PUBLIC INSPECTION COPY

990

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

Open to Public Department of the Treasury Inspection ▶ The organization may have to use a copy of this return to satisfy state reporting requirements. Internal Revenue Service , 20 09 For the 2009 calendar year, or tax year beginning , 2009, and ending 12/31 01/01 C Name of organization YOUNG MENS CHRISTIAN ASSOCIATION OF CENT D Employer identification number Please B Check if applicable: 4379594 Doing Business As YMCA of Central Ohio ☐ Address change label or E Telephone number Number and street (or P.O. box if mail is not delivered to street address) Room/suite print or Name change type. 224-1137 (614) 40 West Long Street Initial return Specific City or town, state or country, and ZIP + 4 ☐ Terminated Columbus, OH 43215 G Gross receipts \$ 50,583,965 Amended return H(a) Is this a group return for alfiliates? Yes No F Name and address of principal officer: John E Bickley Application pending H(b) Are all affiliates included? Yes No 40 West Long Street, Columbus, OH 43215 If "No," attach a list. (see Instructions) Tax-exempt status: H(c) Group exemption number > Website: ▶ ymcacolumbus.org L Year of formation: 1890 M State of legal domicile: OH Form of organization: Corporation Trust Association Other Part I Summary Briefly describe the organization's mission or most significant activities: A membership assoc reflecting its Judeo Christian principles, is an assoc of volunteers, members, staff, open to and serving all, providing programs and services which develop spirit, mind and body. Financial assistance is available based on need. The Governance Association seeks to Identify and involve those in need. 2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 40 Number of voting members of the governing body (Part VI, line 1a) 39 4 Number of Independent voting members of the governing body (Part VI, line 1b) Activities 2,247 5 Total number of employees (Part V, line 2a) 3,628 6 Total number of volunteers (estimate if necessary) 0 7a 7a Total gross unrelated business revenue from Part VIII, column (C), line 12. 7b 0 b Net unrelated business taxable income from Form 990-T, line 34. Current Year Prior Year 11,959,318 14,685,885 Contributions and grants (Part VIII, line 1h) . 22,909,608 23,196,814 Program service revenue (Part VIII, line 2g) . . 164,621 325,374 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 212,648 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 252,611 38,460,684 35,246,195 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 0 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . 0 14 Benefits paid to or for members (Part IX, column (A), line 4) . . . 19,196,187 20,277,915 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0 16a Professional fundralsing fees (Part IX, column (A), line 11e) . . . b Total fundraising expenses (Part IX, column (D), line 25) ▶ 17,931,402 14,732,314 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 33,928,501 38,209,317 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25). 251,367 1,317,694 19 Revenue less expenses. Subtract line 18 from line 12 Beginning of Current Year End of Year 5 % Assets Baland 63,185,445 63,867,187 20 Total assets (Part X, line 16) . 19,758,643 17,327,147 Total liabilities (Part X, line 26) 21 45,858,298 Net assets or fund balances. Subtract line 21 from line 20 44,108,544 22 Signature Block Part II 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. 5010 Ø Sign Date Signature of officer Here Jean Tom, Senior Vice President of Finance

SS&G' FINANCIAL SERVICES, INC.

COLUMBUS, OH 43215

Suite 250

300 Spruce St.,

Type or print name and title

Preparer's

Firm's name (or yours

if self-employed) address, and ZIP + 4

signature

Paid Preparer's

Use Only

Phone no. ▶

Check if

employed ▶ □

EIN

self-

Date

Preparer's Identifying number

(see instructions)

\mathbb{R}	art	III Statement of Program Service Accomplishments
1	-	Briefly describe the organization's mission: To serve the whole community through programs expressing Judeo-Christian principles that build a healthy spirit,
	-	mind and body.
	-	
2	1	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3		Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4		If "Yes," describe these changes on Schedule O. 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.
4	a	Code: (Expenses \$ 11,725,739 including grants of \$ 0) (Revenue \$ 3,781,558) Child Care and Preschool: The YMCA of Central Ohio offers child care to families of all levels of income with children ages six weeks to 12 years of age. At YMCA of Central Ohio child care and early childhood programs, the teachers in this YMCA of Central Ohio child care program help children learn what they need to know to be successful in school, offer nutritious meals and snacks, and provide extra learning opportunities such as music, literature, science activities, sports, arts and crafts, swimming, and other recreational activities. As a result,
		children do better in school and their parents are able to maintain employment. Last year, 3,154 children were served in the YMCA of Central Ohio's early childhood and school-age child care programs. These programs
		include full day infant, toddler, and preschool early learning opportunities; half-day preschool programs; half-day
		kindergarten care; and part-day school-age child care. The YMCA of Central Ohio provides full-day child care for
		school-age children during spring break, winter break, teacher conference days, and summer vacation. In 2009 the YMCA of Central Ohio provided 337,320 units of service in child care and 54,410 units of service in
		(Continued on Schedule O. Statement 1)
_	ib.	(Code:) (Expenses \$ 10,862,854 including grants of \$ 0) (Revenue \$ 15,328,366)
	-	Preventive Health Care and Wellness: The YMCA of Central Ohio's preventive health care program provides
		family centered health and wellness programming for all ages and abilities. The YMCA offers individual and
		group exercise classes, parent/child programs, older adult fitness programs, children's fitness and nutrition
		classes, child and adult water safety and swim instruction, arthritis and warm water exercise, physical activity
		programs for persons with disabilities, youth and adult sports instruction and recreation, personal and family
		nutrition consultation, first aid/CPR/AED classes, health and wellness seminars, classes for persons identified
		as "at risk," such as sedentary activity patterns, overweight or obesity, or other cardiovascular disease risk factors. Participants are identified as "at risk" through health screening, physical fitness tests, and referrals from
		partnering hospitals, health departments and health organizations. Nurses are available at several branches in
		lower income communities to provide health screening, consultation and medical referrals for local residents.
		Programs are offered at affordable fees to the community and the YMCA actively promotes its financial
		(Continued on Schedule O, Statement 2)
-	40	(Code:) (Expenses \$ 2,676,088 including grants of \$ 0) (Revenue \$ 1,110,350)
	70	Low Income Housing with Supportive Services: The YMCA of Central Ohio's Supportive Housing Program
		provides permanent supportive housing for low-to very-low income adult men and women who are chronically
		homeless with special needs. The YMCA of Central Ohio provides the following services: *Affordable permanent
		housing for adults over the age of 18 who are low-to very-low income. * Support programs to help individuals
		address unmet needs that have contributed to their history of homelessness including mental health issues,
		chemical dependency problems, long-term unemployment and physical problems, * Referrals to other
		community-based agencies for chemical rehabilitation services, psychiatric services, and vocational training
		programs, * Choice Food Pantry for residents. The YMCA of Central Ohio collaborates with other special service
		agencies: both private and public, to provide support services, legal aid, financial assistance, furniture, food,
		transportation, and address mental and physical health needs and alcohol and drug dependency issues. The
_		(Continued on Schedule O, Statement 3)
	4d	Other program services. (Describe in Schedule O.) See Schedule O, Statement 4
_		(Expenses \$ 5,706,958 including grants of \$ 6 / (Nevertible \$ 2,555)55:
	46	Total program service expenses ► 30,971,639

Pari	Checklist of Required Schedules			N.,
	Г		Yes	No
	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	1	1	
^	complete Schedule A	2		√
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		✓_
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete	4	✓	
5	Schedule C, Part II	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 Schedule D, Part I	6		<u>√</u>
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		✓_
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	8		✓
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," complete Schedule D, Part IV	9		✓_
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V.	10	✓	
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable	11	/	3034VI
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	5. 19 1		
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total 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 assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
•	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.			
•	Did the organization report an amount for other liabilities in Part X, line 257 if "Yes," complete Schedule D, Part X. 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 487 if "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	12		1
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	13		
13 14a	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?	14a		1
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, Part I	14b		1
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, Part II.	15		√
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, Part III	16		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		✓
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		1
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		1
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		<u></u>

Par	t IV Checklist of Required Schedules (continued)		. 1	
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		✓_
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		✓
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	✓	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a 24b		✓
þ		240		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		✓_
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		1
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		1
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 Schedule L, Part III	27	Section with	
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):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		1
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	ļ	 √
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
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		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III. IV. and V, line 1	34	1	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35	1	
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	-	1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37	-	1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note . All Form 990 filers are required to complete Schedule O	38	1	

Par	Statements Regarding Other IRS Filings and Tax Compliance			<u>.</u>
		ಕ ಪ್ರವಕ್ರಗಳನ	Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable	10/14		73.05 63.00
þ	Enter the number of Forms W-2G included in line 1a. Enter -u- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		enen Enim
	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	2b		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see			
3a	instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year covered by	3a		/
h	this return?	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	45547.4 1272	/
b	If "Yes," enter the name of the foreign country: ▶	323	40.27	
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a 5b	<u> </u>	1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	30	 	<u> </u>
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?.	<u>5с</u> 6а	ļ	1
	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?	Va		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	erate v	194725400
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	7a	1 E18224	1
	and services provided to the payor?	7b	1	<u> </u>
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
C	required to file Form 8282?	7c		/
a	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
е	henefit contract?	7e	1	√
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	-	✓
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? .	7g	<u> </u>	
h	required?	7h	9 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
8	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 business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	9a		i Great
а	Did the organization make any taxable distributions under section 4966?	9b	+	1
b	<u> </u>			
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12			
a	Infilation rees and capital contributions included out rait viii, line 12.			
11	Section 501(c)(12) organizations, Enter:	9		
ıı a	a the state of the	4		
b	Gross income from other sources (Do not net amounts due or paid to other sources against		引達	
	amounts due or received from them.)			4.55 M
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 12b	12:		\$ \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \

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 in
	Schedule O. See instructions.

