

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2010**Open to Public Inspection**Department of the Treasury
Internal Revenue Service

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

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

A For the 2010 calendar year, or tax year beginning 01/01 , 2010, and ending 12/31 , 20 10																							
B Check if applicable: ☐ Address change ☐ Name change ☐ Initial return ☐ Terminated ☐ Amended return ☐ Application pending	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2">C Name of organization YOUNG MENS CHRISTIAN ASSOCIATION OF CENTRAL OHIO</td> <td>D Employer identification number 31-4379594</td> </tr> <tr> <td colspan="2">Doing Business As YMCA of Central Ohio</td> <td rowspan="3">E Telephone number 614-224-1137</td> </tr> <tr> <td colspan="2">Number and street (or P.O. box if mail is not delivered to street address) Room/suite 40 West Long Street</td> </tr> <tr> <td colspan="2">City or town, state or country, and ZIP + 4 Columbus, OH 43215</td> </tr> <tr> <td colspan="3">F Name and address of principal officer: John E Bickley 40 West Long Street, Columbus, OH 43215</td> </tr> <tr> <td colspan="3"> G Gross receipts \$ 52,783,862 H(a) Is this a group return for affiliates? ☐ Yes ☒ No H(b) Are all affiliates included? ☐ Yes ☐ No If "No," attach a list. (see instructions) H(c) Group exemption number ▶ </td> </tr> <tr> <td colspan="3"> I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527 J Website: ▶ ymcacolumbus.org </td> </tr> <tr> <td colspan="3"> K Form of organization: ☐ Corporation ☐ Trust ☒ Association ☐ Other ▶ L Year of formation: 1890 M State of legal domicile: OH </td> </tr> </table>	C Name of organization YOUNG MENS CHRISTIAN ASSOCIATION OF CENTRAL OHIO		D Employer identification number 31-4379594	Doing Business As YMCA of Central Ohio		E Telephone number 614-224-1137	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 40 West Long Street		City or town, state or country, and ZIP + 4 Columbus, OH 43215		F Name and address of principal officer: John E Bickley 40 West Long Street, Columbus, OH 43215			G Gross receipts \$ 52,783,862 H(a) Is this a group return for affiliates? ☐ Yes ☒ No H(b) Are all affiliates included? ☐ Yes ☐ No If "No," attach a list. (see instructions) H(c) Group exemption number ▶			I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527 J Website: ▶ ymcacolumbus.org			K Form of organization: ☐ Corporation ☐ Trust ☒ Association ☐ Other ▶ L Year of formation: 1890 M State of legal domicile: OH		
C Name of organization YOUNG MENS CHRISTIAN ASSOCIATION OF CENTRAL OHIO		D Employer identification number 31-4379594																					
Doing Business As YMCA of Central Ohio		E Telephone number 614-224-1137																					
Number and street (or P.O. box if mail is not delivered to street address) Room/suite 40 West Long Street																							
City or town, state or country, and ZIP + 4 Columbus, OH 43215																							
F Name and address of principal officer: John E Bickley 40 West Long Street, Columbus, OH 43215																							
G Gross receipts \$ 52,783,862 H(a) Is this a group return for affiliates? ☐ Yes ☒ No H(b) Are all affiliates included? ☐ Yes ☐ No If "No," attach a list. (see instructions) H(c) Group exemption number ▶																							
I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527 J Website: ▶ ymcacolumbus.org																							
K Form of organization: ☐ Corporation ☐ Trust ☒ Association ☐ Other ▶ L Year of formation: 1890 M State of legal domicile: OH																							

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: <u>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 Association seeks to identify and involve those in need.</u>		
	2	Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	40
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	39
	5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	2,246
	6	Total number of volunteers (estimate if necessary)	6	5,243
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	11,959,318	20,345,480
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	22,909,608	22,385,069
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	164,621	358,727
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	212,648	159,326
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	35,246,195	43,248,602
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	0	0
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	19,196,187	19,407,056
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 190,176	0	0
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	14,732,314	10,877,363
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	33,928,501	30,284,419
Net Assets or Fund Balances	19	Revenue less expenses. Subtract line 18 from line 12	1,317,694	12,964,183
	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21	Total liabilities (Part X, line 26)	63,185,445	75,553,433
	22	Net assets or fund balances. Subtract line 21 from line 20	17,327,147	16,909,865
			45,858,298	58,643,568

Part II Signature Block

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

Sign Here	Signature of officer	Date 9/13/2011			
	Jean Tom, Senior Vice President of Finance Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date 9/13/11	Check ☐ if self-employed	PTIN
	Firm's name ▶	SS&G FINANCIAL SERVICES, INC.		Firm's EIN ▶	
	Firm's address ▶	300 Spruce St., Suite 250		Phone no.	

May the IRS discuss this return with the preparer shown above? (see instructions) ☐ Yes ☒ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 11282Y

Form **990** (2010)

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response to any question in this Part III ☐

- 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** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No
 If "Yes," describe these new services on Schedule O.
- 3** Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No
 If "Yes," describe these changes on Schedule O.
- 4** Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 10,928,091 including grants of \$) (Revenue \$ 14,546,628)
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 assistance program in all communities to reach those families who cannot afford the full fee. The YMCA of Central Ohio served 112,368 individuals in this prevention health program in 2010. Over 6,200 individuals learned to swim at the YMCA in 2010.

