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... Form 990

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

| Depa Inter | artment of nat Revenu | the Treasury Le Service | | ► The organization may have | to use a copy of thi | is return to sat | tisfy state reporti | ng requirem | ents | Оре | in to Public | Inspection |
|--------------------------------|--|---------------------------------------|-------------------------|--|---|------------------|---------------------|---------------|-----------------------------------|--------------|-------------------------------------|---|
| | For the | 2008 calend | ar year, o | or tax year beginning | | , 200 | 8, and ending | g | | | , | |
| В | Check if a | pplicable | | C Name of organization | | <u> </u> | | | D Employ | er Ident | ification Numb | er |
| | Addre | ess change | Please use IRS label | Young's Men's Ch | cistian As | sn of La | fayette | LA INC | 58-1 | 640 | 136 | |
| | Name | e change | or print or type. | Number and street (or P O t | ox if mail is not geli | ivered to street | addr) Room/su | ııte | E Telepho | ne numl | ber | |
| | Initial | l return | See specific | 800 E Farrel Rd | | | | | (337 | 7) 7 | 81-3872 | 2 |
| | Term | ination | Instruc- tions | City, town or country | | Stat | e ZIP code + 4 | | | | | |
| | X Amer | nded return | | Lafayette | | LA | 70508 | | G Gross re | eceipts | \$ 428,0 | 615. |
| | Apple | cation pending | F Name a | and address of principal officer | | | I | | a group returi | | ılıates? | Yes X No |
| | _ | | Dennis St | epanek i 800 E Farre: | L Rd Lafaye | ette 1 | LA 70508 | | affiliates incl- attach a list | | structions) | Yes No |
| ŀ | Tax-e | xempt status | X 501 | (c) (3) ◄ (insert n | o) 494 | 17(a)(1) or | 527 | 11 140 | attacii a iist | (366 1116 | structions) | |
| J | Webs | ite: ► N/I | A | | | | | H(c) Group | exemption nu | mber • | <u> </u> | |
| K | Type of | organization | X Corpora | ation Trust Associati | on Other► | [! | L Year of Formati | on 1984 | 4 M/s | tate of I | egal domicile | LA |
| Pa | ırt I | Summa | | | | | | | | | | |
| | | | | janization's mission or mo | | | | | | | | |
| ø | | | | values and char | | | | | | | | |
| auc | | | | tegrity, and res | | | | | | | | |
| Activities & Governance | _ | | | e through progr | | | | | | | ūa poaz | <u>/ </u> |
| G | | | | if the organization discont bers of the governing body | | | cosed of more | e than 25° | % of its as | | 4 | |
| প্ | | | | t voting members of the go | | | = 1b) | | • | | 4 | |
| ţ | 1 | | | yees (Part V, line 2a) | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | , | | | 5 | 46 | |
| ξ | | | | eers (estimate if necessar | y) | | | | | | 5 | |
| ¥ | 7a To | otal gross ur | related b | ousiness revenue from Par | t VIII, line 12, c | column (C) | | | | 7 a | | 0. |
| | bΝ | et unrelated | business | taxable income from Forr | n 990-T, line 34 | 4 | | | | 7b | | |
| | ! | | | | | | | P | rior Year | | Curre | nt Year |
| ۵ | 8 C | ontributions | and gran | ts (Part VIII, line 1h) | | | | | 100,5 | | | 35,000. |
| ne Pur | 9 Program service revenue (Part VIII, line 2g) | | | | | | | ļ | 267,4 | | | 393 , 615. |
| Revenue | i | · · · · · · · · · · · · · · · · · · · | | | | | | | 7 | 39. | | |
| • | | | | | | | 10 | | 260 7 | | | 100 (15 |
| | | | | nes 8 through 11 (must eq | | | ine (2) | | 368,7 | | 4 | 128,615. |
| | į. | | | ounts paid (Part IX, colum | |) | | | | 0. | | |
| | 1 | | | members (Part IX, column | | /A> 1 | 5 10) | | 254 1 | | <u> </u> | 225 001 |
| e S | i | | • | nsation, employee benefits | - | nn (A), line | s 5-10) | | 254,1 | 88. | | 235,081. |
| Expenses | 16a P | rofessional f | unaraisir | ig fees (Part IX, column (A | J), line 11e) | | | | _ | | | • • • • • |
| ď. | b To | otal fundrais | ıng expei | nses (Part IX, column (D) | line 25) > | | 12,446. | ** | | \$. <i>i</i> | 3 | (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) |
| _ | 17 0 | ther expense | es (Part I | X, column (A), lines 11a-1 | 1d, 11f 24f) | | | | 206,9 | | | 235 , 623. |
| | 18 To | otal expense | s Add III | nes 13-17 (must equal Par | t IX, column (A | N), line 25) | | L | 461,1 | | | 470,704. |
| | 19 R | levenue less | expense | s Suptract line 18 from lin | ie_12 | | | | -92 , 3 | 59. | - | -42,089. |
| Net Assoto or Fund Balancos | | | | | | | | Begi | nning of Y | | | of Year |
| Solar | 20 T | otal assets (| | | | | | | 617,4 | | | 558 , 742. |
| A D | 21 To | otal liabilitie: | s (Part X | , line 26) | | | | ļ | 469,4 | 57. | 4 | 411,370. |
| | | | | ances Subtract line 21 fro | m line 20 | | | <u> </u> | 148,0 | 25. | | 147,372. |
| Pa | art II | Signati | <u>ire Blo</u> | ck | | | | | | | | |
| | | Under penaltie | s of perjury, | I declare that I have examined the Declaration of preparer (other th | s return, including a | accompanying s | schedules and sta | itements, and | d to the best | of my ki | nowledge and | belief, it is |
| ٠. | | | | - Doolard to Francis (control to | 2 000) 0 00000 | | | | | | | |
| Sig | gn | | | | | | | | | | | |
| He | ere | Signature | | | | | | | ate | | | |
| | | | s Ste | panek II | | | | Exec | utive | Dire | ctor | |
| | | Type or pr | in name ar | o me | | | I Deta | | | 76 | renarer's inent | tifving number |
| D- | .i.d | - | | | 1 | r | Date | s | theck if elf- | | reparer's ident see instruction: | 5) |
| Pa Pr | | Preparer s signature | | 146 | ~~~/ | A | 02 (02 (5 | | mployed 🏲 | X | | |
| | rer's | <u> </u> | | nk Heikamp Jr | <i>U</i> | | 03/03/1 | 1 | | | | |
| Üs | se | Firm's name (or yours if self | | nk Heikamp Jr | | | | | | | | |
| | nly | employed), address, and | | 3 CREPE MYRTLE I |)R | | | | IN ► | | | |
| | | ZIP + 4 | RAY | NE | | LA 705 | 578-1743 | l P | hone no 🕞 | | | |

