Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047 2010

> Open to Public Inspection

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

			2010 cale	endar year, or tax year beginnir	ngJULY 01	, 201	10, and e	ending	JUNE	30		, 20 11
	heck	cif able:		C Name of organization YMC	A of San Diego County	7				•		on number
I I		ss ch	ange	Doing Business As					95-20	391	98	
٦	lame	chan	ige	Number and street (or P.O. box if mail	is not delivered to street address)		Room/Su	uite	E Teleph	none n	umber	
- II	nitial	returr	1	3708 Ruffin Rd				((858)	292	-9622	
Пт	ermii	nated		City or town, state or country,	, and ZIP + 4				G Gross			
Π,	men	ded re	eturn	San Diego CA 921					receip		167,3	40,000
\Box_{A}	pplic	ation	pending	F Name and address of prin			H(a) Is the	his a gro	oup return fo			Yes X No
ш				See attachment #					iates include			Yes No
1.7	ax-	exer	mpt status:	<u> </u>		527			tach a list. (s		uctions)	
				.ymca.org					mption numl		•	
			anization:		sociation Other L		of formation		1884		ate of legal do	micile: CA
	art		Summa									
		1		scribe the organization's mission	or most significant activities:							
				chment #2								
ACTIVITIES			0.000									
UT V F T	3 -											
v ¦	' ⊢	2	Check this	s box lif the organization dis	scontinued its operations or dispose	ed of	more tha	n 25%	6 of its ne	et asse	ets	_
+ 5	3	3			ng body (Part VI, line 1a)					3	l	53
į	Ä	4			f the governing body (Part VI, line 1					4		52
5 6	V				alendar year 2010 (Part V, line 2a)	,				5		5,933
	=	6		ber of volunteers (estimate if neo						6		5,495
&				•	rt VIII, column (C), line 12					7a		3,493
					m Form 990-T, line 34					7b		0
	+		ivet uilleid	ated business taxable income no	III I OIIII 990-1, IIIIe 34		<u> </u>		ior Year	7.0	Curr	ent Year
R		Q	Contributi	one and grants (Part VIII line 1h))		-			١.		46,000
REVENUE		8			j)				674,00			10,000
Ě		9	-	,					690,00			
Ü		10		, , , ,	lines 3, 4, and 7d)				600,00		1	36,000
Ε		11		, , , , , , , , , , , , , , , , , , , ,	5, 6d, 8c, 9c, 10c, and 11e)				432,00			96,000
		12		· · · · · · · · · · · · · · · · · · ·	ust equal Part VIII, column (A), line			34,	396,00			88,000
		13		, ,	column (A), lines 1-3)		-		30,00	10		30,000
Ë		14		,	olumn (A), line 4)		+	60 (000 00		F0 F	0000
EXPENSES		15			enefits (Part IX, column (A), lines 5	-10) .		68,5	902,00	10	72,7	98,000
E	1			<u> </u>	umn (A), line 11e)							
S	1.				nn (D), line 25) ▶ 1,572, (51 000
S			-	, , ,	11a-11d, 11f-24f)		+		163,00			51,000
_		18	-	· ·	ual Part IX, column (A), line 25)				095,00			79,000
NI		19	Revenue	less expenses. Subtract line 18 f	rom line 12				301,00			09,000
N O R	B	20	Tatal	ste (Dest V. line 40)					of Current			of Year
A N	A	20	Total asse	ets (Part X, line 16)					092,00			97,000
ASSETS	Č 4	21		lities (Part X, line 26)					168,00			91,000
ġ D	5 2	22		s or fund balances. Subtract line	21 from line 20		⊥	38,5	924,00	0	146,7	06,000
	ırt	_		ire Block								
					luding accompanying schedules and statement ad on all information of which preparer has any			of my kı	nowledge ar	nd belief	, it is true,	
			· .								1	
o: -			<u></u>	nature of officer							<u> </u>	
Sig			_								Date	
He	re			ul C. Sullivan	EV	'P &	& CFC) / O <u>r</u>	perat	lon	ıs	
				e or print name and title	In	l s			1	1 1	D=:::	
Pai	d		Print	/Type preparer's name	Preparer's signature	Date	е		Check		PTIN	
		rer	<u> </u>			<u> </u>		I _	self-en		a	•
	-			n's name ▶				-	irm's EIN	<u> </u>		
US	e U	nly	Firn	Firm's address ▶ Phone no.								
											<u> </u>	v (₹
May	the	RS IRS	discuss t	nis return with the preparer show	n above? (see instructions)							Yes X No