4b (Code:) (Expenses \$ 7,407,558 including grants of \$) (Revenue \$ 3,748,610)
Child Care and Preschool: The YMCA of Central Ohio offers child care to low and middle income families 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, 3,584 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; and part-day school-age child care. The YMCA of Central Ohio also provides full-day child care for school-age children during spring break, winter break, teacher conference days, and summer vacation. In 2010 the YMCA of Central Ohio provided 315,945 units of service in child care and 13,068 units of service in half-day 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, (Continued on Schedule O, Statement 1)

4c (Code:) (Expenses \$ 2,745,559 including grants of \$) (Revenue \$ 2,412,847)
Outdoor and Environmental Education: Certain segments of the population have little or no access to adequate and appropriate out-of-door socialization and educational 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 (Continued on Schedule O, Statement 2)

4d Other program services. (Describe in Schedule O.) See Schedule O, Statement 3
 (Expenses \$ 6,093,267 including grants of \$ 0) (Revenue \$ 1,833,796)

4e Total program service expenses **▶** 27,174,475

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	☒	☐
2 Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	☒	☐
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	☐	☒
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	☒	☐
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	☐	☒
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	☐	☒
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	☐	☒
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	☐	☒
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	☐	☒
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	☒	☐
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	☒	☐
b 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	☐	☒
c 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	☐	☒
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	☒	☐
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	☒	☐
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	☒	☐
12 a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	☐	☒
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	☒	☐
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	☐	☒
14 a Did the organization maintain an office, employees, or agents outside of the United States?	☐	☒
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	☐	☒
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	☐	☒
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	☐	☒
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 (see instructions)	☐	☒
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	☐	☒
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	☐	☒
20 a Did the organization operate one or more hospitals? If "Yes," complete Schedule H	☐	☒
b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	☐	☐

Part IV Checklist of Required Schedules (continued)

	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? <i>If "Yes," complete Schedule I, Parts I and II</i>	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? <i>If "Yes," complete Schedule I, Parts I and III</i>	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? <i>If "Yes," complete Schedule J</i>	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>	24a	✓
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part I</i>	25b	✓
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? <i>If "Yes," complete Schedule L, Part II</i>	26	✓
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? <i>If "Yes," complete Schedule L, Part III</i>	27	✓
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a	✓
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b	✓
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c	✓
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29 ✓	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	✓
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	✓
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	✓
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? <i>If "Yes," complete Schedule R, Part I</i>	33	✓
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34 ✓	
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35 ✓	
a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> ☒ Yes ☐ No		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	✓
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? <i>If "Yes," complete Schedule R, Part VI</i>	37	✓
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 ✓	

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response to any question in this Part V ☐

		Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 79		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 2246		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b ✓		
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		✓
b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		✓
b If "Yes," enter the name of the foreign country: ▶ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		✓
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		✓
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	✓	
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	✓	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		✓
d If "Yes," indicate the number of Forms 8282 filed during the year	7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		✓
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		✓
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8 Sponsoring organizations maintaining donor advised funds 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.			
a Did the organization make any taxable distributions under section 4966?	9a		
b Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12	10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders	11a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state?	13a		
Note. See the instructions for additional information the organization must report on Schedule O.			
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b		
c Enter the amount of reserves on hand	13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		✓
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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.

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

Section A. Governing Body and Management

	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year 1a 40		
b Enter the number of voting members included in line 1a, above, who are independent 1b 39		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	✓
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	✓
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	✓
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5	✓
6 Does the organization have members or stockholders?	6	✓
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	✓
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	✓
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	8a	✓
b Each committee with authority to act on behalf of the governing body?	8b	✓
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	✓

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

	Yes	No
10a Does the organization have local chapters, branches, or affiliates?	10a	✓
b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b	✓
11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	✓
b Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	✓
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	✓
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	✓
13 Does the organization have a written whistleblower policy?	13	✓
14 Does the organization have a written document retention and destruction policy?	14	✓
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?		
a The organization's CEO, Executive Director, or top management official	15a	✓
b Other officers or key employees of the organization	15b	✓
If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	✓
b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b	✓

Section 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) available for public inspection. Indicate how you make these available. Check all that apply.
☐ Own website ☒ Another's website ☒ Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► 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 ContractorsCheck if Schedule O contains a response to any question in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
John E Bickley President/CEO/Secretary	45	✓		✓				288,639	0	32,407
Msgr Joseph M Hendricks Chairperson	2	✓		✓				0	0	0
Sue Zazon Treasurer & Immediate Past Chair	1	✓		✓				0	0	0
Roger P Sugarman First Vice Chair	1	✓		✓				0	0	0
Hal Keller Second Vice Chair	1	✓		✓				0	0	0
Steve Allen MD Board Member	0.5	✓						0	0	0
Pamela Biesecker CPA Board Member	0.5	✓						0	0	0
Patricia P Cash Board Member	1.0	✓						0	0	0
Michael F Curtin Board Member	0.5	✓						0	0	0
Karen S Days Board Member	1.0	✓						0	0	0
Eric D Fenner Board Member	0.5	✓						0	0	0
J Miles Gibson Esq Board Member	1.0	✓						0	0	0
Cheryl L Grossman Board Member	0.5	✓						0	0	0
James R Hess Board Member	0.5	✓						0	0	0
Charles D Hillman Board Member	0.5	✓						0	0	0
Tom Katzenmeyer Board Member	0.5	✓						0	0	0