<u>Sect</u>	ion A. Governing Body and Management	—т		
		2.76 (2.75)	Yes	No
12	Enter the number of voting members of the governing body	经 接		
b	Enter the number of voting members that are independent			
J.	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			[[]
2	Did any officer, director, mustee, or key employee have a family relationship of a basiness relationship with	2		√
_	any other officer, director, trustee, or key employee?			
3	Did the organization delegate control over management duties customarily performed by or under the direct	3		1
	supervision of officers, directors or trustees, or key employees to a management company or other person?.	4		1
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	5		√
5	Did the organization become aware during the year of a material diversion of the organization's assets?			√
6	Does the organization have members or stockholders?	6		<u> </u>
7a	Does the organization have members, stockholders, or other persons who may elect one or more members	_		,
	of the governing body?	7a		<u> </u>
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	Sant Web.	√
8	Did the organization contemporaneously document the meetings held or written actions undertaken during		323-55	476764
Ū	the year by the following:		GHz.	1.4
_	The governing body?	8a	✓	
a	Each committee with authority to act on behalf of the governing body?	8b	✓	<u> </u>
	is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			
9	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9a		1
0.5.5	tion B. Policies (This Section B requests information about policies not required by the International Control of the International			
Sec	tion b. Funcies (this because a requests information about policies not required by the me			
Hev	enue Code.)		Yes	No
		10a	1	···-
10a	Does the organization have local chapters, branches, or affillates?	iva	'	
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	404	✓	
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b	<u> </u>	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the		,	
	form?	11	A PERIO	360.000.53
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			15004
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	1	
h	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			1
	rise to conflicts?	12b	✓	
			1	
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	1	1
40	Does the organization have a written whistleblower policy?	13	1	
13	Does the organization have a written document retention and destruction policy?	14	√	
14	Does the organization have a written document retention and destruction policy:		学生	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	15a	1	- 1 c.m. 200 Ed.
а		15b		1
b	Other officers or key employees of the organization	100	100	55000
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)		1	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			Herrit
	with a taxable entity during the year?	16a	 V	r arasis
h	if "Ves." has the organization adopted a written policy or procedure requiring the organization to evaluate			制變型
~	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard	17.7		
	the organization's exempt status with respect to such arrangements?	16b	1	✓
Se	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► OH			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501	(c)(3)s	only)
10	available for public inspection. Indicate how you make these available. Check all that apply.		-	
	Own website Another's website Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict	of In	teres	t
19	Describe in Schedule O whether (and it so, now), the organization makes its governing documents, confine	. 01 111	.0,00	•
	policy, and financial statements available to the public.	~~4-	of AL.	
20	State the name, physical address, and telephone number of the person who possesses the books and rec			;
	organization: ► Jean Tom, (614)573-3613			
	40 West Long Street, 2nd Floor, Columbus, OH 43215			

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

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. Use Schedule J-2 if additional space is needed.

- 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. 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 the organization did not co	mpensate	any c	urre	ent o	offic	er, d	irec	tor, or trustee.		
(A)	(B)			(0				(D)	(E)	(F)
Name and Title	Average	Position (check all that apply)						Reportable	Reportable	Estimated
	hours per week	individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	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
John E Bickley	40							276,234	0	31,545
President/CEO/Secretary	40	1		1	✓	<u> </u>		270,234		
Msgr Joseph M Hendricks	2.0	1		1				0	0	0
Chairperson	<u> </u>	Y	-	V_		<u> </u>				
Sue Zazon Immediate Past Chair	1	1		1				0	0	0
Roger P Sugarman	- 1	1		1				0	0	0
First Vice Chair Hai Keller		Y_	\vdash	-			\dagger			
Second Vice Chalr	1	1		1				0	0	
Tom Katzenmeyer	1	,						0	0	0
Treasurer	-	✓	\vdash	✓	┢	-	+-	<u> </u>		
Steve Allen MD Board Member	0.5	1						0	0	0
Pamela Blesecker CPA		 	1					0	0	0
Board Member	0.5	1			<u> </u>		<u> </u>	U	0	
Alan Brannan	- 0.5			ŀ				0	o	0
Board Member	0.0	✓			<u> </u>	<u> </u>				
Patricia P Cash	- 1	1]	0	0	0
Board Member		↓ ✓	+	-	ļ.,	╀	4-	 		
Corey V Crognale	- 1	,					1	0	0	0
Board Member		1	+	+	╁	+				
Michael F Curtin	0.5					1		0	0	0
Board Member		+ ▼-	+	+	╁╌	+	╁	<u> </u>		
Karen S Days	1	1						0	0	0
Board Member		Y	+	+	╁		+			
Eric D Fenner	0.5	1/						0	0	0
Board Member		 	+-	+	+	+	+			
J Miles Gibson Esq	. 1	1					1	0	0	0
Board Member Cheryl L Grossman		1	+	+	+	1	+	1	-	
Cheryl L Grossman Board Member	0.5	1						o	0	0
DOULD MIGHING!		<u></u>							·	000

Part	VII Section A. Officers, Directors, Tru	ıstees, Key	/ Emp	loye	es,	an	d Hig	hest	Compensate	d Employees (co	ntinued)
نظلندهم	(A)	(B)	ΓĖ	-	((-		(D)	(E)	(F)
	Name and title	Average hours per week		ثث	heck	Key	that ap	Former	Reportable compensation from the	Reportable compensation from related organizations	Estimated amount of other compensation
			Individual trustee or director	nstitutional trustee	er.	emplayee	Highest compensated employee	er	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
	es R Hess d Member	0.5	1						0	0	0
Boar	ard J Jackson d Member	0.5	1						0	0	0
Boar	as F Nolan d Member	1	✓						0	0	0
Boar	Sutphen Phelps d Member	0.5	1						0	0	0
Boar	L Reece II	1	1					_	0	0	0
Boar	ie T Richardson d Member des A Schneider	0.5	1						0	0	0
Boar	rd Member	0.5	✓	-	-			<u> </u>	0		0
Boai	rd Member e Smith	0.5	1		-	_		-	0		
	rd Member n W Tolbert MA	0.5	1	-	-			-	0		0
Star	rd Member Iley A Uchida	- 0.5	✓	-					0		
Clau	rd Member is von Zychlin	- 0.5	√					-	0	0	0
Rob	rd Member ert J Weiler rd Member	- 1	1	-		-			o	0	0
	Total			<u> </u>	<u> </u>			>	1,194,193	0	149,327
2	Total number of individuals (including but reportable compensation from the organization)		to th	iose	list	ed	abov	e) w	ho received m	ore than \$100,0	
3	Did the organization list any former officemployee on line 1a? If "Yes," complete	er, directo Schedule a	r or t	rusti uch	ee, ina	key livid	emp <i>'ual</i>	loye	ee, or highest	compensated	Yes No
4	For any individual listed on line 1a, is the the organization and related organizations individual.	sum of rep greater th	oortab an \$1	ie c 50,	om 000	per ? If	satio "Yes,	" cc	mplete Sched	ule J for such	4 🗸
5	Did any person listed on line 1a receive services rendered to the organization? If	or accrus	con	ner	sat	ion	from	any	unrelated or		5 🗸
Sec	tion B. Independent Contractors										20.000 f

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

	(A) Name and business address	(B) Description of services	(C) Compensation
Crea	ative Child Care, 5815 Westbourne Avenue, Columbus, OH 43213	Child Care	894,211
	on for Children, 78 Jefferson Avenue, Columbus, OH 43215	Child Care services for Ol	877,550
	stside Childcare, 40 North Grub Street, Columbus, OH 43215	Child Care	588,772
	thside Learning & Development Center, 255 Reeb Avenue, Columbus, C	Child Care	448,082
	y Bean Junction Learning Centers Inc, 7100 Murifield Drive, Dublin, OH		270,530
2	Total number of independent contractors (including but not limited to those more than \$100,000 in compensation from the organization ▶ 16		