Form	1990 (2010) YMCA of San Diego County 95-2039198	Page 2
Par	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response to any question in this Part III	
1	Briefly describe the organization's mission:	
	See attachment #3	
	Did the organization undertake any significant program services during the year which were not listed on	-
-	the prior Form 990 or 990-EZ?	X No
	If ``Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
	services? Yes	X No
	If ``Yes," describe these changes on Schedule O.	ш
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants	
	and allocations to others, the total expenses, and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 75,107,000 including grants of \$) (Revenue \$ 21,105,000)
	See attachment #4	
4b	(Code:) (Expenses \$ 14,697,000 including grants of \$) (Revenue \$ 14,190,000)
40	(Code:) (Expenses \$ 37,120,000 including grants of \$) (Revenue \$ 37,681,000	
40	/ (Expenses of S7, 120, 000 Including grains of S7, 001, 000	′
4d	Other program services. (Describe in Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ▶ \$ 126,924,000	
JVA	10 99012 TWF 41339 Copyright Forms (Software Only) - 2010 TW Form 99	0 (2010)

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	X	
	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If ``Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501 (h)			
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II.	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments,			
_	or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the			
	right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete			3.7
-	Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		v
	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,"			v
_	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21; 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,"			
		9		Х
10	complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?	9		Λ
10	If ``Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is ``Yes," then complete Schedule D, Parts VI, VII, VIII, IX,		Λ	
••	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			
u	D, Part VI	11a	Х	
b	Did the organization report an amount for investments other securities in Part X, line 12 that is 5% or more of its total		21	
_	assets reported in Part X, line 16? If ``Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If ``Yes," complete Schedule D, Part VIII.	11c		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			
	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		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If ``Yes," complete			
	Schedule D, Parts XI, XII, and XIII.	12a	Χ	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If ``Yes," and if			
	the organization answered ``No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If ``Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the United States? If ``Yes," complete Schedule F, Parts I and I.V	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV.	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			3.5
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions).	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,	4.0	3,7	
40	lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18	Χ	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	40		v
20-	If ``Yes," complete Schedule G, Part III.	19		X
	Did the organization operate one or more hospitals? If ``Yes," complete Schedule H.	20a		Λ
D	If ``Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		
	Tital operation one or more mospitals must attach addited infamilial statements (see instituctions)	200		

	990 (2010) YMCA of San Diego County 95-2039198		Pa	age 4
Par	t IV Checklist of Required Schedules (continued)		I v	
	Dild		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			3.5
	United States on Part IX, column (A), line 1? If ``Yes," complete Schedule I, Parts I and II.	21		Х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If ``Yes," complete Schedule I, Parts I and III	22		X
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,"		3.7	
	complete Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of			
	the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	١		3.7
	Schedule K. If "No," go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	١		
	any tax-exempt bonds? N/A	24c		
	Did the organization act as an ``on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in an excess benefit transaction with a			3.5
	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,"	051		3.5
	complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or		3.7	
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	X	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			37
20	Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
_	Part IV instructions for applicable filing thresholds, conditions, and exceptions):	00-	37	
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.	28a	Х	
b	A family member of a current or former officer, director, trustee, or key employee? If ``Yes," complete Schedule L,	206		v
_	Part IV An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an	28b		Х
·		200	v	
29	officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV.	28c 29	X	
30	Did the organization receive more than \$25,000 in non-cash contributions? If ``Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	29	Λ	
30	conservation contributions? If "Yes," complete Schedule M.	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If ``Yes," complete Schedule N,	30		Λ
٥,	Part I	31		v
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If ``Yes," complete	31	 	X
32	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		Λ
33	sections 301.7701-2 and 301.7701-3? If ``Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If ``Yes," complete Schedule R, Parts II,	33		Λ
34	III, IV, and V, line 1	34		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		X
a	Did the organization receive any payment from or engage in any transaction with a controlled entity	33		Λ
а	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
50	organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		- 21
51	and that is treated as a partnership for federal income tax purposes? If ``Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	31	 	Λ
50	Note. All Form 990 filers are required to complete Schedule O	38	Х	
	san more and required to complete derivation of		~ ~	