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Thomas Nolan Board Member	1	☒						0	0	0
Julia Sutphen Phelps Board Member	0.5	☒						0	0	0
Guy L. Reece II Board Member	1.0	☒						0	0	0
Jamie T. Richardson Board Member	0.5	☒						0	0	0
Charles A. Schneider Board Member	0.5	☒						0	0	0
Mark S. Slayman Board Member	0.5	☒						0	0	0
Gene Smith Board Member	0.5	☒						0	0	0
John W. Tolbert MA Board Member	0.5	☒						0	0	0
Todd Tuney Board Member	0.5	☒						0	0	0
Stanley A. Uchida Board Member	0.5	☒						0	0	0
Claus von Zychlin Board Member	0.5	☒						0	0	0
Robert J. Weiler Board Member	1.0	☒						0	0	0
Norman L. Wilson Board Member	0.5	☒						0	0	0
Timothy O. Gusler Branch Board Representative	0.5	☒						0	0	0
Fred Points Branch Board Representative	0.5	☒						0	0	0
Johnetta Carey Branch Board Representative	0.5	☒						0	0	0

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Tina Ballard Branch Board Representative	0	☒						0	0	0
Michelle Weadock Branch Board Representative	0.5	☒						0	0	0
Kristin Shuman Branch Board Representative	0.5	☒						0	0	0
Greg Georgic Branch Board Representative	0.5	☒						0	0	0
Jim Durham Branch Board Representative	0.5	☒						0	0	0
Debby Wright Branch Board Representative	0.5	☒						0	0	0
Tracy Moebius Branch Board Representative	0.5	☒						0	0	0
Corey V Crognale Board Member	1	☒						0	0	0
Janis Fetters Senior Vice President of Operations	45			☒				147,420	0	16,242
Regina Tom Senior Vice President of Finance	45			☒				145,796	0	16,225
Paul Weber District Vice President	45			☒				108,504	0	13,033
Steve Gunn District Vice President	45			☒				105,174	0	16,566
Kim Jordan District Vice President	45			☒				96,378	0	15,822
Tina Badurina Vice President of Public Affairs	45			☒				84,527	0	14,254
Lori Leist Vice President of Human Resources	45			☒				84,308	0	14,254
Kathy Kerr Development Officer	45			☒				82,958	0	10,761

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Linda Day-Mackessy Vice President	32			✓				77,602	0	7,722
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								1,221,306	0	157,286

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **5**

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
Distinctive Building Systems LLC, 3160 County Road 11, Bellefontaine, OH 43311	Construction	198,474
Linc Mechanical LLC, 75 Remittance Dr, Suite 6457, Chicago, IL 60675-6457	HVAC and Energy Services	167,893
McCoy Paving Inc, 8705 Porter Run Road, Roseville, OH 43777	Paving and asphalt services	142,500
V A T, 460 East High St, London, OH 43140-9501	Contracted Transportation/Bu	118,524

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **4**

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns	1a 1,465,144					
	b	Membership dues	1b 0					
	c	Fundraising events	1c 0					
	d	Related organizations	1d 0					
	e	Government grants (contributions)	1e 4,657,442					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f 14,222,894					
	g	Noncash contributions included in lines 1a-1f: \$	12,638,304					
	h	Total. Add lines 1a-1f	20,345,480					
	Program Service Revenue			Business Code				
2a		Preventive Health and Wellness	624000	14,420,498	14,420,498	0	0	
b		Childcare and Preschool	624100	3,734,225	3,734,225	0	0	
c		Outdoor and Environmental Education	900099	2,403,588	2,403,588	0	0	
d		Low Income Housing	721310	1,137,059	1,137,059	0	0	
e		Truancy/Day Suspension	611600	456,763	456,763	0	0	
f		All other program service revenue .		232,936	232,936	0	0	
g		Total. Add lines 2a-2f		22,385,069				
Other Revenue		3	Investment income (including dividends, interest, and other similar amounts)		240,828	0	0	240,828
	4	Income from investment of tax-exempt bond proceeds		0	0	0	0	
	5	Royalties		0	0	0	0	
	6a	Gross Rents	(i) Real					
			(ii) Personal					
	b	Less: rental expenses						
	c	Rental income or (loss)	0	0				
	d	Net rental income or (loss)						
	7a	Gross amount from sales of assets other than inventory	(i) Securities	9,593,432	(ii) Other	13,860		
	b	Less: cost or other basis and sales expenses	9,489,393	0				
	c	Gain or (loss)	104,039	13,860				
	d	Net gain or (loss)		117,899	0	0	117,899	
	8a	Gross income from fundraising events (not including \$ 0 of contributions reported on line 1c). See Part IV, line 18	a					
	b	Less: direct expenses	b					
	c	Net income or (loss) from fundraising events						
	9a	Gross income from gaming activities. See Part IV, line 19	a					
b	Less: direct expenses	b						
c	Net income or (loss) from gaming activities							
10a	Gross sales of inventory, less returns and allowances	a 116,177						
b	Less: cost of goods sold	b 45,867						
c	Net income or (loss) from sales of inventory		70,310	70,310	0	0		
Miscellaneous Revenue		Business Code						
11a	Insurance Proceeds	900003	42,352	42,352	0	0		
b	Miscellaneous	900099	21,960	21,960	0	0		
c	New Hire Tax Credit	900099	14,161	14,161	0	0		
d	All other revenue		10,543	8,029	0	2,514		
e	Total. Add lines 11a-11d		89,016					
12	Total revenue. See instructions.		43,248,602	22,541,881	0	361,241		