No

Yes

May the IRS discuss this return with the preparer shown above? (see instructions)

| Form | 990 (2008) Young's Men's Christian Assn of Lafayette LA INC 58-1 | 640136 | Page 2 |
|--------------|--|-------------------|-----------------|
| Par | t III · Statement of Program Service Accomplishments (see instructions) | | |
| 1 | Briefly describe the organization's mission | | |
| | The YMCA of Lafayette strives | | |
| | to strengthen values and character in families by stressing responsible | llity, | |
| | See Form 990, Page 2, Part III, Line 1 (continued) | | |
| | 2001.011.3301.7.030.21.7.01.11.7.11.01.7.201.11.11.007 | | |
| 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 | X No |
| | | | <u> </u> |
| _ | If 'Yes,' describe these new services on Schedule O | □ vaa I | V No |
| 3 | Did the organization cease conducting, or make significant changes in how it conducts, any program services? | ∐ Yes [| X No |
| | If 'Yes,' describe these changes on Schedule O | | |
| 4 | Describe the exempt purpose achievements for each of the organization's three largest program services by expension 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocation | ses Section 501 | (c)(3) total |
| | expenses, and revenue, if any, for each program service reported | is to others, the | totai |
| | | | |
| - | | | |
| 4 a | (Code) (Expenses \$ 278,708. including grants of \$ 0.) (Revenue | | |
| | After School Care Program provides all children in our area with a | | |
| | safe, educational, and fun environment to finish their homework | | |
| | while waiting for their parents to get off of work. This program | | |
| | comprises about 67% of program revenues and expeditures. | | |
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| | | | |
| 41 | (Code) (Expenses \$ 103,771. including grants of \$ 0.) (Revenue | \$ 107 | 7.154.) |
| • | Summer Day Camp Program provides all children in our area with a | | |
| | safe, educational, and fun environment to finish their homework | | |
| | | | |
| | while waiting for their parents to get off of work. This program | | |
| | comprises about 25% of program revenues and expeditures. | | |
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| 40 | c (Code) (Expenses \$ 33,207. including grants of \$ 0.) (Revenue | \$34 | 1,289. |
| | Holiday Camp Program provides all children in our area with a | | |
| | safe, educational, and fun environment to finish their homework | | |
| | while waiting for their parents to get off of work. This program | | |
| | comprises about 8% of program revenues and expeditures. | | |
| | compiliates about 00 of program revenues and expeditures. | | |
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| | | | |
| 4 | d Other program services (Describe in Schedule O) | | |
| | (Expenses \$ including grants of \$) (Revenue \$ | |) |
| | | , | |
| 4 | e Total program service expenses ► \$ 415, 686. (Must equal Part IX, Line 25, column (B)) | | |

| • | | | Yes | No | |
|-------------|--|------|--------------|--------|--|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A | 1 | х | | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? | 2 | Х | | |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I | 3 | | x | |
| 4 | Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II | 4 | | X | |
| 5 | Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III | 5 | | | |
| 6 | Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I | 6_ | | X | |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes' complete Schedule D, Part II | 7_ | | X | |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III | | | | |
| 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 hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V | 10 | | Х | |
| 11 | Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If 'Yes,' complete Schedule D, Parts VI, VIII, IX, or X as applicable | 11 | х | | |
| 12 | Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII | 12 | X | | |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E | 13 | | X | |
| 14 a | Did the organization maintain an office, employees, or agents outside of the U.S.? | 14a | | X | |
| t | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If 'Yes,' complete Schedule F, Part I | 14b | | Х | |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II | 15 | | х | |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III | 16 | | _x_ | |
| 17 | Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If Yes, complete Schedule G, Part I | 17 | L | X | |
| 18 | Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II | 18 | | X | |
| 19 | Did the organization report more than \$15,000 on Part Vill, line 9a? If 'Yes, complete Schedule G, Part III | 19 | | X | |
| 20 | Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H | 20 | | X | |
| 21 | Did the organization report more than \$5,000 on Part IX, column (A), line 17 If 'Yes, 'complete Schedule I, Parts I and II | 21 | | Х | |
| 22 | Did the organization report more than \$5,000 on Part IX, column (A), line 27 If 'Yes' complete Schedule I, Parts I and III | 22 | <u> </u> | Х | |
| 23 | Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5 ⁷ If 'Yes,' complete Schedule J | 23 | | x | |
| 24 a | a 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, and that was issued after December 31, 2002? If 'Yes' answer questions 24b-24d and complete Schedule K If 'No,'go to question 25 | 24a | | х | |
| 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 | | | |
| 25 a | Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I | 25a | | х | |
| t | Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If 'Yes,' complete Schedule L, Part I | 25b | | х | |
| 26 | Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes' complete Schedule L, Part II | 26 | | х | |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III | 27 | | х | |
| BAA | | Forr | n 990 | (2008) | |

Part IV

Checklist of Required Schedules (continued)

Page 4

No

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X

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28 During the tax year, did any person who is a current or former officer, director, trustee, or key employee

a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If 'Yes,' complete Schedule L, Part IV

b Have a family member who had a direct or indirect business relationship with the organization? If 'Yes,' complete Schedule L, Part IV

c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If 'Yes,' complete Schedule L, Part IV

28b

29 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M

30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M

31 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I

32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If 'Yes,' complete Schedule N, Part II*

33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I

34 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1

35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2

36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2

37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI

Form 990 (2008)