Form 99								- 1	Page 9
Part	VIII	Statement of Reven	ıue	Section		(A)	(B)	(C)	(D)
						Total revenue	Related or exempt function revenue	Unrelated	Revenue excluded from tax under sections 512, 513, or 514
इ इ	1a	Federated campaigns .	1	а	1,674,947				
lo ja			1	b	0			MEDICAL STREET	
s, c		Fundraising events		С	0	1.45			110345
ar gift		Related organizations .	1	d	0	4-25-000-000			
ě, Ē		Government grants (contributi	ons).	е	9,169,104		Account of the second		
is ti		All other contributions, gifts, grant	· ·						
혈美		and similar amounts not included		f	1,115,267		odes de la c		55. 31. 31.
투입		Noncash contributions included in		\$	0				STORES
ਤ ਫ਼	h	Total. Add lines 1a-1f .			<u> </u>	11,959,318	ile value (said		
g				L	Business Code			and the second s	
Ę	2a	Preventive Health Care at	nd Wellne	ess	624000	15,328,366	15,328,366	0	0
è	b	Childcare and Preschool			624410	3,781,558	3,781,558	0	0
<u>.</u> 2	c	Outdoor & Environmenta	i Educati	on	900099	1,925,351	1,925,351	0	0
ا پر	d	Low Income Housing		[721310	1,110,350	1,110,350	0	0
Ē	e	Truancy/Day Suspension		[611600	502,678	502,678	0	0
EL S	f	All other program service	revenue	. [261,305	261,305	0	0
ᇫ	g	Total. Add lines 2a-2f .			<u> ▶</u>	22,909,608	And the English of Co.		
	3	Investment income (includ	ing divide	nds,	, interest, and			_	454.000
Other Revenue Other Revenue Other Service Revenue and other similar amounts		other similar amounts) .			🟲	151,389	0	0	151,389
	4	Income from investment of ta	x-exempt	bond	proceeds	0	0	0	0
	5	Royalties		. ,	<u> ▶</u>	0	0	U Lista de la constitue de la co	de la
			(i) Real		(ii) Personal	75-19-18-18-18-18-18-18-18-18-18-18-18-18-18-		to delete state legical	asi senganya 62
ļ	6a	Gross Rents		0	0	16 (17) - 17 (8)	100	Yan in the second	
	b	Less: rental expenses		0	0				
		Rental income or (loss)		0	0			0	0
	d	Net rental income or (loss		• -	, , , , ,	0	0		- 14 C
	7a	Gossanturi ildiisaesu 🚐	(i) Securities		(ii) Other				1 2 2
	1	assets other than inventory	15,284,	J42	14,015		Transaction of the		
	b	Less: cost or other basis	40.004				就是进起点点		
		and sales expenses .	15,284,	$\overline{}$	14.015				
		Gain or (loss)	-	783	14,015	13,232	0	0	13,232
	d	Net gain or (loss)		٠,	. <u>, </u>	10,232	Here and the second		
e	8a		fundralsing				27 F 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		\$ 3.40 000
en		events (not including \$	<u>0</u>						THE STEEL STORE AND A
ě		of contributions reported of	on line 1c)	.	(
<u>.</u>		See Part IV, line 18		а			1 692 共生主席	5 (FE (1-1), 1)	2 THE R 1899
Ě		Less: direct expenses .	fundralal	b	<u> </u>		0	0	0
0	C	Net income or (loss) from	luliulaisi	ny e	veins P	15.00(15.00)		Early (See A. St. S	
	9a	Gross income from gaming			(150 2000 500	ie idazekiety s	CONTRACTOR	
	١.	See Part IV, line 19						Law Carlo	de la serie
	b	Less: direct expenses Net income or (loss) from	aamina s	b activ	<u>. </u>	100000000000000000000000000000000000000	0	0	C
						778 GERNARI (S. 18		3.00 またいの決定	19 1-12 may 145 1
	10a	Gross sales of invent			123,98	L SICE MARKED		(A) (2-2-2-3)	3.056000000000
	,	returns and allowances .		a b	52,94	こしたことがある。これが必要がある。またい、別様の方が必要においます。			
	"	Less: cost of goods sold Net income or (loss) from s	sales of in			71,036	71,036	O C	0
	۲	Miscellaneous Revenu		, 161	Business Code				
	44-	341 Ilauaarra			900099	24,363	24,363	0	C
	11a	to comment of the second		•••	900003	113,774		 	0
		Talanhana Cammiesian			900003	3,475	- 	 	3,475
	٥			•••			0	0	0
	9	I All other revenue	 1	•	>	141,61	2		
	12	Total revenue. See instr		•	i i i i i i	35,246,19			168,096
				•		· · · · · · · · · · · · · · · · · · ·			Earm 990 (200)

fundraising solicitation

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) but are not required to complete columns (B), (C), and (D). (B) Program service expenses (C) Management and (D) Fundraising (A) Total expenses Do not include amounts reported on lines 6b. 7b, 8b, 9b, and 10b of Part VIII. general expenses expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 . . . Benefits paid to or for members Compensation of current officers, directors, 1,205,355 405,723 715,811 83,821 trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . 583,186 78,795 13,965,631 14,627,612 Other salaries and wages 7 Pension plan contributions (include section 401(k) 7,332 103,775 615,768 726,875 and section 403(b) employer contributions). . 101,030 5,726 1,157,677 1,264,433 Other employee benefits 13,777 103,729 1,371,912 1,254,406 10 Payroll taxes Fees for services (non-employees): 11 a Management 0 41,148 6,976 34,172 **b** Legal 47,301 0 52,901 5,600 c Accounting d Lobbying e Professional fundraising services. See Part IV, line 17 Investment management fees 88.099 0 5,350,319 5,438,418 944 58,217 80,395 139,556 Advertising and promotion 12 1,210 411,860 507,596 920,666 13 95,165 102,356 7,191 0 Information technology 14 Royalties 15 0 4,240,489 53,748 4,294,237 16 269,088 59.998 2,505 331,591 17 Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 72,877 54,301 17,361 1,215 Conferences, conventions, and meetings . 19 20 260,990 235,121 25,869 0 21 Payments to affiliates 1,845,065 1,760,996 84,069 0 Depreciation, depletion, and amortization. 22 239,968 147,487 92,481 0 23 Other expenses, Itemize expenses not 24 covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) Program Supplies 838,299 75 840,454 2,080 9,886 9,886 0 Campaign Expense 12,108 880 12,817 25,805 C 60,625 11,759 12 72,396 44.000 0 44,000 Allowance for Doubtful Accounts All other expenses 33,928,501 30,971,639 2,750,684 206,178 Total functional expenses. Add lines 1 through 24f 25 Joint costs. Check here ► ☐ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and

Par	tΧ	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	3,272,398	1_	2,453,301
	2	Savings and temporary cash investments	6,124,719		8,079,341
	3	Pledges and grants receivable, net		3	192,503
	4	Accounts receivable, net		4	1,784,333
ł	5	Receivables from current and former officers, directors, trustees,		No.	10000000000000000000000000000000000000
	·	employees, and highest compensated employees. Complete Part I Schedule L	l of0	5	0
	6	Receivables from other disqualified persons (as defined under sect 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complement II of Schedule L	ete 0	-	0
23	7	Notes and loans receivable, net	7,927,303	1	7,781,308
Assets	8	Inventories for sale or use . , ,	0		0
₹	9	Prepaid expenses and deferred charges	336,996	9	332,438
	10a	Prepaid expenses and deferred charges	5794620552504853415V	igapa Laha	
	b	Less: accumulated depreciation 10b 21,873			T
ļ	11	Investments—publicly traded securities			2,481,785
	12	Investments-other securities. See Part IV, line 11	500	+	500
	13	Investments-program-related. See Part IV, line 11		13	
	14	Intangible assets	0	+	100.040
ļ	15	Other assets. See Part IV, line 11	. 160,767		168,848
	16	Total assets. Add lines 1 through 15 (must equal line 34)		+	63,185,445
	17	Accounts payable and accrued expenses	3,131,252		1,974,589
ļ	18	Grants payable , ,	, , <u>L</u>		0
Ì	19	Deferred revenue	1,391,086	$\overline{}$	1,121,222
ŀ	20	Tax-exempt bond liabilities			12,160,000
es	21	Escrow or custodial account liability. Complete Part IV of Schedul		21	0
abiliti	22	Payables to current and former officers, directors, trustees, employees, highest compensated employees, and disquali	fied Section 1		
-1		persons. Complete Part II of Schedule L		+	0
	23	Secured mortgages and notes payable to unrelated third parties	1,000,000	_	1,000,000
1	24	Unsecured notes and loans payable to unrelated third parties .		 	10-1000
Liabilities	25	Other liabilities. Complete Part X of Schedule D			
	26	Total liabilities. Add lines 17 through 25	To the state of th	26	17,327,147
seo		Organizations that follow SFAS 117, check here ► 🗹 a complete lines 27 through 29, and lines 33 and 34.			
lan	27	Unrestricted net assets	32,374,54		
Ba	28	Temporarily restricted net assets	11,276,79		1
<u>ק</u>	29	Permanently restricted net assets		29	464,994
Net Assets or Fund Balanc	.	Organizations that do not follow SFAS 117, check here ▶ and complete lines 30 through 34.			
ß	30	Capital stock or trust principal, or current funds		30	
Se	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
AS	32	Retained earnings, endowment, accumulated income, or other fu	nds	32	
ē	33	Total net assets or fund balances	44,108,54		
_	34	Total liabilities and net assets/fund balances	. 63,867,18	7 34	63,185,445