Form 990 (2010) Page **5**

Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V Yes No 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable 1c Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return Χ 2h Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions) Χ 3b 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 Χ b If ``Yes," enter the name of the foreign country: ▶ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. Χ 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? Χ If ``Yes" to line 5a or 5b, did the organization file Form 8886-T? С 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization Χ solicit any contributions that were not tax deductible? If ``Yes," did the organization include with every solicitation an express statement that such contributions or 6b 7 Organizations that may receive deductible contributions under section 170(c). 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 If ``Yes," did the organization notify the donor of the value of the goods or services provided? 7b Χ Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7с Χ d Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Χ 7e 7f Χ Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? a If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?N/.A 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?N/.A h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess 9 Sponsoring organizations maintaining donor advised funds. 9a b 10 Section 501(c)(7) organizations. Enter: 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . . . 11 Section 501(c)(12) organizations. Enter: Gross income from members or shareholders 11a Gross income from other sources (Do not net amounts due or paid to other sources h 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filling Form 990 in lieu of Form 1041? N/A 12a b If ``Yes," enter the amount of tax-exempt interest received or accrued during the year . . . | 12b| Section 501(c)(29) qualified nonprofit health insurance issuers. 13 Is the organization licensed to issue qualified health plans in more than one state? N/A13a Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 14a Did the organization receive any payments for indoor tanning services during the tax year? Χ 14b

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Form **990** (2010)

Part VI

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

	Check if Schedule O contains a response to any question in this Part VI			X			
Secti	on A. Governing Body and Management						
			Yes	No			
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 53						
b	Enter the number of voting members included in line 1a, above, who are independent 1b 52						
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 or 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	Does the organization have members or stockholders?	6		X			
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the						
	governing body?	7a		X			
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year						
	by the following:						
а	The governing body?	8a	Χ				
b	Each committee with authority to act on behalf of the governing body?	8b	Χ				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the						
	organization's mailing address? If ``Yes," provide the names and addresses in Schedule O	9		Χ			
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)						
			Yes	No			
10a	Does the organization have local chapters, branches, or affiliates?	10a	Χ				
b	If ``Yes," does the organization have written policies and procedures governing the activities of such chapters,						
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b	Χ				
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	Χ				
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.						
12a	Does the organization have a written conflict of interest policy? If ``No," go to line 13	12a	Χ				
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give						
	rise to conflicts?	12b	Χ				
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If ``Yes,"						
	describe in Schedule O how this is done	12c	Χ				
13	Does the organization have a written whistleblower policy?	13	Χ				
14	Does the organization have a written document retention and destruction policy?	14	Χ				
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	Χ				
b	Other officers or key employees of the organization	15b	X				
	If ``Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement						
	with a taxable entity during the year?	16a		X			
b	If ``Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate						
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard						
	the organization's exempt status with respect to such arrangements?	16b					
Secti	on C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed ▶ CA						
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)						
	available for public inspection. Indicate how you make these available. Check all that apply.						
	Own website Another's website X Upon request						
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest						
	policy, and financial statements available to the public.						
20	State the name, physical address, and telephone number of the person who possesses the books and records of the						
	organization: ▶ See attachment #5						

Form **990** (2010)

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Form 990 (2010)