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| rant V Statements Regarding Other INS Finings and Tax Compliance | | | |
|--|------------|----------------|-------------|
| | | Yes | No |
| 1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U S Information Returns Enter -0- if not applicable | 9 | | |
| b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable | 0 | | |
| c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gamin (gambling) winnings to prize winners? | ıg1 | c X | . ' |
| 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 | 46 | | |
| 2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | | 2b X | |
| Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions) | <u> </u> | | _ |
| 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? | | 3a | х |
| b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O | | 3b | <u> </u> |
| 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over financial account in a foreign country (such as a bank account, securities account, or other financial account)? | , a | \$a | х |
| b If 'Yes,' enter the name of the foreign country | , | | |
| See the instructions for exceptions and filing requirements for Form TD F 90-22.1 , Report of Foreign Bank and Financial Accounts | | | |
| 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | | 5a | <u> </u> |
| b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | <u>_</u> : | 5b | X |
| c If 'Yes,' to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? | _! | 5c | |
| 6a Did the organization solicit any contributions that were not tax deductible? | <u></u> | 5a | X |
| b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts wer deductible? | e not | 5b | |
| 7 Organizations that may receive deductible contributions under section 170(c). | | | × |
| a Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75? | | 7 a | X |
| b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? | L | 7 b | |
| c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to Form 8282? | file | 7 c | Х |
| d If 'Yes,' indicate the number of Forms 8282 filed during the year | | | |
| e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | | 7e | X |
| f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | | 7 f | X |
| g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? | <u>_</u> | 7 g | X |
| h For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as require | ∍d? | 7 h | X |
| 8 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) | 1 | | |
| supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? | | 8 | Х |
| 9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. | _ | | |
| a Did the organization make any taxable distributions under section 4966? | ' | 9 a | X |
| b Did the organization make any distribution to a donor, donor advisor, or related person? | <u></u> | 9 b | X |
| 10 Section 501(c)(7) organizations. Enter | ' | | |
| a Initiation fees and capital contributions included on Part VIII, line 12 | | | - |
| b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b | | | , |
| 11 Section 501(c)(12) organizations. Enter | } | | |
| a Gross income from other members or shareholders 11 a | —— | : | 1 |
| 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? b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b | <u> </u> | 2a | |
| b if 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b BAA | | orm 990 | (2008 |
| | | | , |

Foim 990 (2008) Young's Men's Christian Assn of Lafayette LA INC 58-1640136 Page

Part VI Governance, Management and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code)

| <u>.</u> | required by the internal Nevertue Code) | | | | |
|----------|---|---|---------|--------|----------|
| Sec | tion A. Governing Body and Management | | | | |
| | For each 'Yes' response to lines 2-7b below, and for a 'No' response to lines 8 or 9b below, deprocesses, or changes in Schedule O. See instructions | escribe the circumstances, | | Yes | No |
| 1 a | Enter the number of voting members of the governing body | 1a 4 | | - | |
| Ł | Enter the number of voting members that are independent | 1 b 4 | 1 | | 1 |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business rel officer, director, trustee or key employee? | ationship with any other | 2 | - | X |
| 3 | Did the organization delegate control over management duties customarily performed by or ur of officers, directors or trustees, or key employees to a management company or other person | nder the direct supervision | 3 | | <u>x</u> |
| 4 | Did the organization make any significant changes to its organizational documents | | 4 | | <u>X</u> |
| | since the prior Form 990 was filed? | | | | |
| 5 | Did the organization become aware during the year of a material diversion of the organization | n's assets? | 5 | | X |
| 6 | Does the organization have members or stockholders? | | 6 | | <u>X</u> |
| 7 8 | Does the organization have members, stockholders, or other persons who may elect one or magoverning body? | nore members of the | 7a | | X |
| 1 | Are any decisions of the governing body subject to approval by members, stockholders, or other | her persons? | 7b | | <u>X</u> |
| 8 | Did the organization contemporaneously document the meetings held or written actions under the following | taken during the year by | | | |
| ā | The governing body? | | 8a | Х | |
| ı | Each committee with authority to act on behalf of the governing body? | | 8b | Х | |
| 9 8 | Does the organization have local chapters, branches, or affiliates? | | 9a | | _X |
| ı | of 'Yes,' does the organization have written policies and procedures governing the activities of and branches to ensure their operations are consistent with those of the organization? | f such chapters, affiliates, | 9ь | | |
| 10 | Was a copy of the Form 990 provided to the organization's governing body before it was filed describe in Schedule O the process, if any, the organization uses to review the Form 990 | ⁹ All organizations must | 10 | х | |
| 11 | Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who can organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O | nnot be reached at the | 11 | х | |
| Sec | tion B. Policies | | | | |
| | | | | Yes | No |
| 12 | Does the organization have a written conflict of interest policy? If 'No,' go to line 13 | | 12a | Χ | |
| I | Are officers, directors or trustees, and key employees required to disclose annually interests to conflicts? | that could give rise | 12b | х | |
| • | Does the organization regularly and consistently monitor and enforce compliance with the pol Schedule O how this is done | licy? If 'Yes.' describe in | 12c | | X |
| 13 | Does the organization have a written whistleblower policy? | | 13 | | <u>X</u> |
| 14 | Does the organization have a written document retention and destruction policy? | | 14 | | <u>X</u> |
| 15 | Did the process for determining compensation of the following persons include a review and a persons, comparability data, and contemporaneous substantiation of the deliberation and dec | approval by independent cision | | | |
| ; | The organization's CEO, Executive Director, or top management official? | | 15a | | X |
| | Other officers of key employees of the organization? | | 15b | | <u>X</u> |
| | Describe the process in Schedule O (see instructions) | | | | |
| 16 | a Did the organization invest in, contribute assets to, or participate in a joint venture or similar entity during the year? | arrangement with a taxable | 16a | | x |
| i | olf 'Yes,' has the organization adopted a written policy or procedure requiring the organization in joint venture arrangements under applicable federal tax law, and taken steps to safeguard | to evaluate its participation the organization's exempt | 16b | | |
| Sar | status with respect to such arrangements? | | 1 .00 | · | |
| | List the states with which a copy of this Form 990 is required to be filed > | | | | |
| | Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, a inspection Indicate how you make these available. Check all that apply | nd 990-T (501(c)(3)s only) av | aılable | for pu | blic |
| | Own website Another's website X Upon request | | | | |
| 19 | Describe in Schedule O whether (and if so, how) the organization makes its governing docum statements available to the public | | | | al |
| 20 | State the name, physical address, and telephone number of the person who possesses the b Dennis Stepanek II 800 Farrell Rd Lafayette | | | | 9622 |
| | | | | | |

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Form 990 (2008)