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).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	0	0		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	0	0		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	0	0		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and key employees	1,224,420	410,854	728,882	84,684
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	0
7	Other salaries and wages	14,621,294	13,965,486	583,057	72,751
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	809,790	691,722	108,216	9,852
9	Other employee benefits	1,367,809	1,244,301	117,900	5,608
10	Payroll taxes	1,383,743	1,261,513	108,389	13,841
11	Fees for services (non-employees):				
a	Management	0	0	0	0
b	Legal	25,500	10,360	15,140	0
c	Accounting	56,617	5,600	51,017	0
d	Lobbying	0	0	0	0
e	Professional fundraising services. See Part IV, line 17	0			0
f	Investment management fees	0	0	0	0
g	Other	1,228,058	1,114,587	113,471	0
12	Advertising and promotion	171,569	56,973	114,596	0
13	Office expenses	974,047	530,634	442,633	780
14	Information technology	131,519	7,634	123,885	0
15	Royalties	0	0	0	0
16	Occupancy	4,438,974	4,400,687	38,287	0
17	Travel	416,322	309,591	105,676	1,055
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings	110,752	75,331	34,016	1,405
20	Interest	0	0	0	0
21	Payments to affiliates	280,501	255,200	25,301	0
22	Depreciation, depletion, and amortization	1,808,701	1,747,144	61,557	0
23	Insurance	216,979	161,486	55,493	0
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
a	Program Supplies	864,854	859,564	5,290	0
b	Dues	41,268	12,688	28,405	175
c	General	67,702	9,120	58,557	25
d	Allowance for Doubtful Accounts	44,000	44,000	0	0
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	30,284,419	27,174,475	2,919,768	190,176
26	Joint costs. Check here ☐ if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	2,453,301	1	1,979,571
	2 Savings and temporary cash investments	8,079,341	2	1,818,018
	3 Pledges and grants receivable, net	192,503	3	195,824
	4 Accounts receivable, net	1,784,333	4	1,747,777
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0	5	0
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)	0	6	0
	7 Notes and loans receivable, net	7,781,308	7	7,587,501
	8 Inventories for sale or use	0	8	0
	9 Prepaid expenses and deferred charges	332,438	9	350,559
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 62,881,259		
	b Less: accumulated depreciation	10b 23,682,103	10c	39,199,156
	11 Investments—publicly traded securities	2,481,785	11	9,896,355
	12 Investments—other securities. See Part IV, line 11	500	12	500
	13 Investments—program-related. See Part IV, line 11	0	13	0
	14 Intangible assets		14	0
	15 Other assets. See Part IV, line 11	168,848	15	12,778,172
16 Total assets. Add lines 1 through 15 (must equal line 34)	63,185,445	16	75,553,433	
Liabilities	17 Accounts payable and accrued expenses	1,974,589	17	2,022,505
	18 Grants payable	0	18	0
	19 Deferred revenue	1,121,222	19	1,193,846
	20 Tax-exempt bond liabilities	12,160,000	20	11,435,000
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	0
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	0	22	0
	23 Secured mortgages and notes payable to unrelated third parties	1,000,000	23	1,000,000
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities. Complete Part X of Schedule D	1,071,336	25	1,258,514
	26 Total liabilities. Add lines 17 through 25	17,327,147	26	16,909,865
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	34,486,022	27	34,777,436
	28 Temporarily restricted net assets	10,907,282	28	23,373,554
	29 Permanently restricted net assets	464,994	29	492,578
	Organizations that do not follow SFAS 117, check here ☐ and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	45,858,298	33	58,643,568
34 Total liabilities and net assets/fund balances	63,185,445	34	75,553,433	

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response to any question in this Part XI ☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	43,248,602
2	Total expenses (must equal Part IX, column (A), line 25)	2	30,284,419
3	Revenue less expenses. Subtract line 2 from line 1	3	12,964,183
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	45,858,298
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-178,913
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	58,643,568

Part XII Financial Statements and ReportingCheck if Schedule O contains a response to any question in this Part XII ☐

	Yes	No
1 Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		☒
b Were the organization's financial statements audited by an independent accountant?	☒	
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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	☒	
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: ☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separate basis		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	☒	
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	☒	

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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

2010

**Open to Public
Inspection**

Name of the organization

Employer identification number

YOUNG MENS CHRISTIAN ASSOCIATION OF CENTRAL OHIO

31-4379594

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 ☐ A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 ☐ 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.
- a ☐ Type I b ☐ Type II c ☐ Type III—Functionally integrated d ☐ Type III—Other
- 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).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
- (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? ☐
- (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? ☐
- h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	11,828,068	14,146,817	14,685,885	11,959,318	20,345,480	72,965,568
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	11,828,068	14,146,817	14,685,885	11,959,318	20,345,480	72,965,568
5 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)						
6 Public support. Subtract line 5 from line 4.						72,965,568

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4	11,828,068	14,146,817	14,685,885	11,959,318	20,345,480	72,965,568
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	294,111	399,510	310,622	151,389	240,828	1,396,460
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	74,729	103,439	183,803	141,612	89,106	592,689
11 Total support. Add lines 7 through 10						74,954,717
12 Gross receipts from related activities, etc. (see instructions)					12	114,991,057
13 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

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f))	14	97.35 %
15 Public support percentage from 2009 Schedule A, Part II, line 14	15	97.1 %
16a 33 1/3% support test—2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	☒	
b 33 1/3% support test—2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	☐	
17a 10%-facts-and-circumstances test—2010. 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—2009. 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 organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	☐	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	☐	

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.
If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 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						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b 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						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6						
10a 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 Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
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.)						
14 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

15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2009 Schedule A, Part III, line 17	18	%

- 19a 33¹/₃% support tests—2010.** If the organization did not check the box on line 14, and line 15 is more than 33¹/₃%, and line 17 is not more than 33¹/₃%, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐
- b 33¹/₃% support tests—2009.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33¹/₃%, and line 18 is not more than 33¹/₃%, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► ☐

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. Also complete this part for any additional information. (See instructions).

