SECRETARY		X		Х				0.	0.	0.
(13) J. DAVID MILLS	1.00									
TREASURER		X		X				0.	0.	0.
(14) BRENDA MORRIS	1.00									
DIRECTOR		Х						0.	0.	0.
(15) BRADLEY HARRIS	1.00								-	
DIRECTOR	1 00	Х						0.	0.	0.
(16) REBECCA MCPHAIL	1.00			_				_		_
CHAIR ELECT	1 00	Х	_	X.			_	0.	0.	0.
(17) ALYSSA HILL	1.00	, l						_	_	0
DIRECTOR		Х						0.	0.	0.

Form **990** (2023)

Form 990 (2023) IMCA OF					_	_	NC			/	050		age
Part VII Section A. Officers, Directors, Trus		ploy	/ees			ighe	st C		es (continued)				
(A) Name and title	(B) Average hours per week	box	not c k, unle	Pos heck ss pe	more erson	than	th an	(D) Reportable compensation from	(E) Reportable compensatio from related	n	am	(F) timate nount other	of
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organization (W-2/1099-MIS 1099-NEC)	s	com fro orga and	pensa om th anizat d relat anizati	ation e tion ted
(18) BOB PEPPER DIRECTOR	1.00	х						0.		0.			0
(19) CAROL HAMILTON DIRECTOR	1.00	х		П				0.		0.			0
(20) JULIE MARGOLIS	1.00	X						0.					
C21) CINDA HEWITT	1.00			H						0.			0 .
DIRECTOR		X						0.		0.			0 .
			H										
			\square										
								000000					
1b Subtotal								203,004.		0.),4	0.
d Total (add lines 1b and 1c)								203,004. eceived more than \$100	.000 of reportable	0. e	30),4	60.
compensation from the organization												Yes	No
3 Did the organization list any former officer,												103	
line 1a? If "Yes," complete Schedule J for so 4 For any individual listed on line 1a, is the su											3	. 1	Х
and related organizations greater than \$150Did any person listed on line 1a receive or a											4		X
rendered to the organization? If "Yes," com								Sa organization of indivi			5	-	Х
Section B. Independent Contractors 1 Complete this table for your five highest contractors	mpensated inc			nt c	ontr	acto	rs th	nat received more than	\$100,000 of com	pens	ation fr	om	
the organization. Report compensation for t	the calendar ye	ear e	<u>∍ndir</u>	ng w	ith c	or wi	ithin	the organization's tax y	ear.		(C)		
Name and business	address	NC	ONE	1			-	Description of so	ervices	C	ompen		1
		_		_			_						
2 Total number of independent contractors (in	ncluding but no	ot lin	nitec	to 1	thos	e lis	ted	above) who received m	ore than				

\$100,000 of compensation from the organization

0

-*7058 YMCA OF KANAWHA VALLEY, INC. Page 9 Form 990 (2023) Part VIII Statement of Revenue (B) Check if Schedule O contains a response or note to any line in this Part VIII (A) Revenue excluded Total revenue Related or exempt Unrelated function revenue business revenue from tax under sections 512 - 514 Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a **b** Membership dues 1b c Fundraising events 1c d Related organizations 1d 365,000. e Government grants (contributions) 1e f All other contributions, gifts, grants, and 335,635. similar amounts not included above ... 1f g Noncash contributions included in lines 1a-1f 1g \$ 700,635 h Total. Add lines 1a-1f **Business Code** 1,608,513.1,608,513. 1,481,217.1,481,217. 2 a MEMBERSHIP DUES 900099 Program Service Revenue b CONTRACTED SERVICES 900099 c PROGRAM FEES 900099 1,139,936.1,139,936. d f All other program service revenue 4,229,666. g Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) 111,906. 111,906. 4 Income from investment of tax-exempt bond proceeds Royalties (i) Real (ii) Personal 74,932. 6 a Gross rents 6a b Less: rental expenses ... 0. 74,932. c Rental income or (loss) 74,932. 74,932. d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (ii) Other assets other than inventory 7a **b** Less: cost or other basis Revenue and sales expenses 13,425. 7b 13,425. c Gain or (loss) 7c -13,425. -13,425. d Net gain or (loss) Other 8 a Gross income from fundraising events (not including \$ contributions reported on line 1c). See 10,418. Part IV, line 18 8a 5,073. b Less: direct expenses 8b 5,345. 5,345. c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 9a b Less: direct expenses 9b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns 1,557. and allowances b Less: cost of goods sold 1,557. 1,557. c Net income or (loss) from sales of inventory **Business Code** Miscellaneous Revenue 11 a MISCELLANEOUS 900099 48,629. 48,629. b VENDING/SNACK MACHINES 900099 4,848. 4,848. С d All other revenue 53,477. e Total. Add lines 11a-11d

Total revenue. See instructions

122,099.