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

1 a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- 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) or more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

| Check this box if the organization did not compete (A) (B) | | | | (6 | ;) | | | (D) | (E) | (F) | | |
|--|------------------|---------------------------------|----------------------|--------|-------------|---------------------------------|------------|--|--|--|--|--|
| Name and Title | Average hours | Position (check all that apply) | | | | | _ | Reportable | Reportable compensation from | Estimated amount of other | | |
| | per week | מלואילי אַ לי זענ <i>יי</i> בּ | urshlutronal trustee | Offi 🗈 | Key emphyer | High est coinnerisated employee | r (alvine) | Reportable compensation from the organization (W 2/1099 MISC) | related organizations (W-2/1099-MISC) | compensation from the organization and related organizations | | |
| Pam Crist | · | | | | | | | | | _ | | |
| Secretary Treas | 1.00 | X | <u></u> | X | | | | 0. | 0. | 0. | | |
| Dennis Stepanek II | | | | | | | | | | | | |
| Executive Director | 40.00 | Χ | | Χ_ | | Х | | 48,561. | 0. | 0. | | |
| Andre' Mitchel | | | | | | | | | | | | |
| Executive Director | 10.00 | X | | X | | | | 0. | 0. | 0. | | |
| Brian Hotard | | | | | | | | | | | | |
| President | 2.00 | Х | | Х | | | <u> </u> | 0. | 0. | 0. | | |
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TEEA0107 04/24/09

| Part VII Section A. Officers, Directors, Trus (A) | (B) | | | | c) | | | (D) | (E) | (F) |
|--|---|--------------------------------|-----------------------|-----------------------|---------------|------------------------------|--------------|--|---|--|
| Name and Title | Average hours | | | | | , | | Reportable compensation from | Reportable | Estimated amount of other |
| | per week | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | the organization (W-2/1099 MISC) | compensation from related organizations (W 2/1099-MISC) | compensation from the organization and related organizations |
| | | | | | | | | | | |
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| | 1 | | | | | | | | | |
| 1 b Total | | | | | | | > | 48,561. | c |). (|
| 2 Total number of individuals (including those in 1a) w organization ► | /ho rece | ived | mo | re th | nan | \$100 | 0,00 | 0 in reportable co | mpensation from | |
| 3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in 4 For any individual listed on line 1a, is the sum of rethe organization and related organizations greater the individual 5 Did any person listed on line 1a receive or accrue corendered to the organization? If 'Yes,' complete Scheduler | ndividual portable nan \$15 ompens | com 0,00 | nper 02 li | nsatı f 'Ye m a | on a es' c | and o | othe lete | r compensation fr Schedule J for รเ | om uch | Yes N 3 X 4 X |
| Section B. Independent Contractors | | | | | | | that | ranguad more th | on \$100,000 of | |
| Complete this table for your five highest compensation from the organization | eu maep | JEI IÜ | ent i | COLI | u aCl | .UI 5 | | <u> </u> | | |
| (A) Name and business addres | ss | | | | | | | Description | of Services | (C) Compensation |
| | | | | | | | | | | |
| | | | | | | | | | | |
| 2. Total number of independent control of the latest and the lates | these | 11 | ·/ba | ros | 211.15 | d | | han \$100 000 :- | | |
| 2 Total number of independent contractors (including compensation from the organization ► | uiose in | ۱) ۱ | WIIO | rece | =1VE | u mo | אופ נ | 11a11 \$100,000 III | | |

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| Par | t VIII Statement of Revenue | | (D) | (0) | (D) |
|---|---|---------------------------------------|--|---|--|
| • | | (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 b Membership dues c Fundraising events d Related organizations e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above g Noncash contribns included in lns 1a-1f h Total. Add lines 1a-1f | 35,000. | | - | |
| ä | Business Code | | | | |
| VEN | 2a After School Program 1 | 273,192. | 273,192. | 0. | 0. |
| | b Summer Day Camp 2 | 109,530. | 109,530. | 0. | 0. |
| N.C | c Holiday Camp 3 | 10,893. | 10,893. | 0. | 0. |
| 1 SEI | d | | | <u></u> | |
| RAN | e All About an annual and a second | | | | |
| PROGRAM SERVICE REVENUE | f All other program service revenue g Total. Add lines 2a-2f | 393,615. | | | . 1 |
| | 3 Investment income (including dividends, interest and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties | | | | |
| | (I) Real (II) Personal | | , | | ·' ! |
| - } | 6a Gross Rents | | | | ·** ' |
| | b Less rental expenses | | ν | | * * |
| | c Rental income or (loss) | · · · · · · · · · · · · · · · · · · · | | | |
| | d Net rental income or (loss) | | | | |
| | 7a Gross amount from sales of assets other than inventory (i) Securities (ii) Other | | | > | |
| | b Less cost or other basis and sales expenses | | , | | - " |
| | c Gain or (loss) | | , | | |
| | d Net gain or (loss) | | | | A Angel of the Color of the Col |
| NUE | 8a Gross income from fundraising events (not including \$ | , | | | , |
| OTHER REVEN | of contributions reported on line 1c) | | | | |
| ER | See Part IV, line 18 a | | | | 1 |
| OTH | b Less direct expenses b | | | | |
| | c Net income or (loss) from fundraising events | | | <u> </u> | |
| | 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 | | _ | | r |
| | b Less cost of goods sold b | | | | |
| | c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code | | | | |
| | | | _ | | - |
| | 11ab | | | | |
| | c | | | | |
| | d All other revenue | | | | |
| | e Total. Add lines 11a-11d | | | | |
| | 12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c. and 11e | 428,615. | 393,615. | 0. | 0. |