General Explanation - Schedule A, Part II, Line 10 - exempt income consists of Insurance Proceeds of \$42,352, Miscellaneous Income of \$21,960, New Hire Tax Credit of \$14,161 and Energy Efficient Tax Credit for Lighting of \$8,029 for a subtotal of \$86,502. Income that is considered to be excluded consists of Telephone Commissions of \$2,514. Total Other Income for exempt and excluded income totals \$89,016.

Schedule B(Form 990, 990-EZ,
or 990-PF)Department of the Treasury
Internal Revenue Service**Schedule of Contributors**

▶ Attach to Form 990, 990-EZ, or 990-PF.

OMB No. 1545-0047

2010**Name of the organization****Employer identification number**

YOUNG MENS CHRISTIAN ASSOCIATION OF CENTRAL OHIO

31-4379594

Organization type (check one):**Filers of:****Section:**

Form 990 or 990-EZ

☒ 501(c)(3) (enter number) organization☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

- ☐
- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

- ☒ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year ▶ \$

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

Name of organization YOUNG MENS CHRISTIAN ASSOCIATION OF CENTRAL OHIO	Employer identification number 31-4379594
--	--

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	City of Delaware Ohio - an Ohio political subdivision 1 South Sandusky Street Delaware, OH 43015	\$ 12,623,180	Person ☐ Payroll ☐ Noncash ☒ (Complete Part II if there is a noncash contribution.)
			Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
			Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
			Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
			Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
			Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
			Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)

Name of organization YOUNG MENS CHRISTIAN ASSOCIATION OF CENTRAL OHIO	Employer identification number 31-4379594
--	--

Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ► \$

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**
▶ **See separate instructions.**

OMB No. 1545-0047

2010

**Open to Public
Inspection**

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," 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.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization	Employer identification number
YOUNG MENS CHRISTIAN ASSOCIATION OF CENTRAL OHIO	31-4379594

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political expenditures ▶ \$
- 3 Volunteer hours ▶

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No
- 4a Was a correction made? ☐ Yes ☐ No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$
- 4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**A** Check ☐ if the filing organization belongs to an affiliated group.**B** Check ☐ if the filing organization checked box A and "limited control" provisions apply.**Limits on Lobbying Expenditures**

(The term "expenditures" means amounts paid or incurred.)

(a) Filing
organization's totals(b) Affiliated
group totals

- 1a** 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)
- d** Other exempt purpose expenditures
- e** Total exempt purpose expenditures (add lines 1c and 1d)
- f** Lobbying nontaxable amount. Enter the amount from the following table in both columns.

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

- g** Grassroots nontaxable amount (enter 25% of line 1f)
- h** Subtract line 1g from line 1a. If zero or less, enter -0-
- i** Subtract line 1f from line 1c. If zero or less, enter -0-
- j** If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ Yes ☐ No

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (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:			
a	Volunteers?		✓	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	✓		
c	Media advertisements?		✓	
d	Mailings to members, legislators, or the public?	✓		474
e	Publications, or published or broadcast statements?		✓	
f	Grants to other organizations for lobbying purposes?		✓	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	✓		7,498
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		✓	
i	Other activities? If "Yes," describe in Part IV	✓		180
j	Total. Add lines 1c through 1i			8,152
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		✓	
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

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

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes."

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. Also, complete this part for any additional information.

Schedule C, Part II-B, Line 1 - a) None. b) Yes. c) None. d) One YMCA Vice President spent 10 hours sending or making 100 emails or phone calls to legislators. e) None. f) None. g) The same YMCA Vice President under d) above spent 150 hours making visits to 20 legislators during the state budget process in order to educate legislators on the implications of budget cuts to child care, made contact with government officials through advisory council meetings, child care regulatory meetings, and individual meetings with state staff members related to the delivery of early childhood education programs in the state of Ohio. The YMCA President spent 3 hours testifying once on proposed city budget cuts for funding relating to the YMCA Truancy/Day Suspension program. h) None. i) The YMCA pays annual dues to the Ohio State Alliance of YMCA's. This corporation is organized exclusively for charitable and educational purposes within the meaning of Section 501(c)(4) of the Internal Revenue Code of 1986, as of now enacted and hereafter amended. The organization's purposes include but are not limited to the following: 1.) To foster statewide communication and cooperation among YMCAs, 2.) To gain consensus on issues of importance to the YMCA, 3.) To make policy and decision makers aware of the YMCA's mission and programs and gain recognition as a leader on issues that affect children and families, 4.) To advocate on behalf of the children and families served by the YMCA, 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.

Part IV - Supplemental Information (Continued)This image shows a full page of white paper with horizontal dashed lines, typical of primary-ruled notebook paper. The lines are evenly spaced and run across the entire width of the page. There are no margins, text, or other markings present.

**SCHEDULE D
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

2010

**Open to Public
Inspection**

Name of the organization

Employer identification number

YOUNG MENS CHRISTIAN ASSOCIATION OF CENTRAL OHIO

31-4379594

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 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		
6 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? ☐ Yes ☐ No		

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).
☐ Preservation of land for public use (e.g., recreation or education) ☐ Preservation of an historically important land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►

4 Number of states where property subject to conservation easement is located ►

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year
►

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year
► \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part 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.