5,164,093.4,341,359.

Form 990 (2023) YMCA OF KANAWHA VALLEY, INC. 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).

	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	this Part IX(B) Program service	(C) Management and	(D) Fundraising
1	Grants and other assistance to domestic organizations		expenses	general expenses	expenses
٠	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
_	individuals. See Part IV, line 22	89,429.	89,429.		
3	Grants and other assistance to foreign				
_	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16			1 1 1 1 2 1 1	
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	233,464.	149,087.	77,627.	6,750
6	Compensation not included above to disqualified				•
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	2,499,040.	1,595,853.	830,931.	72,256
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	109,399.	50,947.	53,776.	4,676
9	Other employee benefits	181,643.	64,168.	108,078.	9,397
10	Payroll taxes	233,553.	147,217.	79,429.	6,907
11	Fees for services (nonemployees):				<u> </u>
а	Management				
b	Legal				
	Accounting	29,050.		29,050.	
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
•	column (A), amount, list line 11g expenses on Sch O.)	379,696.	166,306.	193,995.	19,395.
12	Advertising and promotion	5,038.		4,635.	403.
13	Office expenses	23,896.	13,930.	8,969.	997.
14	Information technology				
15	Royalties				
16	Occupancy	355,294.	284,036.	66,270.	4,988.
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	78,027.	25,635.	48,200.	4,192.
20	Interest	84,655.	71,960.	12,695.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	391,673.	316,900.	69,823.	4,950.
23	Insurance	164,132.	139,510.	24,622.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
а	SUPPLIES	237,341.	214,863.	20,680.	1,798.
b	ORGANIZATIONAL DUES	99,630.	48,199.	47,316.	4,115.
c	REPAIRS AND MAINTENANCE	30,699.	25,097.	5,210.	392.
d		20,000		0,2201	3,21
	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	5,225,659.	3,403,137.	1,681,306.	141,216.
26	Joint costs. Complete this line only if the organization	, ==, ==,		,	
_	reported in column (B) joint costs from a combined				
	,				
	educational campaign and fundraising solicitation.	I/	1	1	

Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year End of year 1,676,330. 1,987,020. Cash - non-interest-bearing 1 14,256. 2 2 Savings and temporary cash investments 592,718. 56,106. Pledges and grants receivable, net 3 149,633. 136,032. Accounts receivable, net Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% 5 controlled entity or family member of any of these persons Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 7 Notes and loans receivable, net Inventories for sale or use 8 76,660. 93,756. Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment: cost or other 12,431,930. basis. Complete Part VI of Schedule D ______ 10a 7,931,364. b Less: accumulated depreciation 10b 4,680,503. 4,500,566. 10c Investments - publicly traded securities 11 Investments - other securities. See Part IV, line 11 12 12 Investments - program-related. See Part IV, line 11 13 13 14 14 Intangible assets 1,111,723. 1,258,556. Other assets. See Part IV, line 11 15 15 8,301,823. 8,032,036. Total assets. Add lines 1 through 15 (must equal line 33) 16 16 344,847. 170,830. 17 Accounts payable and accrued expenses 17 Grants payable 18 18 75,084. 71,583. Deferred revenue 19 19 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to any current or former officer, director, _iabilities trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 2,177,105. 2,011,877. 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 48,893. 32,529. 25 of Schedule D 2,645,929. 2,286,819. 26 Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here Net Assets or Fund Balances and complete lines 27, 28, 32, and 33. 4,556,139. 4,494,573. 27 Net assets without donor restrictions 27 1,099,755. 1,250,644. Net assets with donor restrictions 28 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. Capital stock or trust principal, or current funds 29 29 30 Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds 31 5,655,894. 5,745,217. Total net assets or fund balances 32 32 8,032,036. 8,301,823. 33 Total liabilities and net assets/fund balances

Form 990 (2023)

review, or compilation of its financial statements and selection of an independent accountant?

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.

Uniform Guidance, 2 C.F.R. Part 200, Subpart F?

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits

X

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