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

| | All other organizations must comp | lete column (A) but are | • | | d (D). |
|------|--|-------------------------|------------------------------|-------------------------------------|----------------------------------|
| Do 1 | not include amounts reported on lines 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 | | | | |
| 2 | | | | | , |
| 3 | Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 | | | | (|
| 4 | | | | 4 | * |
| 5 | Compensation of current officers, directors, trustees, and key employees | 48,561. | 40,646. | 5,633. | 2,282. |
| 6 | Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B) | | | | |
| 7 | Other salaries and wages | 168,433. | 145,850. | 15,100. | 7,483. |
| 8 | Pension plan contributions (include section 401(k) and section 403(b) employer contributions) | 1,484. | 0. | 1,484. | 0. |
| 9 | Other employee benefits | 1.5.500 | 14 004 | 1 600 | 750 |
| 10 | Payroll taxes | 16,603. | 14,224. | 1,620. | 759. |
| | Fees for services (non-employees) | | | | |
| | a Management b Legal | | | | |
| | c Accounting | | | · · · | |
| | d Lobbying | | | | |
| | e Prof fundraising svcs See Part IV, In 17 | | × '5', + ++ × | - 1.6 | |
| | f Investment management fees | | | | |
| | g Other | | | | |
| | Advertising and promotion | | | | |
| | Office expenses | 7,143. | 0. | 7,143. | 0. |
| 14 | Information technology | | | | |
| 15 | Royalties | | | | |
| 16 | Occupancy | | | | |
| 17 | Travel | 131. | 131. | 0. | 0. |
| 18 | Payments of travel or entertainment expenses for any federal, state, or local public officials | | | | |
| 19 | Conferences, conventions, and meetings | | | | |
| 20 | Interest | 38,448. | 34,604. | 1,922. | 1,922. |
| 21 | F | | | | |
| | Depreciation, depletion, and amortization | 15,458. | 14,685. | 773. | 0. |
| | Insurance | | | | |
| 24 | Other expenses Itemize expenses not covered above (Expenses grouped together | | | , ; | * |
| | and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below) | - | | , | · · · |
| | a Program Expenses After school & Day camps | 87,250. | 87,250. | 0. | 0 |
| | b Property Insurance | 19,524. | 18,548. | 976. | 0. |
| | c Utilities Telephone Fire Alarm | 9,778. | 9,289. | 489. | |
| | d Repairs | 29,663. | 28,179. | 1,484. | 0. |
| | e Taxes | 635. | 0. | 635. | 0. |
| | f All other expenses | 27,593. | 22,280. | 5,313. | 0 |
| _25 | Total functional expenses Add lines 1 through 24f | 470,704. | 415,686. | 42,572. | 12,446 |
| 26 | | | | | |