Part III 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 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), 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 ► \$

(ii) Assets included in Form 990, Part X ► \$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1 ► \$

b Assets included in Form 990, Part X ► \$

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- | | |
|---|---|
| a ☐ Public exhibition | d ☐ Loan or exchange programs |
| b ☐ Scholarly research | e ☐ Other _____ |
| c ☐ Preservation for future generations | |
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . . ☐ Yes ☐ No

Part IV **Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- | | |
|---|-----------|
| 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No | |
| b If "Yes," explain the arrangement in Part XIV and complete the following table: | |
| | Amount |
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
| 2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No | |
| b If "Yes," explain the arrangement in Part XIV. | |

	Amount
1c	
1d	
1e	
1f	

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	519,617	405,769	515,709		
b Contributions	151,793	7,794	31,693		
c Net investment earnings, gains, and losses	77,227	106,054	-125,894		
d Grants or scholarships	0	0	0		
e Other expenditures for facilities and programs	5,760	0	15,739		
f Administrative expenses	0	0	0		
g End of year balance	742,877	519,617	405,769		

- 2 Provide the estimated percentage of the year end balance held as:
- a Board designated or quasi-endowment ▶ _____ 17 %
- b Permanent endowment ▶ _____ 66 %
- c Term endowment ▶ _____ 17 %
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- (i) unrelated organizations
- (ii) related organizations
- b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?
- 4 Describe in Part XIV the intended uses of the organization's endowment funds.

	Yes	No
3a(i)	✓	
3a(ii)		✓
3b		

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	0	2,663,290		2,663,290
b Buildings	0	44,575,681	15,560,841	29,014,840
c Leasehold improvements	0	936,872	401,856	535,016
d Equipment	0	7,246,278	6,294,686	951,592
e Other	0	7,459,138	1,424,720	6,034,418
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				39,199,156

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A) _____		
(B) _____		
(C) _____		
(D) _____		
(E) _____		
(F) _____		
(G) _____		
(H) _____		
(I) _____		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ►		

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) _____		
(2) _____		
(3) _____		
(4) _____		
(5) _____		
(6) _____		
(7) _____		
(8) _____		
(9) _____		
(10) _____		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ►		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) Fair value of donated leasehold interest in facility under construction	12,623,180
(2) Deferred financing costs, net	154,992
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	12,778,172

Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Amount	
(1) Federal income taxes	0	
(2) Deposits	150,429	
(3) Interest Rate SWAP Agreement	1,108,085	
(4) _____		
(5) _____		
(6) _____		
(7) _____		
(8) _____		
(9) _____		
(10) _____		
(11) _____		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ►		1,258,514

2. FIN 48 (ASC 740) 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 (ASC 740).

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	43,248,602
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	30,284,419
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	12,964,183
4	Net unrealized gains (losses) on investments	4	-26,597
5	Donated services and use of facilities	5	0
6	Investment expenses	6	0
7	Prior period adjustments	7	0
8	Other (Describe in Part XIV.)	8	-152,316
9	Total adjustments (net). Add lines 4 through 8	9	-178,913
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	12,785,270

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	43,227,693
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	-26,597
b	Donated services and use of facilities	2b	0
c	Recoveries of prior year grants	2c	0
d	Other (Describe in Part XIV.)	2d	5,688
e	Add lines 2a through 2d	2e	-20,909
3	Subtract line 2e from line 1	3	43,248,602
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	0
b	Other (Describe in Part XIV.)	4b	0
c	Add lines 4a and 4b	4c	0
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	43,248,602

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	30,442,423
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	0
b	Prior year adjustments	2b	0
c	Other losses	2c	0
d	Other (Describe in Part XIV.)	2d	158,004
e	Add lines 2a through 2d	2e	158,004
3	Subtract line 2e from line 1	3	30,284,419
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	0
b	Other (Describe in Part XIV.)	4b	0
c	Add lines 4a and 4b	4c	0
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	30,284,419

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Schedule D, Part V, Line 4 - The fund is intended to support branch deficits and/or provide sponsorship for individuals to participate in YMCA programs.

Schedule D, Part X, Line 2 - The Young Men's Christian Association of Central Ohio is exempt from federal and state income taxes under Sections 501(c)(3) of the Internal Revenue Code. Income taxes on unrelated businesses income, if any, are provided at the applicable rates on income for financial reporting purposes. There was no unrelated business income tax expense for the year ended December 31, 2010. The Young Men's Christian Association of Central Ohio's income tax filings are subject to audit by various taxing authorities. The Association's open audit periods are 2007 through 2009. In evaluating its activities, management believes its position of tax-exempt status is current based on current facts and circumstances. They further have assessed that there are no activities unrelated to the purpose of the Association and therefore no tax is to be recognized. It is the policy of the Association to include in operating expenses any penalties and interest assessed by income taxing authorities. There are no penalties or interest from taxing authorities included in operating expenses for the year ended December 31, 2010. The subsidiary, YMCA Housing, Inc. is a for profit corporation and is subject to federal, state, and city income taxes at the corporate level.

Part XIV - Supplemental Information (Continued)

Schedule D, Part XI, Line 8 - Market Value of Adjustment of Interest Rate SWAP of \$152,316.

Schedule D, Part XII, Line 2d - Pledge write-offs previously recognized as revenue in prior periods of \$5,688.

Schedule D, Part XIII, Line 2d - Pledge write-offs previously recognized as revenue in prior periods of \$5,688 and Fair Market Value of adjustment loss on interest rate SWAP of \$152,316.

SCHEDULE J
(Form 990)

Department of the Treasury
Internal Revenue Service
Name of the organization

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

2010

**Open to Public
Inspection**

YOUNG MENS CHRISTIAN ASSOCIATION OF CENTRAL OHIO

Employer identification number

31-4379594

Part I Questions Regarding Compensation

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.