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

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of ``key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization nor any related organizations compensated any current officer, director, or trustee.										
(A)	(B)	(C)						(D)	(E)	(F)
Name and Title	Average	Po	sition	(chec	all th	at apply)		Reportable	Reportable	Estimated
	hours per week (describe hours for related organiza- tions in Schedule O)	D-RECTOR TRUSTEE OR	-20COZ4-	OFF-CER	KEY LOYEE	H-GHEST	F O R M E R	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Robert W. Bauchman										
Director	2.00	X						0	0	0
Joseph Benoit										
Vice Chair	5.00	X		Х				0	0	0
Steven R. Berk										
Director	2.00	X						0	0	0
Bob Bolinger										
Director	2.00	X						0	0	0
Rick Bregman										
Director	2.00	X						0	0	0
Corey S. Buckner										
Bd of Governors Chair	5.00	X						0	0	0
Robert D. Buell										
Chairman	10.00	X		X				0	0	0
Jeffrey A. Busby										
Director	2.00	X						0	0	0
Glenn R. Carlson										
Vice Chair	5.00	X		Х				0	0	0
Frederick W. Close,										
M.D.										
Director	2.00	X						0	0	0
Denise Cooper										
Director	2.00	X						0	0	0
James M. Cowley										
Director	2.00	X						0	0	0
Thomas E. Darcy										
Vice Chair	5.00	X		Х				0	0	0
David Dominguez		37								
Director	2.00	X						Ο	U	U
David W. Down	0.00	37								
Director	2.00	X						μ	U	U
Charles Edwards, M.D.										

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	<u> 5a</u>							1032120		" raye o
		s, Truste	ees, K			es, and	High		Employees(continued	
(A)	(B)			(0				(D)	(E)	(F)
Name and title	Average hours per week (describe hours for related organiza- tions in	I T D N R I D II P	Sition TRU TRU TRU TEE TUT O	OF F I C E R	K E M P L O Y E E	H C E M P L C Y E E S T A T E	F O R M E R	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related
	Schedule O)		N A L			D				organizations
Director	2.00	Х	L					0	0	0
Ronald L. Ferrari	2.00									
Director	2.00	Х						0	0	0
Scott Free										
Vice Chair	5.00	X		X				0	0	0
Randy C. Frisch										
Director	2.00	X						0	0	0
Karla Hertzog										
Vice Chair	5.00	X		X				0	0	0
T. W. Hoehn										
Vice Chair	5.00	X		X				0	0	0
Murray Hutchison	0 00	37								
Director Pat Hindman	2.00	X						U	U	U
Director	2.00	Х						0	0	0
Gordon Johns	2.00	21								O
Director	2.00	X						0	0	0
Greg Kaminsky										
Director	2.00	X						0	0	0
Jason B. Khoury										
Director	2.00	X						0	0	0
Bill Kowba										
Director	2.00	X						0	0	0
Rondey Lanthorne										
1b Sub-total							•	0	0	0
c Total from continuation sh									0	494394
d Total (add lines 1b and 1c))						. •	3619471	0	494394

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ▶ 30

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee			
	on line 1a? If ``Yes," complete Schedule J for such individual	3		X
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the			
	organization and related organizations greater than \$150,000? If ``Yes," complete Schedule J for such individual	4	Х	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for			
	services rendered to the organization? If ``Yes," complete Schedule J for such person	5		Х

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

	(A)	(B)	(C)
	Name and business address	Description of services	Compensation
See	attachment #6		
2	Total number of independent contractors (including but not limited to those	se listed above) who received more than	
	\$100,000 in compensation from the organization.		