| 1 Cash — non-interest-basining 3,036, 1 21,526, 2 2,67,227, 3 2 6,0227, 3 3 Peleges and grants receivable, net 4 4 4 4 4 4 4 4 4 | • | | | | | (A) Beginning of year | | (B) End of year |
|--|--|------|--|----------------------|--------------------------------|--|--|----------------------------|
| Savongs and temporary cash investments 3, Piedigs and grains recovable, net 4 Accounts recovable, net 4 Accounts recovable, net 5 Accounts recovable, net 5 Recovables from control and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L 5 Complete Part II of Schedule L 7 7 Complete Part II of Schedule D 10 593,429 554,684 10c 539,2256 11 11 11 11 11 11 11 | | 1 | Cash - non-interest-bearing | | | 3,036. | 1 | 21,528. |
| 3 Piedgas and grants recervable, net 4 4 4 4 4 4 4 4 4 | | | • | | | | 2 | |
| A Accounts receivable, net For Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L. Receivables from chert advantaged persons. (as defined under section 4958(n)) and persons described in section 4958(n) (3) (3) Complete Part II of Schedule L. 7 Notes and loans receivable, net 8 Inventiones for sale or use 9 Prepaid expenses and deferred charges 10a Land, busingings, and equipment cost basis b Less accumulated depreciation. Complete Part IV of Schedule D. 11 Investments - publicly-traded securities 12 Investments - program-related See Part IV, line II 13 Investments - program-related See Part IV, line II 14 Intangible assets 10 Total assets. Acid lines I through 15 (must equal line 36) 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Excerce was ecount liabilities 22 Payables in current and former officers, directors, fusions, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule D. 22 Payables in current and former officers, directors, fusions, key employees. highest compensated employees, and disqualified persons. Complete Part II of Schedule D. 23 Secured mortgages and notes payable to unrelated third parties 24 Unrestricted net assets 29 Permanently restricted net assets 20 Capital stock or trust principal, or current funds 31 Park-in or ceptial surplus, or land, building, and equipment fund 33 Total liabilities. Acid lines of an expense and net assets funding and equipment fund 33 Total liabilities. Acid lines of an expense and net assets funding and equipment fund 33 Total ne | | | | | Ì | | 3 | |
| Receivables from current and former officers, circlostrs, tustees, key employees, or other related parties. Complete Part IV of Schedule L. Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons discended in section 4958(f)(3)(8). Complete Part II of Schedule L. 7. 8. Inventiories for sale or use 9. Prepaid experies and celetred charges 10a Land, buildings, and equipment cost basis b Less accumulated depreciation. Complete Part IV of Schedule D. 11. Investments – publicly-traded securities 12. Investments – publicly-traded securities 13. Investments – publicly-traded securities 14. Intanghie assets 15. Chief assets See Part IV, line 11 16. Total assets Add lines 1 through 15 (must equal tine 34) 17. Accounts payable and accrued expenses 18. Grahis payable 19. Deferred revenue 20. Tax exempt bond liabilities 21. Escrow account liability. Complete Part IV of Schedule D 22. Payables to current and former officers, circetors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule D 22. Payables to current and former officers, circetors, trustees, key employees, highest compensated employees, and dequalified persons. Complete Part II of Schedule D 22. Payables to current and former officers, circetors, trustees, key employees, highest compensated employees, and dequalified persons. Complete Part II of Schedule D 22. Tax exempt bond liabilities. Add lines 17 through 25 23. Total liabilities. Add lines 17 through 25 24. Unsecured notes and loans payable to unrelated third parties 25. Total allabilities. Add lines 17 through 25 26. Total liabilities. Add lines 17 through 25 27. through 29 and lines 33 and 34. 28. Turner or capital surplus, or land, building, and equipment fund 39. Payables to current and balances. 149,025, 27. 147,372. 140,025, 27. 147,372. 28. Total liabilities and lines assets fund balances. 140,025, 27. 147,372. 29. Permandity restricted net assets 140,025, 27. 147,372. 20 | | | - | | | | 4 | |
| and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventiores for sale or use 9 Prepare expenses and deferred charges 10a Land, buildings, and equipment cost basis b Less accumulated deprecation Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventiores for sale or use 9 Prepare expenses and deferred charges 10a Land, buildings, and equipment cost basis b Less accumulated deprecation Complete Part VI of Schedule D 11 Investments – publicly vaded securities 12 Investments – obther securities See Part IV, line 11 13 Investments – obther securities See Part IV, line 11 14 Intangible assets 15 Other assets See Part IV, line 11 16 Total assets Add lines 1 through 15 (must equal line 34) 16 Total assets Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt born liabilities 21 Escrow account liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and idequalified persons Complete Part IV of Schedule D 23 Secured mortgages and notes payable to unrelated firrd parties 24 Unsecured notes and loans payable 26 Other labilities Complete Part X of Schedule D 27 Total liabilities. Add lines 17 through 25 28 Total liabilities. Add lines 17 through 25 29 Comparisons that follow SFAS 117, check here Manual complete lines 20 Unrestricted net assets 21 Escrow account liabilities 22 Unrestricted net assets 23 Total liabilities. Add lines 31 and 34. 29 Total liabilities. Add lines 31 and 34. 20 Capital stock or trust principal, or current funds 21 Parion or capital surplus, or land, building, and equipment fund 23 Parion or capital surplus, or land, building, and equipment fund 24 Deferred restricted net assets 25 Dermanently restricted net assets 26 Office Intallies Complete Part X of Schedule D 27 Unrestricted net assets 28 Permanently restricted net assets 39 Total liabilities. Add lines 31 and 3 | | 5 | Receivables from current and former officers, directors | s, trustee | s, key employees, | | 5 | |
| and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L 7 Notes and lose receivable, net 8 Inventories for sale or us 9 Prepade expenses and deferred charges 10a Land, buildings, and equipment cost basis b Less accumulated depreciation Complete Part VI of Schedule D 11 Investments – publicly-traded securities 12 Investments – publicly-traded securities 13 Investments – protein reviewed by a note of the securities See Part IV, line 11 14 Intangulore assets 15 Other assets See Part IV, the 11 16 Total assets Add lines I! through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 19 Deferred revenue 20 Tax exempt bond liabilities 20 Deferred revenue 21 Escrow account liability Complete Part IV of Schedule D 22 Payables to current and former officers, tirustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule D 23 Total flabilities. And lines I7 through 25 26 Total flabilities. And lines I7 through 25 27 Unrescruced notes and loans payable or unrelated third parties 28 Temporarily restricted net assets 29 Permanently restricted net assets 20 Permanently restricted net assets 20 Permanently restricted net assets 21 At 8, 025, 27 21 Lagrations that follow SFAS 117, check here Part II of Schedule D 30 Capital stock or trust principal, or current funds 31 Tadd in or capital surplus, or land, building, and equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total leassets | | 6 | • | | section 4958(f)(1)) | | | |
| 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepared expenses and deferred charges 10a Land, buildings, and equipment cost basis b Less accumulated depreciation Complete Part V of Schedule D 11 Investments – publicly-traded securities 12 Investments – publicly-traded securities 13 Investments – publicly-traded securities 14 Investments – program related See Part IV, line 11 13 Investments – program related See Part IV, line 11 14 Intangle assets 15 Other assets See Part IV, line 11 16 Total assets Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond habitities 21 Escrow account liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part IV of Schedule D 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans sayable 25 Other labitiles. Add lines 17 through 25 26 Total liabilities. Add lines 17 through 25 27 Unrestricted net assets 28 Total liabilities. Add lines 17 through 25 29 Permanently restricted net assets 20 Capital stock or trust principal, or current funds 29 Total liabilities. Add lines 31 and 34 30 Capital stock or trust principal, or current funds 31 Paria in or capital surplus, or land, building, and equipment fund 31 Paria in or capital surplus, or land, building, and equipment fund 31 Paria in or capital surplus, or land, building, and equipment fund 31 Paria in or capital surplus, or land, building, and equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total liabilities. Add lines 35 and 34. 30 Capital stock or trust principal, or current funds 31 Paria in or capital surplus, or sand, building, and equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total liabilities and net assets funded by an independent accountant? 4 Accounting method used to prepare the Form 990 Cash Accusal | | Ū | , | | ```` | TAXABLE SERVICE AND ADMINISTRATION OF THE PROPERTY OF THE PROP | 6 | |
| 10a Land, buildings, and equipment cost basis 10a 593,429. | A | 7 | | | | | 7 | |
| 10a Land, buildings, and equipment cost basis 10a 593,429. | Š | | | | | | 8 | |
| 10a Land, buildings, and equipment cost basis 10a 593,429. | Ī | _ | | | | 3,199. | 9 | 3,199. |
| b Less accumulated depreciation Complete Part Vi of Schedule D 11 Investments - publicly-traded securities 11 Investments - other securities See Part IV, line I1 12 Investments - other securities See Part IV, line I1 13 Investments - other securities See Part IV, line I1 14 Intangible assets 15 Other assets See Part IV, line I1 16 Total assets Add lines 1 through 15 (must equal line 34) 16 Total assets Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow account liability Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 23 Secured mortpages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Total liabilities. Add liabilities. Ad | - | | | 10a | 593,429. | · · · · · · · · · · · · · · · · · · · | , | , |
| Schedule D | | | | | | * | | |
| 11 Investments - publicly-traded securities 12 Investments - other securities See Part IV, line 11 13 Investments - program-related See Part IV, line 11 13 International See Part IV, line 11 14 Intangible assets 14 Intangible assets 14 Intangible assets 14 Intangible assets 15 Other assets See Part IV, line 11 1, 016 15 1, 016 15 1, 016 16 Total assets Add lines 1 through 15 (must equal line 34) 617, 482 16 558, 742 17 Accounts payable and accrued expenses 20, 166 17 16, 068 18 18 19 Deterred revenue 19 Deterred revenue 19 20 21 22 22 22 23 24 22 24 22 24 22 24 22 24 23 24 25 25 27 28 28 29 29 29 29 29 29 | | _ | | 106 | 54,203. | 554,684. | 10 c | 539,226. |
| 12 Investments - other securities See Part IV, line 11 13 Investments - program-related See Part IV, line 11 13 14 Intample assets 14 Intample assets 14 Intample assets 15 Other assets See Part IV, line 11 16 Total assets See Part IV, line 11 16 Total assets Add lines 1 through 15 (must equal line 34) 617, 482, 16 558, 742, 17 Accounts payable and accrued expenses 20,166, 17 16,068, 18 Grants payable 18 Grants payable 19 Deferred revenue 19 Deferre | | 11 | | | | | 11 | |
| 13 Investments – program-related See Part IV, line 11 14 15 15 17, 016. 15 17, 016. 15 17, 016. 15 17, 016. 15 17, 016. 15 17, 016. 15 17, 016. 15 17, 016. 15 17, 016. 15 17, 016. 15 17, 016. 16 17, 016. 17 16, 068. 18 Grants payable and accrued expenses 20, 166. 17 16, 068. 18 18 19 Deferred revenue 19 20 21 22 22 22 22 22 22 | | | | | | | 12 | |
| Intangible assets 14 Intangible assets 14 1,016. 15 1,016. 15 1,016. 16 Total assets See Part IV, line 11 1,016. 15 1,016. 15 1,016. 16 Total assets Add lines 1 through 15 (must equal line 34) 617,482. 16 558,742. 17 Accounts payable and accrued expenses 20,166. 17 16,068. 18 Grants payable 18 19 Deferred revenue 19 19 19 19 19 19 19 1 | | 13 | | | | | 13 | |
| 16 Total assets Add lines 1 through 15 (must equal line 34) Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow account liability Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 Unsecured notes and loans payable to unrelated third parties 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities. Add lines 17 through 25 26 Total liabilities. Add lines 17 through 25 27 Unrestricted net assets 27 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, and equipment fund 31 Paid-in or capital surplus, or land, building, and equipment fund 31 Paid-in or capital surplus, or land, building, and equipment fund 31 Paid-in or capital surplus, or land, building, and equipment fund 31 Paid-in or capital surplus, or land, building, and equipment fund 31 Paid-in or capital surplus, or land, building, and equipment fund 31 Paid-in or capital surplus, or land, building, and equipment fund 31 Paid-in or capital surplus, or land, building, and equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets or fund balances. 44 Financial Statements and Reporting 1 Accounting melhod used to prepare the Form 990 Accumulated income, or other funds 20 Were the | | 14 | | | | | 14 | |
| 16 Total assets Add lines 1 through 15 (must equal line 34) 617, 482, 16 558, 742. 17 Accounts payable and accrued expenses 20,166, 17 16,068. 18 Grants payable 19 Deferred revenue 9 19 18 19 19 20 13 20 13 20 14 18 18 20 19 20 15 2 | | 15 | Other assets See Part IV, line 11 | | | 1,016. | 15 | 1,016. |
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| F 000 (2000) | 3 | Au | dit Act and OMB Circular A-133? | | icorgo an audit or aud | into do oct fortir in the of | g.c | |
| | <u> </u> | | Yes, did the organization undergo the required audit or | audits? | | | | |