Form **990** (2009)

Page	12	
Paue	3 4	

Par	Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other			以主心 建设建
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O.	0-	92,500	./
	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	7	- V
b	Were the organization's financial statements audited by an independent accountant?	2b	٧	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
_	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	-√	
	If the organization changed either its oversight process or selection process during the tax year, explain in	2.00		32.5
	Schedule O.		5.45	
	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
a			華蒙	表
	issued on a consolidated basis, separate basis, or both:			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	(Septimize)	e contracta va	12.22
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in		1	
	the Single Audit Act and OMB Circular A-133?	3a	Y	
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.	3b	✓	<u> </u>

Form **990** (2009)

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047 Open to Public

Department of the Treasury Inspection Internal Revenue Service Employer identification number Name of the organization 31 4379594 YOUNG MENS CHRISTIAN ASSOCIATION OF CENTRAL OHIO Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 ☐ An organization that normally receives: (1) more than 33¼ % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 331/4 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) ☐ An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. c Type III-Functionally integrated d Type III-Other b ☐ Type II a Type I e 🔲 By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). if the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Nο Yes (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? 11g(i) 11g(ii) (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above? . 11g(iii) Provide the following information about the supported organization(s). (v) Did you notify (vi) Is the (vii) Amount of (ii) EIN (iii) Type of organization (iv) is the organization (i) Name of supported organization in col. support in col. (i) listed in your the organization in (described on lines 1-9 organization (i) organized in the col. (i) of your above or IRC section governing document? support? (see instructions)) Yes No Yes Yes

Total

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support (f) Total Calendar year (or fiscal year beginning in) > (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 Gifts, grants, contributions, and membership fees received. (Do not 62,003,490 9,383,402 11.828.068 14,146,817 14,685,885 11,959,318 include any "unusual grants.") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 62,003,490 9,383,402 11,828,068 14,146,817 14,685,885 11.959,318 Total. Add lines 1 through 3 . . . The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . 62,003,490 645 ZI U 1644 Public support. Subtract line 5 from line 4. Section B. Total Support (e) 2009 (f) Total (b) 2006 (c) 2007 (d) 2008 (a) 2005 Calendar year (or fiscal year beginning in) 11,959,318 62,003,490 14,146,817 14,685,885 11,828,068 9.383.402 Amounts from line 4 . . . Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar 1,279,332 310,622 151.389 399,510 123,700 294,111 sources . Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets 571,930 103.439 183,803 141,612 74,729 68,347 (Explain in Part IV.) 63,854,752 Total support. Add lines 7 through 10 . 11 114,434,914 Gross receipts from related activities, etc. (see instructions) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 % 97.14 15 Public support percentage from 2008 Schedule A, Part II, line 14 15 16a 331/3 % support test - 2009. If the organization did not check the box on line 13, and line 14 is 331/3 % or more, check this box 331/3 % support test-2008. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3 % or more, check this 17a 10%-facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions 🕨 🗌

Pari	Support Schedule for Organ (Complete only if you checked	izations De d the box on	scribed in Se line 9 of Par	ection 509(a) t l.)	(2)		
	ion A. Public Support						- (0 T-1-1
Cal	endar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 200	9 (f) Total
2	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge	:					
6	Total. Add lines 1 through 5 ,	,			f		
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .						
	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
C	Add lines 7a and 7b				45 15 15 15 15 15 15 15 15 15 15 15 15 15		
8	Public support (Subtract line 7c from line 6.)						
	tion B. Total Support		T #1000	(-) 0007	(d) 2008	(e) 20	09 (f) Total
Ca	alendar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(G) 2008	(6) 20	03 (1) Total
9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c 11	Add lines 10a and 10b						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)					<u> </u>	
14	First five years. If the Form 990 is for organization, check this box and stop	here . <u></u>		ond, thìrd, fourt	h, or fifth tax y	ear as a	section 501(c)(3)
Se	ction C. Computation of Public St	upport Perce	entage			11	
15	Public support percentage for 2009 (li	ne 8. column	(f) divided by I	ne 13, column	(f))	15	%
16	Public support percentage from 2008	Schedule A, F	Part III, line 15	<u> </u>		16	%_
Se	ction D. Computation of Investme	ent Income I	Percentage				
17	Investment income percentage for 20	09 (line 10c, c	olumn (f) divid	ed by line 13, o	column (f)) .	17	<u>%</u>
40	Investment income percentage from 2	2008 Schedule	A. Part III, line	317		18	%
19:	331/3 % support tests—2009. If the or	ganization did box and stop	not check the here. The orga	box on line 14, nization qualifie	and line 15 is i s as a publicly	supporte	ed organization 🚩 🗀
t	331/3 % support tests - 2008. If the organic in the 18 is not more than 331/3 %, check to	anization did no	ot check a box or p here. The org	on line 14 or line anization qualifi	e 19a, and line i ies as a publicly	16 is mor supporte	re than 33⅓ %, and ed organization 🕨 🗆
<u>20</u>	Private foundation. If the organization	n did not chec	k a box on line	14, 19a, or 19	o, check this b Sci	oox and s redule A (F	see instructions ► L Form 990 or 990-EZ) 200

1	Pane	4

Part IV	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.
General Ex	xplanation - Schedule A, Part II, Line 10 - exempt income consists of Insurance Proceeds of \$113,774 and
Miscellane	eous Income of \$24,363 for a subtotal of \$138,137. Income that is considered to be excluded consists of
Telephone	Commissions of \$3,475. Total Other Income for exempt and excluded income totals \$141,612.
	······

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

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

Section 527 organizations: Complete Part I-A only.

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

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

• S If the	section 501(c)(3) organizations to organization answered "Yes,	nat have NOT filed Form 5768 (election " to Form 990, Part IV, line 5 (Proxy	under section 501(h	i)): Complete Part il-B. Do	not complete Part II-A.
	Section 501(c)(4), (5), or (6) organ				
	ne of organization			Employer	identification number
YO	UNG MENS CHRISTIAN AS	SOCIATION OF CENTRAL OHIO		31	4379594
Par		organization is exempt unde			organization.
1	Provide a description of the	organization's direct and indirect	political campaig	ın activities in Part IV.	
2	Political expenditures	· · · · · · · · · · · · · · · · · · ·		· · · · · ▶ \$	
3	Volunteer hours				
Par	t I-B Complete if the	organization is exempt unde	er section 501(c	:)(3).	
1	Enter the amount of any ex	cise tax incurred by the organizat	ion under section	4955 ▶ ♣	
2	Enter the amount of any ex	cise tax incurred by organization	managers under s	Section 4955 . 🕨 Ψ	
3	If the organization incurred	a section 4955 tax, did it file Form	n 4/20 for this ye	ary, , , , ,	Yes No
	If "Yes," describe in Part IV				· La tes La 140
_	t I-C Complete if the	organization is exempt unde	er section 501(c), except section 50	01(c)(3).
		expended by the filing organization			
1	activities			> ♥	
2	527 exempt function activi	ng organization's funds contribute ties		▶ Ф	
3	Total exempt function exp	enditures. Add lines 1 and 2. En	ter here and on	Form 1120-POL, ► \$	
4	Did the filing organization to	file Form 1120-POL for this year?			. 🗌 Yes 📙 No
5	Enter the names addresses	and employer identification number	· (FIN) of all section	n 527 political organizatio	ons to which payments
	were made. For each group!	ration listed, enter the amount paid fr	om the filing organi	ization's funds. Also ente	r the amount of political
	contributions received that v	vere promptly and directly delivered	to a separate politi	cai organization, such as	a separate segregated
	fund or a political action cor	nmittee (PAC). If additional space is	needed, provide i		
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
					į

D-0	_	- 9
₽ 20	е	_

sche	dule C (Form 990 or 990-EZ) 2009					, ugu —
	11 II-A Complete if the organiz under section 501(h)).				filed Form 5768	(election
A (Check ► ☐ if the filing organization Check ► ☐ if the filing organization	on belongs to ar on checked box	n affiliated group A and "limited	o. control" pr <u>ovisi</u> a	ns apply.	
	Limits on L (The term "expenditures"	obbyina Expendi	tures		(a) Filing organization's totals	(b) Affiliated group totals
b d e	Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b)					The water as to be before a subsequent
	If the amount on line 1e, column (a) or (b) Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$17,000,000 Over \$17,000,000	mount on line 1e, column (a) or (b) is: er \$500,000 500,000 but not over \$1,000,000 1,000,000 but not over \$1,500,000 \$100,000 plus 15% of the excess over \$500,000. \$175,000 plus 10% of the excess over \$1,000,000. \$225,000 plus 5% of the excess over \$1,500,000.				
ř	g Grassroots nontaxable amount (enter 25% of line 1f)					☐ Yes ☐ No
	(Some organizations that columns belo	w. See the instru	501(h) election of actions for lines	do not have to co 2a through 2f on	page 4.)	five
_	Lobb	ying Expenditure	s During 4-Year	Averaging Period	<u> </u>	T
	Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2	a Lobbying nontaxable amount					
	b Lobbying ceiling amount				PARTY TO SERVICE	
	(150% of line 2a, column (e))			(1986)		
	(150% of line 2a, column (e))					
	(150% of line 2a, column (e)) C Total lobbying expenditures					