- | | |
|--|--|
| ☐ First-class or charter travel | ☐ Housing allowance or residence for personal use |
| ☒ Travel for companions | ☐ Payments for business use of personal residence |
| ☐ Tax indemnification and gross-up payments | ☐ Health or social club dues or initiation fees |
| ☐ Discretionary spending account | ☐ Personal services (e.g., maid, chauffeur, chef) |

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 explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

3 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.

- | | |
|---|---|
| ☒ Compensation committee | ☐ Written employment contract |
| ☐ Independent compensation consultant | ☒ Compensation survey or study |
| ☒ Form 990 of other organizations | ☒ Approval by the board or compensation committee |

4 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:

- a** Receive a severance payment or change-of-control payment from the organization or a related organization?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- 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.

5 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:

- a** The organization?
- b** Any related organization?
- If "Yes" to line 5a or 5b, describe in Part III.

6 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:

- a** The organization?
- b** Any related organization?
- If "Yes" to line 6a or 6b, describe in Part III.

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

8 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 Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b	✓	
2	✓	
4a		✓
4b		✓
4c		✓
5a		✓
5b		✓
6a		✓
6b		✓
7		✓
8		✓
9		

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

For each individual whose compensation must be reported 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.

(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
John E Bickley	(i)	262,003	0	26,636	0	32,407	0
1	(ii)	0	0	0	0	0	0
Janis Fetters	(i)	146,700	0	720	0	16,242	0
2	(ii)	0	0	0	0	0	0
Regina Tom	(i)	145,076	0	720	0	16,225	0
3	(ii)	0	0	0	0	0	0
4	(i)						
4	(ii)						
5	(i)						
5	(ii)						
6	(i)						
6	(ii)						
7	(i)						
7	(ii)						
8	(i)						
8	(ii)						
9	(i)						
9	(ii)						
10	(i)						
10	(ii)						
11	(i)						
11	(ii)						
12	(i)						
12	(ii)						
13	(i)						
13	(ii)						
14	(i)						
14	(ii)						
15	(i)						
15	(ii)						
16	(i)						
16	(ii)						

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

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. The YMCA General Assembly conference was held during 2010. Travel cost was minimal and was reported as compensation to the applicable employee.

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, 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 package and objectives for the CEO for the upcoming 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.

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Noncash Contributions

► Complete if the organizations answered "Yes" on Form
990, Part IV, lines 29 or 30.
► Attach to Form 990.

OMB No. 1545-0047

2010

**Open To Public
Inspection**

Name of the organization

Employer identification number

YOUNG MENS CHRISTIAN ASSOCIATION OF CENTRAL OHIO

31-4379594

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	✓	4	15,124	Market value
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (Donated Leasehold Int.)	✓	1	12,623,180	Cost approach and is categori
26 Other ► ()				
27 Other ► ()				
28 Other ► ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement 29 0

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1–28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		✓
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?		✓
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		✓
b If "Yes," describe in Part II.		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

Part II **Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Schedule M, Part I, Lines 25-28 - In 2010 the Association entered into a 20-year, below market lease agreement with the City of Delaware, Ohio and the state of Ohio, Adjutant General's Department for certain real property at a cost of \$1 per year. This lease is renewable for up to four, five-year terms at a cost of \$1 per year. As part of the lease agreements the City of Delaware is constructing a facility at its sole cost and expense, in accordance with the Association's approval of architectural plans for a building and other improvements, on land leased from the Adjutant General's Department. Under the lease agreement the lessor will retain title to the real property. The leasehold value for the use of the building and land were recorded at its estimated fair market value upon execution in 2010. The leasehold has been valued at the value of the completed building and land, \$12,287,900 and \$335,280, respectively, due to the length of the lease, including extensions. The valuation was determined based on a cost approach, and is categorized as a level 3 valuation measurement under ASC 820-10, Fair Value Measurement and Disclosure. Construction of the facility is expected to be completed in the fall of 2011. The Association will be responsible for providing all fitness and office equipment necessary for the operation of the facilities, as well as all costs related to the day-to-day operations of the facilities (e.g. insurance, utilities, repair and maintenance).

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

2010

**Open to Public
Inspection**

Name of the organization

Employer identification number

YOUNG MENS CHRISTIAN ASSOCIATION OF CENTRAL OHIO

31-4379594

Form 990, Part VI, Section B, Line 11a - 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 return is reviewed in detail by the Accounting Firm and Finance Committee (a subcommittee of the board) and any necessary recommendations or changes are made at this time. 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 16a - The YMCA of Central Ohio (YMCA) is in a joint venture to further its mission as it relates to 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 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 \$11,877, Youth and Family Program had revenues of \$131,059 and Consulting Services to YMCA Member Associations had revenues of \$90,000, for a total of \$232,936.

Supplemental Information (Continued)

Form 990, Part VIII, Line 7a - (i) Securities - The Association had gross sales on securities of \$9,593,432, with a cost basis of \$9,489,393, netting to a gain on sale of securities of \$104,039. (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 Downtown 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 Downtown 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 1995-2009 totaled \$199,815 and amounts deferred to future years total \$479,032, leaving \$13,860 in gains recognized during 2010.

Form 990, Part VIII, Line 10a - Gross proceeds of \$116,177 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 \$45,867 consists of clothing items, water bottles, racquetballs, goggles, locks, swim caps, bottled water, healthy snacks, etc.

Form 990, Part VIII, Line 11a 11b 11c - Insurance Proceeds - claims consisted of water damages caused by flooding (\$35,960), HVAC damages caused by storms (\$4,347) and smoke damage caused by kiln fire (\$2,045).