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

To be completed by all section 501 (c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

Open to Public

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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

Inspection

OMB No 1545-0047

| You | Young's Men's Christian Assn of Lafayette LA INC 58-1640136 Part I Reason for Public Charity Status (All organizations must complete this part.) (see instructions) | | | | | | | | | | | |
|--------|---|--|--|------------------------|---|------------|-----------------|-----------------------|-------------------|---------------|--------|-----------|
| Par | t I Reason for Pub | olic Charity Statu | s (All organizations | must c | comple | te this | part.) | (see ı | nstruct | ions) | | |
| The o | The organization is not a private foundation because it is (Please check only one organization) | | | | | | | | | | | |
| 1 | 1 A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). | | | | | | | | | | | |
| 2 | 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) | | | | | | | | | | | |
| 3 | A hospital or cooper | rative hospital service | organization described ii | n sectio | n 170(b) | (1)(A)(iii |). (Atta | ch Sche | dule H) | | | |
| 4 | 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 ope | erated for the benefit on omplete Part II) | of a college or university of | owned o | r operate | ed by a | governn | nental ui | nıt descr | ibed in sect | ion | |
| 6 7 | An organization that | t normally receives a | overnmental unit describe substantial part of its sup | | | | | or from t | he gener | al public de | scribe | ed |
| _ | | (A)(vi). (Complete Pa | • | | | | | | | | | |
| 8 | | | 70(b)(1)(A)(vi). (Complete | | | | | | | | | |
| 9 | from activities relate investment income | ed to its exempt functi | more than 33-1/3 % of lons — subject to certain is taxable income (less somplete Part III) | exceptio | ns, and | (2) no n | nore tha | ın 33-1/3 | 3 % of its | s support fro | om gro | oss |
| 10 |)== | | exclusively to test for pub | | - | | | | | • | | |
| 11 | more publicly suppo describes the type | orted organizations de of supporting organiza | exclusively for the benefit escribed in section 509(a) ation and complete lines |)(1) or s 11e thro | ection 50 ugh 11h | 09(a)(2) | See s | or carry ection 50 | out the 09(a)(3). | Check the | box th | or nat |
| | a ∐ Type I | b Type II | | l – Func | - | _ | | | d ∐ | Type III— | | |
| е | 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 r | eceived a written dete | ermination from the IRS th | hat is a | Type I, T | ype II o | r Type I | II suppo | rting org | anızatıon, | | |
| g | Since August 17, 20 | 006, has the organizat | ion accepted any gift or | contribu | ition fron | n any of | the foll | owing pe | ersons? | - | | |
| | | | | | | | | | | | Yes | No |
| | (i) a person who below, the gov | directly or indirectly overning body of the su | controls, either alone or to apported organization? | ogether v | with pers | sons des | cribed i | n (II) an | d (111) | 11 g (i) | | |
| | (II) a family mem | ber of a person desci | ribed in (i) above? | | | | | | | 11 g (ii) | | |
| | (III) a 35% control | led entity of a person | described in (i) or (ii) ab | ove? | | | | | | 11 g (iii) | | |
| h | Provide the following | g information about th | ne organizations the orga | nızatıon | support | s | | | | | | |
| | (i) Name of Supported Organization | (n) EIN | (III) Type of organization (described on lines 1-9 above or IRC section (see instructions)) | organizat (i) liste | Is the tion in col d in your erning ment? | the organ | (ı) of | organizat | zed in the [| (vii) Amount | of Sup | port |
| | | | | Yes | No | Yes | No | Yes | No | | | |
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| Tota | 1 | | 1 | | | <u> </u> | <u> </u> | <u> `</u> | † "' | | | |