art VII	Statement of Reve	nue		(A) Total revenue	(B) Related or	(C) Unrelated	(D) Revenue excluded from tax
					exempt function revenue	business revenue	excluded from tax under sections 512, 513, or 514
6 ○ 1a	Federated campaigns	1a					
	Membership dues	1b					
R C	Fundraising events	1c	12,025,000				
	Related organizations	1d					
M e	Government grants (contr	ibutions) 1e	52,421,000				
L f	All other contributions, gift	ts, grants, &					
R	similar amounts not includ						
A M T	Noncash contributions included in	lines 1a-1f:	5				
S h	Total. Add lines 1a-1f			64,446,000			
			Business Code				
2a	Program Servi	ce Fees	900099	47,126,000	47,126,000		
b	Membership Du	ies	900099	25,484,000	25,484,000		
R							
V d	<u> </u>						
E e	•						
N U f	All other program service	revenue					
	Total. Add lines 2a-2f			72,610,000			
3	Investment income (include			, ,			
	other similar amounts)	•	·	750,000			750,00
4	Income from investment o			,			100,00
5	Royalties						
	110 y and 00	(i) Real	(ii) Personal				
63	Gross Rents	(i) Neai	(ii) i cisoriai				
	Less: rental expenses						
	•						
	Rental income or (loss)	<u></u>	1				
a	Net rental income or (loss)						
7a	Gross amount from sales	(i) Securities	(ii) Other	_			
	of assets other than						
١.		26,142,000					
D	Less: cost or other basis						
, ,	and sales expenses						
۰ ا	Gain or (loss)						
	Net gain or (loss)		. <u></u>	586,000			586,00
	Gross income from fundra	· ·					
	events (not including \$						
	of contributions reported of						
	See Part IV, line 18						
' I	Less: direct expenses		1,896,000				
	Net income or (loss) from	•	. <u> </u>	1,130,000			1,130,00
9a	Gross income from gamin	•					
	Part IV, line 19		a				
b	Less: direct expenses						
С	Net income or (loss) from	gaming activities .	. <u> </u>				
10a	a Gross sales of inventory, I						
	returns and allowances		366,000				
b	Less: cost of goods sold.	l	.				
С	: Net income or (loss) from	sales of inventory.	>	366,000			366,00
	Miscellaneous Re	evenue	Business Code				
11a	i						
b)						
С	;						
d	All other revenue						
	Total. Add lines 11a-11d						
12	Total revenue. See instru			139,888.000	72,610,000		2,832,00
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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	, •	•		(D).
Do no	t include amounts reported on lines 6b,	(A) Total expenses	(B)	(C)	(D) Fundraising
7b, 8b	, 9b, and 10b of Part VIII.	l otal expenses	Program service expenses	Management and general expenses	expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16	30,000	30,000		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	2,693,000	364,000	2,022,000	307,000
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	57,433,000	54,020,000	2,744,000	669,000
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	3,672,000	3,377,000	220,000	75,000
9	Other employee benefits	2,685,000	2,470,000	178,000	37,000
10	Payroll taxes	6,315,000	5,791,000	432,000	92,000
11	Fees for services (non-employees):				
а	Management				
b	Legal				
С	Accounting	81,000		81,000	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	114,000		114,000	
g	Other	35,920,000	35,714,000	184,000	22,000
12	Advertising and promotion	1,097,000	938,000	86,000	73,000
13	Office expenses	1,472,000	1,308,000	160,000	4,000
14	Information technology				
15	Royalties				
16	Occupancy	6,149,000	5,792,000	357,000	
17	Travel	1,458,000	1,391,000	65,000	2,000
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	925,000	696,000	172,000	57,000
20	Interest				
21	Payments to affiliates	262,000	262,000		
22	Depreciation, depletion, and amortization #7.	5,521,000	5,264,000	257,000	
23	Insurance	521,000	473,000	48,000	
24	Other expenses. Itemize expenses not covered above.				
	(List miscellaneous expenses in line 24f. If line 24f				
	amount exceeds 10% of line 25, column (A) amount,				
	list line 24f expenses on Schedule O.)				
а	Supplies	5,659,000	5,390,000	53,000	216,000
b	Miscellaneous	1,851,000	1,792,000	41,000	18,000
С	Rent, Mtce & Pchse of Equip	1,777,000	1,708,000	69,000	
d	Prov for Doubtful Receivable	144,000	144,000		
е					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	135,779,000	126,924,000	7,283,000	1,572,000
26	Joint costs. Check here ▶ if following SOP 98-2				
	(ASC 958-720). Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				
		•	•		- 000 (