	(election under section 501(h)).	(a)	(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
_	Volunteers?	✓		
a	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	✓		
	Media advertisements?		✓	
C	Mailings to members, legislators, or the public?	√		
d	Publications, or published or broadcast statements?		✓	
_	Grants to other organizations for lobbying purposes?		✓	
f	Direct contact with legislators, their staffs, government officials, or a legislative body?	√		
g	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		✓	
n	Other activities? If "Yes," describe in Part IV	√		2,18
1	1		227.07	2,18
J	Total. Add lines 1c through 1i		1	
2a	Did the activities in line 1 cause the organization to be not described in section 30 (0)(0).			
b	If "Yes," enter the amount of any tax incurred under section 4912	433		
Ç	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			4-01-01-5-6
	t III-A Complete if the organization is exempt under section 501(c)(4), section 50)1(c)	(5), c	r section
للتكييا	501(c)(6).	• •	• • •	
				Yes N
	Were substantially all (90% or more) dues received nondeductible by members?			1
1 2	Did the organization make only In-house lobbying expenditures of \$2,000 or less?			2
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3
	501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III "Yes."		1	
1	Dues, assessments and similar amounts from members	tical	9.34	7
2	expenses for which the section 527(f) tax was paid).		2a	
а	Current year	•	2b	
b		•	2c	
С	Total	•	3	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	f the	188	w.
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion o excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb	ovina		
	and political expenditure next year?		4	
5	Taxable amount of lobbying and political expenditures (see instructions)		5	
_	rt IV Supplemental Information			
Cor	mplete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, o, complete this part for any additional information. hedule C, Part II-B, Line 1 - a) Two of our YMCA board members testified for three minutes exite funding of child care programs. b) One of the YMCA Vice Presidents testified twice on potential.	ach c	n po	tential cuts to
fur	nding of child care programs. No expenses were reported. The YMCA President/CEO testified	onc	e reg	arding
pro	posed city budget cuts. No expenses were reported. c) None. d) 50 emails at no cost. e) Nor	te i)	None	. g) Once of
the	YMCA Vice Presidents made personal visits to 30 legislators during the state budget cuts to	اللك ل	iu Udl	naiciatora no
no	costs associated with these visits since they were in walking distance. 50 emails and phone	call	ອ ເປ ເລຍ!	egisiaivis = 110
ad	ect costs were associated with these activities. This Vice President has contact with governivisory council meeting related to the delivery of early childhood education programs in the s	state	of O	nio. h) None. i)
Th	e YMCA pays annual dues to the Ohio State Alliance of YMCAs. This corporation is organize	d ex	clusiv	rely for
ch	aritable and educational purposes within the meaning of Section 501(c)(4) of the Internal Rev	venu	e Coo	de of 1986, as
of	now enacted and hereafter amended. The organization purposes include but are not limited	to tn	e foli	owing: 1.) 10
fos	ster statewide communication and cooperation among YMCAs, 2.) To gain consensus on iss	ues	of im	portance to the
VI.	MCA 3.) To make policy and decision makers aware of the YMCA's mission and programs an	d qa	ın rec	cognition as a

Part IV - Supplemental Information (Continued)					
eader on issues that affect children and families, 4.) To advocate on behalf of the children and families served by the //MCA, 5.) To protect the operating integrity of the YMCA organization in order to carry out its mission, and 6.) To represent, communicate to, and to lobby on behalf of, all member YMCAs.					

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047

2009

Open to Public Inspection

Employer identification number Name of the organization 4379594 YOUNG MENS CHRISTIAN ASSOCIATION OF CENTRAL OHIO 31 : Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if Part I the organization answered "Yes" to Form 990, Part IV, line 6. (b) Funds and other accounts (a) Donor advised funds Total number at end of year 1 Aggregate contributions to (during year) 2 Aggregate grants from (during year) . Aggregate value at end of year . . . Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of an historically important land area Preservation of land for public use (e.g., recreation or pleasure) Preservation of a certified historic structure ☐ Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a 2b 2c c Number of conservation easements on a certified historic structure included in (a) . . d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:

Part										
	Using the organization's acquisition, collection items (check all that apply		ther records	_				ignificant	use o	f its
а	Public exhibition		d 📙		an or exchan					
b	Scholarly research		e	_ Oti	her					•
С	Preservation for future generation									
4	Provide a description of the organization and the organization of the organization and the organization of the organization or	ation's collections	and explair	how t	they further t	he or	ganization's exe	empt purp	ose i	n
5	During the year, did the organization s assets to be sold to raise funds rather	than to be mainta	ined as part	of the	organization's	colle	ection?	Ye		No
Par	IV, line 9, or reported an a	mount on Form	990, Part X	, line :	21.				art	
	is the organization an agent, trustee included on Form 990, Part X?					ns or	other assets no	ot ☐ Ye	s 🗌	No
b	If "Yes," explain the arrangement in	Part XIV and com	plete the to	llowing	g table:		A	mount		
c	Beginning balance					1c	<u> </u>			
	Additions during the year					1d				
	Distributions during the year					1e				
f	Ending balance ,					11				
2a b	Did the organization include an amount "Yes," explain the arrangement in	Part XIV.						∐ Ye		No
Par	t V Endowment Funds. Co	mplete if the org	janization a	answe	ered "Yes" to	o Fo	rm 990, Part I	V, line 10) <u>. </u>	
		(a) Current year	(b) Prior ye		(c) Two years b	ack	(d) Three years bac	k (e) Four	years l	oack
1a	Beginning of year balance	405,769	515	,709		17.5			254-653	
10 h	Contributions	7,794	31	1,693		排布			Marig:	
c	Net investment earnings, gains, and losses	106,054	-125	5,894						
а	Grants or scholarships	0		0			(4 169 5 PEST		NG WAR	
e	Other expenditures for facilities									
•	and programs	0	15	5,739				*****		
f	Administrative expenses	0		0	0.00				1.2	
g	End of year balance	519,617	405	5,769	2.5-74-78-55	9 4.				
2	Provide the estimated percentage of	of the year end ba	lance held a	as:						
a	Board designated or quasi-endown	nent ▶1	1%							
b	Permanent endowment ▶									
c	Term endowment ▶0.9									
3a	Are there endowment funds not in the	e possession of the	ne organizati	ion tha	t are held and	d adn	ninistered for the	3		
	organization by:	•	_						Yes	No
	(i) unrelated organizations							3a(i)		
	fill related organizations							3a(ii)		-
b	If "Yes" to 3a(ii), are the related org	anizations listed a	as required of	on Sch	nedule R? .	•		3b		L
4	Describe in Part XIV the intended u					.4.37	1: 10			
Pai	rt VI Investments—Land, Br						1			
	Description of investment	(a) Cost or o (investr			st or other s (other)	(c)	Accumulated lepreciation		ok value	
12	Land		0	_	2,663,290				2,663	
b	Buildings		0	4	3,977,580		14,329,500	2	9,648	080,
	Leasehold improvements		0		838,120		360,126		477	,994
d	Equipment		0		6,925,551		5,923,828			,723
е	Other		0		7,379,950		1,259,949			<u>,001_</u>
Tota	al. Add lines 1a through 1e. (Column (d)	must equal Form 9	990, Part X, c	olumn	(B), line 10(c).) .	<u> ► </u>	3	9,911	880,

Schedule D (Form 990) 2009			
Part VII Investments—Other Securities.	See Form 990, Part X,		
(a) Description of security or category	(b) Book value	(c) Method of valuat Cost or end-of-year mark	
(including name of security)			
inancial derivatives	0		
Closely-held equity interests	0	Cost	
Other YMCA Housing Inc - Investment in Part	500	Cost	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	500		ing propagation of the propagati
			and the second s
		(c) Method of value	tion:
(a) Description of investment type	(b) Book value	Cost or end-of-year ma	ket value
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)		nd traffic and the state of the	
Part IX Other Assets. See Form 990, Part	X. line 15.		
	a) Description		(b) Book value
Deferred bond issue fees			168,848
			400.010
Total. (Column (b) must equal Form 990, Part X, col. (b)	3) line 15.)	<u>,.,.</u> .,.▶	168,848
Part X Other Liabilities. See Form 990, F	Part X, line 25.		
1. (a) Description of liability	(b) Amount		
Federal income taxes		0	
Deposits	115,5		
Interest Rate SWAP Agreement	955,7	69 [] [] [] [] [] [] [] [] [] [] [] [] []	edica a moralizada
			e de la composition della comp
			NAME OF BRIDE
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	1,071,3	36 36 36 36 36 36 36 36	第三日初刊的 的形式

2. FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

	the D (t offit 350) 2003			
Par			•	ients
	Total revenue (Form 990, Part VIII, column (A), line 12)			35,246,195
2	Total expenses (Form 990, Part IX, column (A), line 25)			33,928,501
3	Excess or (deficit) for the year. Subtract line 2 from line 1 ,			1,317,694
4	Net unrealized gains (losses) on investments		4	89,171
5	Donated services and use of facilities		5	0
6	Investment expenses ,		6	0
7	Prior period adjustments			0
8	Other (Describe in Part XIV.)		8	342,889
9	Total adjustments (net), Add lines 4 through 8		9	432,060
10	Excess or (deficit) for the year per audited financial statements. Comb	ine lines 3 a	nd 9 10	1,749,754
Par	XII Reconciliation of Revenue per Audited Financial Sta	tements W	ith Revenue per	r Return
1	Total revenue, gains, and other support per audited financial statemer			35,341,944
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
_	Net unrealized gains on investments	2a	89,171	
	Donated services and use of facilities	2b	0	
	Recoveries of prior year grants	2c	0	
d	Other (Describe in Part XIV.)	2d	6,578	
	Add lines 2a through 2d		26	95,749
	Subtract line 2e from line 1		3	35,246,195
3	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	i i i		
4	Investment expenses not included on Form 990, Part VIII, line 7b	4a	o Si	
_	miradition expenses nor mercent and area	AL.	0	
b	Other (Describe in Part XIV.)		40	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			35,246,195
	t XIII Reconciliation of Expenses per Audited Financial St	atements	With Expenses r	
			1	33,592,190
1	Total expenses and losses per audited financial statements			194 5.4
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	2a	o	50-4 50-4 57-2
а	Donated services and use of facilities	2b	0	
b	Prior year adjustments	2c	0	
С	Other losses	2d	-336,311	
d	Other (Describe in Part XIV.)		2	e -336,311
е	Add lines 2a through 2d		· · · ·	
3	Subtract line 2e from line 1	i	52	0.00
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1.	o	
а	Investment expenses not included on Form 990, Part VIII, line 7b .	4a	0	
b	Other (Describe in Part XIV.)	4b	- 125	_
C	Add lines 4a and 4b	1.8 (0)	4	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part	1, line 18.)	<u> </u>	33,928,501
Pai	t XIV Supplemental Information			
Con	plete this part to provide the descriptions required for Part II, lines 3, 5	, and 9; Par	t III, lines 1a and 4;	Part IV, lines 1b
and	2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4	b; and Part	XIII, lines 2d and 4i	b. Also complete
this	part to provide any additional information.			
	nedule D, Part V, Line 4 - The fund is intended to support branch de	eficits and/o	r provide sponsor:	snip for individuals
to	participate in YMCA programs.			
Sc	hedule D, Part X - The Young Men's Christlan Association of Centra	il Ohio is ex	empt from Federa	l income taxes
un	der Section 501(c)(3) of the Internal Revenue Code. The Subsidiary,	YMCA Hou	sing, Inc. is a for-p	profit corporation
an	is subject to Federal and State Income taxes at the corporate leve	1.		
Sc	hedule D, Part XI, Line 8 - Market Value of Adjustment of Interest Ra	ate SWAP of	\$342,889.	

Schedule D (Form 990) 2009 Page 5
Part XIV - Supplemental Information (Continued)
Schedule D, Part XII, Line 2d - Pledge write-offs previously recognized as revenue in prior periods of \$6,578.
Schedule D, Part XIII, Line 2d - Pledge write-offs previously recognized as reveune in prior periods of \$6,578 netted with the Fair Market Value of adjustment gain on interest rate SWAP of \$342,889.
••••
•••••

SCHEDULE J (Form 990)

Department of the Treasury

Name of the organization

Internal Revenue Service

Compensation Information

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

Complete if the organization answered "Yes" to Form 990,

Part IV, line 23.

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

4379594

Employer identification number

31

YOUNG MENS CHRISTIAN ASSOCIATION OF CENTRAL OHIO **Questions Regarding Compensation** Part I Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. ☐ Housing allowance or residence for personal use First-class or charter travel Payments for business use of personal residence ✓ Travel for companions ☐ Health or social club dues or initiation fees ☐ Tax Indemnification and gross-up payments Personal services (e.g., maid, chauffeur, chef) ☐ Discretionary spending account b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all 2 officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? . Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply. ☐ Written employment contract ✓ Compensation committee ✓ Compensation survey or study ☐ Independent compensation consultant ☑ Approval by the board or compensation committee Form 990 of other organizations During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: 4a a Receive a severance payment or change-of-control payment?..... 4b b Participate in, or receive payment from, a supplemental nonqualified retirement plan?.... 4c c Participate in, or receive payment from, an equity-based compensation arrangement?. . . . If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: 5a a The organization?......... 5b If "Yes" to line 5a or 5b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: 6a a The organization?....... 6b If "Yes" to line 6a or 6b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed 7 payments not described in lines 5 and 6? If "Yes," describe in Part III Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe 8 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed. Part II

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

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

		(B) Breakdown of W-	W-2 and/or 1099-MISC compensation	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name	t	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(c)_(.)(g)	Form 990-EZ
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Janis Fetters	5	143,900	0	720	0	15,644	160,264	0
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Take III apprendict the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part	or any additional information.
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Schedule J, Part I, Line 1a - Once each year, travel is provided for the companion of the president/CEO to attend the annual YMCA Metro 30 conference. Once every four years travel may be provided for companions of senior staff while staff attend the YMCA General Assembly conference. During 2009, there was no General Assembly conference scheduled. Travel cost is minimal and is reported as compensation to the applicable employee.

and a report detailing the CEO's progress toward meeting the established goals. The executive committee officers will meet prior to the July meeting to review the compensation package and objectives for the CEO for the upcoming year. The compensation packages of the other members of the executive management team will attend the July executive committee meeting and will prepare a report documenting the process that was followed, and the information that was considered. This report will be available for board members to review upon request. At the August board meeting, the board chair will summarize for the full board the steps will continue to be set by the YMCA, with the endorsement of the executive committee being made at the July meeting. The Vice President of Human Resources Schedule J, Part I, Line 3 - Annually, during the month of June, the Vice President of Human Resources will provide the executive committee with, a summary of the total compensation packages for executive management staff (district vice presidents, vice presidents, development officer, CFO, COO, CEO), comparative compensation data from other YMCA's and not-for-profits of similar size and geographic location, the CEO's objectives set by the committee the previous year, comparative compensation data and the CEO's performance over the prior year. At the July executive committee meeting, the executive committee will set the that were taken to establish the CEO's evaluation and compensation, and to endorse the process of evaluation of the other members of the executive

SCHEDULE J-2 (Form 990)

Continuation Sheet for Form 990

OMB No. 1545-0047

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a. ➤ See the Instructions for Form 990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the Organization

YOUNG MENS CHRISTIAN ASSOCIATION OF CENTRAL OHIO

Employer identification number

4379594 31

YOUNG MENS CHRISTIAN ASSOCIATION	OF CENTRAL	_ OH!	0					31	4379	
Part I Continuation of Officers, Di Employees	rectors, Tru	stee	s, K	Сеу	En	nplo	yee	s, and Highe	st Compensat	ted
(A)	(B)	I		(C)			(D)	(E)	(F)
Name and title	Average hours	Positi	ion (c			that ap	ply)	Reportable	Reportable	Estimated
valie are the	per week	Individual trustee or director			Key employee	Highest compensated employee	Former	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
Norman L Wilson]	
Board Member	0.5	V]		0	0	0
Timothy O Gusler										
Branch Board Representative	0.5	1				<u> </u>	<u> </u>	0	0	0
Fred Points				T			1			
Branch Board Representative	0.5	1						0	0	0
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Chris Vehr			1							
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Michelle Weadock						<u> </u>				
Branch Board Representative	0.5	1						0	0	0
Kristin Shuman	0.0	1	T	1						
Branch Board Representative	0.5	1	1					0	0	0_
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Senior Vice President of Operations	40			1	-		İ	144,620	0	15,644
Regina Tom	1		\top	1	\top					
Senior Vice President of Finance	40			1				147,516	0	15,626
Paul Weber		_	\top	Ť	\top					
District Vice President	40			1				107,282	. 0	12,417
	1			Ť	_					
Steve Gunn District Vice President	40	ŀ		✓				103,239	0	15,589
Kim Jordan		_	\top	Ť	1					
District Vice President	40			1	-	ŀ		94,754	ı o	14,604
Kathy Kerr			_	<u> </u>	1					
Development Officer	40		ļ	1				82,039	9 0	10,152
Tina Badurina	1	_		寸:	1					
Vice President of Public Affairs	40				,			81,83	7 0	13,307
Linda Day-Mackessy	1		\dashv		1		_			
Vice President	32			,				76,66	1 C	7,450
Lori Leist	T	1	\top	+*	1	1	\neg			
Vice President of Human Resources	40							80,00	в с	12,993
Aire Lieginett of tintight treatment	+	\top	-	┪"	1	\neg				

SCHEDULE O (Form 990)

Supplemental Information to Form 990

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

► Attach to Form 990.