Form 990, Part XI, Line 5 - Net unrealized gains (losses) on investments of \$(26,597), netted with the Fair Market Value of adjustment gains (losses) on interest rate SWAP of (\$152,316), total (\$178,913).

Second Program Service Accomplishments Description

Description

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.

Third Program Service Accomplishments Description

Description

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 3,288 children in our camping programs in 2010.

Other Program Services Accomplishments

Activity Code	Description	Expense	Grants	Revenue
	Low Income Housing and 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 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 1,402 low-to very-low income adult men and women in 2010. Additionally, 19,296 meals were provided to residents through the on-site Choice Food Pantry in 2010.	2,703,442		1,141,439
	Special Needs: Funding for children 0-3 years old who are at risk of developmental delays or have a diagnosis of developmental delays is provided by federal and state sources earmarked for Temporary Assistance for Needy Families (TANF) and Part C services. Funding for adaptive equipment for adults and youth who have special needs is provided by ATOhio. These programs allow the YMCA of Central Ohio to serve persons with physical disabilities and do developmental screenings for infants, toddlers, and pre-school children. The YMCA of Central Ohio served 558 individuals in speech therapy and adaptive equipment service program and 1,626 children in the ECRN Help Me Grow and Preschool Screening Program in 2010.	1,376,362		11,923
	Youth and Family Life: The YMCA of Central Ohio's youth programs consist of Youth Sports, Y-Tribes and Leader's Club. The focus of these programs is on improved communication between family members, the development of sports skills and leadership skills. The YMCA is the starting point for many youth to learn about becoming and staying active, and developing the healthy habits they'll carry with them throughout their lives. YMCA youth sports programs help build the positive relationships that lead to good sportsmanship and teamwork. In 2010, 11,589 central Ohio youth grew in physical, emotional and social skills through Y sports programs such as basketball, soccer, martial arts, gymnastics, and dance. 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 610 people. Leader's Club is a service club for teens that operates at the YMCA of Central Ohio branches. Last year, 94 youth were served in this program.	1,023,936		131,564
	Truancy/Day Suspension: Through partnerships with the Southwestern City Schools and Columbus City Schools, juvenile courts, departments of human services, and parents, 5,084 youth in grades 6 - 12 were referred to the YMCA's Suspension/Truancy Intervention and Positive Alternative Learning for Students (PALS) in 2010. 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.	899,527		458,523
	Consulting Services to YMCA Member Associations: The YMCA of Central Ohio partners	90,000		90,347

Schedule O, Statement 3**YOUNG MENS CHRISTIAN ASSOCIATION OF CENTRAL OHIO**

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.

Total:	6,093,267	0	1,833,796
---------------	------------------	----------	------------------

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service
Name of the organization

YOUNG MENS CHRISTIAN ASSOCIATION OF CENTRAL OHIO

Related Organizations and Unrelated Partnerships

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

OMB No. 1545-0047

2010

**Open to Public
Inspection**

Employer identification number

31-4379594

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

Part II 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.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							

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

Cat. No. 50135Y

Schedule R (Form 990) 2010

Part III Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) YMCA Housing Inc. 40 West Long Street 2	Low Income Housing	OH	YMCA Housing Inc	Related	-274,627	-2,873,722		✓	0		✓	
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
(1) YMCA Housing Inc. (61-1392962) 40 West Long Street, Columbus, OH 43215	Low Income Housing	OH	N/A	C	-274,627	-2,873,722	78.74%
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

		Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity	1a	✓
b	Gift, grant, or capital contribution to other organization(s)	1b	✓
c	Gift, grant, or capital contribution from other organization(s)	1c	✓
d	Loans or loan guarantees to or for other organization(s)	1d	✓
e	Loans or loan guarantees by other organization(s)	1e	✓
f	Sale of assets to other organization(s)	1f	✓
g	Purchase of assets from other organization(s)	1g	✓
h	Exchange of assets	1h	✓
i	Lease of facilities, equipment, or other assets to other organization(s)	1i	✓
j	Lease of facilities, equipment, or other assets from other organization(s)	1j	✓
k	Performance of services or membership or fundraising solicitations for other organization(s)	1k	✓
l	Performance of services or membership or fundraising solicitations by other organization(s)	1l	✓
m	Sharing of facilities, equipment, mailing lists, or other assets	1m	✓
n	Sharing of paid employees	1n	✓
o	Reimbursement paid to other organization for expenses	1o	✓
p	Reimbursement paid by other organization for expenses	1p	✓
q	Other transfer of cash or property to other organization(s)	1q	✓
r	Other transfer of cash or property from other organization(s)	1r	✓

	(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
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.			
	See Schedule R, Part VII, Statement 1			
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

Part VI **Unrelated Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

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.

	(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?		(e) Share of end-of-year assets	(f) Disproportionate allocations?		(g) Code V--UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) General or managing partner?	
				Yes	No		Yes	No		Yes	No
(1)											
(2)											
(3)											
(4)											
(5)											
(6)											
(7)											
(8)											
(9)											
(10)											
(11)											
(12)											
(13)											
(14)											
(15)											
(16)											

Part VII **Supplemental Information**

Supplemental information Complete this part to provide additional information for responses to questions on Schedule R (see instructions).

Description of Covered Relationships and Transaction Thresholds

		Amount involved
Name	YMCA Housing Limited Partnership	1,471,054
Transaction type	p	
Method of determining amount involved	Rents collected by the YMCA Housing Limited Partnership during the period are recognized as revenue at the end of each period.	