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Part	t X	Balance Sheet					
		-			(A)		(B)
					Beginning of year		End of year
	1	Cash non-interest bearing			1,916,000	1	3,980,000
	2	Savings and temporary cash investments			6,987,000	2	6,564,000
	3	Pledges and grants receivable, net			5,699,000	3	4,113,000
	4	Accounts receivable, net			9,197,000	4	7,200,000
	5	Receivables from current and former officers, direct					
		employees, and highest compensated employees.	Comp	lete Part II of			
		Schedule L				5	85,000
	6	Receivables from other disqualified persons (as defined under secti					
		described in section 4958(c)(3)(B), and contributing employers and	sponsor	ing organizations			
A S		of section 501 (c)(9) voluntary employees' beneficiary organizations	(see ins	structions)		6	
Š	7	Notes and loans receivable, net			7		
E T	8	Inventories for sale or use			8		
Ś	9	Prepaid expenses and deferred charges		390,000	9	648,000	
	10 a	Land, buildings, and equipment: cost or other	ĺ	,		,	
		basis. Complete Part VI of Schedule D	10a	149,784,000			
	b	Less: accumulated depreciation		46,170,000	92,601,000	10c	103,614,000
		Investments publicly traded securities	41,484,000	11	37,951,000		
		Investments other securities. See Part IV, line 11	, , , , , , , , , , , , , , , , , , , ,	12	, , , , , , , , , , , , , , , , , , , ,		
	13	Investments program-related. See Part IV, line 1			13		
		Intangible assets		14			
		Other assets. See Part IV, line 11	4,818,000	15	4,842,000		
		Total assets. Add lines 1 through 15 (must equal I	163,092,000	16	168,997,000		
		Accounts payable and accrued expenses	16,473,000	17	13,965,000		
	18	Grants payable				18	
L		Deferred revenue			6,800,000	19	7,263,000
ļ	20	Tax-exempt bond liabilities				20	
A B	21	Escrow or custodial account liability. Complete Par	t IV of	Schedule D		21	
Į.	22	Payables to current and former officers, directors, t	rustee	es, key			
F		employees, highest compensated employees, and	disqua	alified			
T		persons. Complete Part II of Schedule L				22	
I E	23	Secured mortgages and notes payable to unrelated				23	
ร	24	Unsecured notes and loans payable to unrelated th	nird pa	rties		24	
	25	Other liabilities. Complete Part X of Schedule D			895,000	25	1,063,000
	26	Total liabilities. Add lines 17 through 25			24,168,000	26	22,291,000
		Organizations that follow SFAS 117, check here					
_		complete lines 27 through 29, and lines 33 and	34.	-			
N F E U	27	Unrestricted net assets			120,555,000	27	132,383,000
ΤN	28	Temporarily restricted net assets			14,018,000	28	7,402,000
A	29	Permanently restricted net assets			4,351,000	29	6,921,000
A B S A		Organizations that do not follow SFAS 117, che					
EL		and complete lines 30 through 34.		_			
T A	30	Capital stock or trust principal, or current funds				30	
s N C		Paid-in or capital surplus, or land, building, or equip				31	
0 E		Retained earnings, endowment, accumulated incom				32	
RS		Total net assets or fund balances			138,924,000	33	146,706,000
		Total liabilities and net assets/fund balances	163,092,000	34	168,997,000		

Form 990 (2010) Page **12** Part XI **Reconciliation of Net Assets** Check if Schedule O contains a response to any question in this Part XI 139,888,000 135,779,000 Total expenses (must equal Part IX, column (A), line 25) 2 3 4,109,000 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))..... 4 138,924,000 Other changes in net assets or fund balances (explain in Schedule O) 5 3,673,000 Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, 6 146,706,000 Part XII Financial Statements and Reporting No Yes Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked ``Other," explain in Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? Χ **b** Were the organization's financial statements audited by an independent accountant? 2b c If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? Χ 2c If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. d If ``Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: Both consolidated and separate basis X Separate basis Consolidated basis 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? Χ 3a

Form **990** (2010)

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

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