OMB No. 1545-0047

2009

Open to Public Inspection

Department of the Treasury internal Revenue Service Name of the organization

YOUNG MENS CHRISTIAN ASSOCIATION OF CENTRAL OHIO

Employer identification number 31 4379594

Form 990, Part VI, Section B, Line 11 - The preparation of the Form 990 usually occurs shortly after the completion of the annual audit and is prepared by or prepared under the supervision of the Controller of the Association. Once the return is prepared, it is then forwarded on to the Senior Vice President of Finance for review. After the review is completed by the Senior Vice President of Finance, the Controller then inputs the information into the tax software.

The return is reviewed by the Accounting Firm and any necessary recommendations or changes are made. Once the review is completed by the Accounting Firm, the final Form 990 is presented in detail to the Finance Committee (a subcommittee of the board) for review and approval. Once approved by the Finance Committee, the Form is then emailed electronically to the Board. Shortly after the Board receives the Form 990, the Form is then filed. At the next Board meeting a brief review and discussion of the Form is given.

Form 990, Part VI, Section B, Line 12c - Annually, the President shall send, or cause to be sent, a copy of the Conflict of Interest/Statement of Disclosure, together with an explanation, and a copy of a disclosure statement/questionnaire to all Trustees, Professional Directors, Consulting Board Members and Employees, who shall complete and return a copy of the disclosure statement/questionnaire to the President or his/her designee. The President shall submit a confidential report to the Executive Committee concerning any potential conflict of interest of any Trustee, Professional Director, Consulting Board Member or Employee, together with his recommendations concerning the same. Each new Trustee, Professional Director, Consulting Board Member and selected Employee shall participate in a similar procedure immediately upon assumption of his/her responsibilities.

Form 990, Part VI, Section B, Line 15 - Annually, during the month of June, the Vice President of Human Resources will provide the executive committee with, a summary of the total compensation packages for executive management staff (district vice presidents, vice presidents, development officer, CFO, COO, CEO), comparative compensation data from other YMCA's and not-for-profits of similar size and geographic location, the CEO's objectives set by the committee the previous year, and a report detailing the CEO's progress toward meeting the established goals. The executive committee officers will meet prior to the July meeting to review the comparative compensation data and the CEO's performance over the prior year. At the July executive committee meeting, the executive committee will set the compensation package and objectives for the CEO for the upcoming year. The compensation packages of the other members of the executive management team will continue to be set by the YMCA, with the endorsement of the executive committee being made at the July meeting. The Vice President of Human Resources will attend the July executive committee meeting and will prepare a report documenting the process that was followed, and the information that was considered. This report will be available for board members to review upon request. At the August board meeting, the board chair will summarize for the full board the steps that were taken to establish the CEO's evaluation and compensation, and to endorse the process of evaluation of the other members of the executive management team.

Form 990, Part VI, Section B, Line 16b - The YMCA of Central Ohio (YMCA) is in a joint venture to further its mission as it relates the Low Income Housing with Supportive Services program (see description of program in Schedule O, Statement 3). The YMCA's 79% owned subsidiary, YMCA Housing, Inc. (Y, Inc.), is the 1% general partner of the YMCA Housing Limited Partnership (YHLP). The Y, Inc. and YHLP were established in 1995 to facilitate the rehabilitation and Improve the quality of living for the residential portion of the Downtown branch. Third-party investors received the low income and historic rehabilitation tax credits for their equity investment in the rehabilitation. As a result of the structure of this joint venture, the YMCA does not feel any transactions would place the YMCA's tax exempt status in jeopardy and considers this partnership an isolated incident/case.

Form 990, Part VI, Section C, Line 19 - The Association provides a link to Guide Star's website for the Association's Annual Report, Audited Financial Statements, Letter of Determination and Form 990. It is also footnoted on the

Supplemental Information (Continued)

Association's website "You must login to Guide Star to view the YMCA of Central Ohio information." The governing documents, conflict of interest policy and financial statements are available to the public upon written request.
Form 990, Part VIII, Line 2f - Special Needs Program had revenues of \$5,812, Youth and Family Program had revenues of \$119,190 and Consulting Services to YMCA Member Associations had revenues of \$136,303, for a total of \$261,305.
Form 990, Part VIII, Line 7a - (i) Securities - The Association had gross sales on securities of \$15,284,042, with a cost basis of \$15,284,825, netting to a loss on sale of securities of \$783. (ii) Other - The Association's 79% owned subsidiary, YMCA Housing, Inc. (Y, Inc.) is the 1% general partner of the YMCA Housing Limited Partnership (YHLP). Y, Inc. and YHLP were established to facilitate the central branch rehabilitation which allowed the YMCA to continue to provide housing for low and very low income men. Third-party investors receive the low income and historic rehabilitation tax credits for their equity investment in the rehabilitation. The YHLP leases the residential portion of the central branch of the YMCA according to the terms of the 99 year lease agreement. Rents for the life of the lease totaling \$1,295,270 were paid at inception in 1995. The YMCA recorded this transaction as a sale of an asset with a corresponding deferred gain on the sale of \$692,707. The deferred gain is being recognized over 50 years which represents the life of the YHLP Partnership Agreement. Of the total gain of \$692,707, gains recognized from 1995-2008 totaled \$185,955 and amounts deferred to future years total \$492,892, leaving \$13,860 in gains recognized during 2009. The Association also had gross sales from the sale of an auto of \$155, with a cost basis of \$18,965, which was fully depreciated at the time of the sale, netting to a gain on sale of auto of \$155.
Form 990, Part VIII, Line 10a - Gross proceeds of \$123,981 in sales are from clothing items, water bottles, racquetballs, goggles, locks, swim caps, bottled water, healthy snacks, etc.
Form 990, Part VIII, Line 10b - Costs of goods sold of \$52,945 consists of clothing items, water bottles, racquetballs, goggles, locks, swim caps, bottled water, healthy snacks, etc.
Form 990, Part VIII, Line 11a 11b 11c - Form 990, Part VIII, Line 11c - Insurance Proceeds: Insurance claims consisted of wind damages to roofs (\$75,181), water damages cause by flooding (\$19,517), power outages caused by thunderstorms (\$17,471) and stolen equipment causded by theft (\$1,605) for a total of \$113,774.
Schedule R, Part V, Line 1p - The YMCA of Central Ohio incurs most of the expenses related to operating the low income housing program that is in the space which is leased by the YMCA Housing Limited Partnership. Expenses including, but not limited to wages and related expenses, occupancy, supplies, insurance and real estate taxes are all paid by the YMCA of Central Ohio and then subsequently billed to the YMCA Housing Limited Partnership.

YOUNG MENS CHRISTIAN ASSOCIATION OF CENTRAL OHIO 31-4379594

Schedule O, Statement 1

Form: 990 Page: 2

Line Number: Part III Line 4a

First Program Service Accomplishments Description

Description

preschool. In its school-age child care programs, the YMCA offered a fitness program for children called "Y Kids Are Fit." Three to five days per week, children participated in activities designed around the structure of a warm-up, a main event (fitness activity), and cool down session. This program exists to introduce the children to the Importance of a healthy lifestyle. Recreational games and outdoor activities are also a part of this physical activity program. In 2009, the YMCA received funding for Ohio's Early Learning Initiative (ELI). The YMCA in partnership with Action for Children, an Ohio not-for-profit corporation, offers the program through 35 child care center partners forming the Franklin County Early Learning Consortium. The consortium's goal was to prepare children for kindergarten by offering the ELI program to income eligible children. Our consortium served 976 per month in 2009. Funding is based on the number of children enrolled and the actual number of hours each child attends the program. Numerous outcomes for each child, each teacher, and each classroom are compiled and reported to the Ohio Department of Education. This program ended because of State budget cuts in 2009.

YOUNG MENS CHRISTIAN ASSOCIATION OF CENTRAL OHIO 31-4379594

Form: 990 Page: 2

Line Number: Part III Line 4b

Second Program Service Accomplishments Description

Description

assistance program in all communities to reach those families who cannot afford the full fee. The YMCA of Central Ohio served 112,533 individuals in this prevention health program in 2009.

YOUNG MENS CHRISTIAN ASSOCIATION OF CENTRAL OHIO 31-4379594

Form: 990 Page: 2

Line Number: Part III Line 4c

Third Program Service Accomplishments Description

Description

YMCA of Central Ohio is committed to providing housing and supportive services to the chronically homeless population in Columbus and Franklin County. The YMCA of Central Ohio provided housing and related supportive services to 1,153 low-to very-low income adult men and women in 2009. Additionally, 40,824 meals were provided to residents through the on-site Choice Food Pantry in 2009.

Form: 990 Page; 2

Line Number: Part III Line 4d

Other Program Services Accomplishments

Activity	Description	Expense	Grants	Revenue
Code	tu lu lu lu Pat	0.475.474		1,925,351
	Outdoor and Environmental Education: Certain segments of the population have little or no access to adequate and appropriate out-of-door socialization and educational	2,475,174	0	1,525,551
	activities that make use of natural resources in a non-urban environment. Not all			
	individuals are able to develop requisite social skills and values through the normal			
	avenues of home, work, and school. Youth, particularly from low-income families, often			
	lack the appropriate opportunities to develop positive self-concepts; a sense of self-			
	reliance and resourcefulness; an ability to work with others and assume responsibility in			
	peer groups; and understanding, tolerance, and appreciation of diversity; and a sense of			
	belonging and security in a supportive environment. At risk youth that have exhibited			
	unacceptable behaviors in their home, school, or community need alternative			
	opportunities to develop constructive methods of relating to others. To address these			
	needs, the YMCA of Central Ohio offers camping programs. To achieve the goals of the			
	program, a cross section of the socioeconomic community must make up the camper			
	population. Random registration does not always accomplish this goal. Therefore,			
	supplemental funding is consistently being sought to provide partial and/or full			
	scholarships for low-income children. In addition, an increased effort is placed in			
	attracting youth with physical and/or mental disabilities, for special group experiences			
	when appropriate or as individuals mainstreamed into the camper population. As			
	urbanization and technology increase, with attendant problems of toxic waste,			
	overcrowding, and depletion of our natural resources, and understanding of the natural			
	environment and one's relationship with it becomes an increasingly significant element of			
	one's social development and responsibility. The YMCA of Central Ohio served 3,618			
	children in our camping programs in 2009.			
	Special Needs: Revenues for special populations, Early Childhood Resource Network	1,345,908	0	52,115
	and senior activities come from minimal fees that are charged to participants. Funding for			
	children 0-3 years old who are at risk of developmental delays or have a diagnosis of			
	developmental delays are funded by federal and state dollars earmarked for Temporary			
	Assistance for Needy Families (TANF) and Part C services. In addition, there are some			
	community sponsorships that make the programs more affordable to those the YMCA of			
	Central Ohio services. The various programs allow the YMCA of Central Ohio to serve			
	persons with physical as well as emotional disabilities, do developmental screenings for			
	infants, toddlers, and pre-school children, and provide physical activities especially			
	geared for older adults. The YMCA of Central Ohio served 1,254 individuals in the			
	Special Populations program and 2,785 children in the ECRN program in 2009.	050 000	0	119,190
	Youth and Family Life: The YMCA of Central Ohio's family life programs consist of	953,999	U	113,130
	arts/humanities programs, Future of America mentoring, Y-Tribes and Leader's Club. The			
	focus of these programs is on improved communication between family members, the			
	development of leadership skills and the development of skills in the cultural arts. The			
	arts/humanities programs include instruction in African drumming and African dance,			
	ceramics, pottery, and "Big Art" (painting at day camp with feet and hands).			
	Approximately 1,500 people were served in this program in 2009. The Future of America			
	mentoring program matched up 60 Future of America youth with 50 peer mentors. Also			
	adult mentors exposed the youth to their careers and how they use leadership skills in			
	their jobs, Y-Tribes is a parent-child program which pairs mothers and sons, mother and			
	daughters, fathers and daughters, or fathers and sons in recreational activities that build			
	communication between family members and provide an opportunity for "quality time" together. Last year the Y-Tribes program served 612 people. Leader's Club is a service			
	club for teens that operates at the YMCA of Central Ohio branches. Last year, 130 youth			
	were served in this program.			
	Truancy/Day Suspension: Through partnerships with the Southwestern City Schools and	841,877	0	502,67
	Columbus Public Schools, juvenile courts, departments of human services, and parents,	-		
	5,328 youth in grades 6 - 12 were referred to the YMCA's Suspension/Truancy			

YOUNG MENS CHRISTIAN ASSOCIATION OF CENTRAL OHIO

Intervention and Positive Alternative Learning for Students (PALS) in 2009. The purpose of the PALS program is to provide students experiencing difficulties in school with opportunities for positive change in attitude and a better outlook on the future. Students in the program are held accountable for their actions by participating in educational programming and behavior modification sessions with state-certified teachers, case managers, and mental health experts.

Consulting Services to YMCA Member Associations: The YMCA of Central Ohio partners with the YMCA of the USA to be a trusted advisor and specialized expert to help achieve the goals of the service delivery model in providing service to Member Associations utilizing the best available talent, and best practices developed and supported through YMCA of the USA by providing certain services on the YMCA of the USA's behalf to other YMCAs which are members of the National Council of YMCA's. Services are provided to Member Associations and YMCA of the USA for Human Resources, Marketing & Communications and Membership & Programs.

90,000

90,000

Total:

5,706,958

2,689,334

0

YOUNG MENS CHRISTIAN ASSOCIATION OF CENTRAL OHIO

31-4379594

Form: Schedule R Page: 2

Line Number: Part III

Description of Identification of Related Organizations Taxable as a Partnership

		Share of total income	Share of end-of- year assets	Code V-UBI amount
Name and EIN	YMCA Housing Limited Partnership (31-1392963)	-248,997	-2,599,095	C
Address	40 West Long Street 2nd Flor			
	Columbus, OH 43215			
Primary activity	Low Income Housing			
State or foreign country	ОН			
Direct controlling entity	YMCA Housing Inc			
Predominant income	Related			
Disproportionate allocations?	No			
General or managing partner?	No			

Form: Schedule R

Page: 2

Line Number: Part IV

YOUNG MENS CHRISTIAN ASSOCIATION OF CENTRAL OHIO

31-4379594

Description of Related Organizations Taxable as a Corporation or Trust

		Share of total income	Share of end-of- year assets	Percentage ownership
Name and EIN	YMCA Housing Inc (61-1392962)	-248,997	-2,599,095	78.74%
Address	40 West Long Street			
	Columbus, OH 43215			
Primary activity	Low Income Housing			
State or foreign country	OH			
Direct controlling entity	N/A			
Type of entity	С			

SCHEDULE R (Form 990) Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. See separate instructions. Attach to Form 990.

OMB No. 1545-0047

Employer identification number Open to Public Inspection

Schedule R (Form 990) 2009 (f) Direct controlling (f) Direct controlling 4379594 Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) entity Public charity status (if section 501(c)(3)) સ (e) End-of-year assets Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) (d) Exempt Code section (d) Total income Cat. No. 50135Y (c) Legal domicile (state or foreign country) Legal domicile (state or foreign country) Ö (b) Primary activity (b) Primary activity For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. YOUNG MENS CHRISTIAN ASSOCIATION OF CENTRAL OHIO (a) Name, address, and EIN of related organization (a) Name, address, and EIN of disregarded entity Name of the organization Part II Part I

Schedule R (Form 990) 2009

Percentage ownership Yes No managing partner? General or 8 Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, Ξ Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) (g) Share of end-of-year assets (h)
Disproportionate ž Yes (f) Share of total income (g) Share of end-of-year line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) assets Type of entity (C corp, S corp, or trust) because it had one or more related organizations treated as a partnership during the tax year.) Share of total income (d) (d) Direct controlling entity Predominant income (related, unrelated, excluded from tax under sections 512-514) Legal domicile (state or foreign country) (d)
Unrect controlling entity Primary activity (c)
Legal
domicile
(state or
foreign
country) Name, address, and EIN of related organization Primary activity <u>@</u> See Schedule O, Statement 6 Name, address, and EIN of related organization đ Sch O, Stmt 5 Part III Part IV

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Part V. Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, or 36,	, line 34, 35, or 36.)	
		Yes No
Note. Complete line 1 if any entity is listed in Parts II, III, or IV or this schedule.	in Parts II–IV?	
Duffilly the tax year, and the Organization of the rest from a controlled entity.	•	1a /
		1 _b
b Giff, grant, or capital contribution to other organization(s)		10 /
c Gift, grant, or capital contribution from other organization(s)		, PI
d Loans or loan guarantees to or for other organization(s)		
e Loans or loan guarantees by other organization(s)		> 20 State of the control of the con
f Cala of accept to other organization(s)		4
		19 🗸
		†
Exchange of assets		1;
i Lease of facilities, equipment, or other assets to other organization(s)		
		1j
		\ \
k Performance of services or membership or fundraising solicitations for other organization(s)		>
I Performance of services or membership or fundraising solicitations by other organization(s)		- Tu
m Sharing of facilities, equipment, mailing lists, or other assets		ţ.
n Sharing of paid employees		- Control of the cont
o Reimbursement paid to other organization for expenses		2 4
b Reimbursement paid by other organization for expenses		A CONTRACT C
A Other transfer of each or property to other organization(s)		19
r Other transfer of cash or property from other organization(s)		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	relationships and trans	saction thresholds.
1	(9)	<u>o</u>
Name of other organization	Transaction type (a-r)	Amount involved
VMCA Housing Limited Partnership	Ω	1,455,919
(I)		
(4)		
(5)		
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Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.) Part VI

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

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Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign country)	Are all partners section 501(c)(3) organizations?	Share of end-of-year assets ?	Disproportionate allocations?	Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	General or managing partner?	ral or aging ner?
			Yes No		Yes No		Yes	٤
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AND						Schedule R (Form 990) 2009	m 990)	5003