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

Schedule A (Form 990 or 990-EZ) 2008

| Sche | dule A (Form 990 or 990-EZ) 2008 | Youngle Ma | on's Christia | n Assn of Lafe | avette I.A INC | 58-164013 | 6 Page 2 | | |
|----------|--|--|----------------------|-----------------------------------|---|--------------------|---------------------|--|--|
| Par | t II Support Schedule for (| Organizations | Described in | Sections 170(| b)(1)(A)(iv) and | d 170(b)(1)(A) |)(vi) | | |
| Sec | (Complete only if you checke tion A. Public Support | d the box on line | 5, 7, or 8 of Part I |) | | | | | |
| Cale | ndar year (or fiscal year nning in) ► | (a) 2004 | (b) 2005 | (c) 2006 | (d) 2007 | (e) 2008 | (f) Total | | |
| 1 | Gifts, grants, contributions and membership fees received (Do not include 'unusual grants ') | | | | | | | | |
| 2 | Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf | | | | | | | | |
| 3 | The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge | | | | | | | | |
| 4 | Total. Add fines 1-3 | | | | | | | | |
| 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 | X', . | , , , , , | * * | * * * * | | | | |
| Sec | tion B. Total Support | I | <u> </u> | | | | | | |
| Cale | ndar year (or fiscal year nning in) | (a) 2004 | (b) 2005 | (c) 2006 | (d) 2007 | (e) 2008 | (f) Total | | |
| 7 | Amounts from line 4 | | | | | | | | |
| 8 | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources | | | | | | | | |
| 9 | Net income form unrelated business activities, whether or not the business is regularly carried on | | | | | | | | |
| 10 | Other income Do not include gain or loss form the sale of capital assets (Explain in Part IV) | | | | | | | | |
| 11 | Total support. Add lines 7 through 10 | , , , , | | | · ` `* | | | | |
| 12 | Gross receipts from related activ | | ' | | *************************************** | 12 | | | |
| 13 | First five years. If the Form 990 organization, check this box and | | ation's first, secon | d, third, fourth, oi | r fifth tax year as a | a section 501(c)(| 3) ▶ □ | | |
| Sec | tion C. Computation of Pu | | Percentage | | | | | | |
| | Public support percentage for 20 | | | e 11, column (f) | | 14 | | | |
| | Public support percentage for 20 a 33-1/3 support test - 2008. If the | • | • | on line 12 and | tha luna 14 us 22 1 | 13 % or more, sh | • | | |
| 10 | and stop here. The organization | qualifies as a pub | blicly supported or | ganization | the line 14 is 33-1 | 75 % 01 111010, 01 | ► [] | | |
| I | 33-1/3 support test – 2007. If the and stop here. The organization | e organization did qualifies as a pub | not check a box of | on line 13, or 16a, ganization | and line 15 is 33- | -1/3% or more, c | heck this box | | |
| 17 | 17a 10%-facts-and-circumstances test — 2008. 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. | | | | | | | | |
| 1 | b 10%-facts-and-circumstances test — 2007. 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 BA | Private foundation. If the organiz | | _ | • | , or 17b, check this | s box and see in | 990 or 990-EZ) 2008 | | |

Scnedule A (Form 990 or 990-EZ) 2008 Young's Men's Christian Assn of Lafayette LA INC 58-1640136 Page 3 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) Section A. Public Support Calendar year (or fiscal yr beginning in) (a) 2004 **(b)** 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total Gifts, grants, contributions and membership fees received (Do not include 'unusual grants') 375,545. 76,029. 82,716 81,240. 100,560. 35,000 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt 337,195 306,048 322,936 267,457 393,615. 1,627,251. purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1-5 398,965 419,911 387,288 368,017 428,615. 2,002,796. 7a Amounts included on lines 1, 2, 3 received from disqualified persons **b** Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11 and 12 for the year or \$5,000 c Add lines 7a and 7b Public support (Subtract line Marine Control And Andrews 7c from line 6) 2,002,796. Section B. Total Support (a) 2004 Calendar year (or fiscal yr beginning in) **(b)** 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total 9 Amounts from line 6 398,965 419,911 387,288 368,017 428,615 2,002,796. 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources 11,255 739 0 1,155 8,051 21,200. **b** Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 739 0 21,200. c Add lines 10a and 10b 1,155 8,051 11,255 11 Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of 12 capital assets (Explain in Part IV) " 查说 a telephone 13 Total support. (add ins 9, 10c, 11, and 12) 2,023,996. 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 2008 (line 8, column (f) divided by line 13, column (f)) 15 98.95% 16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g 16 98.70% Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f) 1.05% 18 18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h 1.30% 19a 33-1/3 support tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not

more than 33-1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

h 33-1/3 support tests = 2007. If the organization did not check a box on line 14 or 193, and line 16 is more than 33-1/3%, and line 18

b 33-1/3 support tests — 2007. If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

X

| Part IV | Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions) |
|----------------|--|
| • | Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions) |
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SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Attach to Form 990. To be completed by organizations that answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.

Open to Public Inspection Employer Identification number

Young's Men's Christian Assn of Lafayette LA INC 58-1640136

| Pa | Organizations Maintaining Donor the organization answered 'Yes' to | r Advised Funds or Other Similar Fu | nds or Accounts Complete If |
|-----|---|---|---|
| | | (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 done funds are the organization's property, subject to | | onor advised Yes No |
| 6 | Did the organization inform all grantees, donor used only for charitable purposes and not for the impermissible private benefit?? | s, and donor advisors in writing that grant fund ne benefit of the donor or donor advisor or other | ds may be er Yes No |
| Păi | rt II Conservation Easements Comple | ete if the organization answered 'Yes | |
| | Purpose(s) of conservation easements held by | | |
| | Preservation of land for public use (e.g., re | ecreation or pleasure) Preservation | of an historically important land area |
| | Protection of natural habitat | Preservation | of certified historic structure |
| | Preservation of open space | | |
| 2 | Complete lines 2a-2d if the organization held a of the tax year | qualified conservation contribution in the form | n of a conservation easement on the last day |
| | | | Held at the End of the Year |
| ä | a Total number of conservation easements | | 2a |
| ı | Total acreage restricted by conservation easen | nents | 2b |
| | Number of conservation easements on a certifi | ed historic structure included in (a) | 2c |
| | Number of conservation easements included in | (c) acquired after 8/17/06 | 2d |
| 3 | Number of conservation easements modified, t | ransferred, released, extinguished, or terminal | ted by the organization during the taxable |
| | year ► | - | |
| 4 | Number of states where property subject to con | nservation easement is located > | |
| 5 | Does the organization have a written policy regenforcement of the conservation easement it h | arding the periodic monitoring, inspection, vioolds? | lations, and Yes No |
| 6 | Staff or volunteer hours devoted to monitoring, | inspecting, and enforcing easements during t | he year ► |
| 7 | Amount of expenses incurred in monitoring, in | specting, and enforcing easements during the | year ► \$ |
| 8 | Does each conservation easement reported on 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? | line 2(d) above satisfy the requirements of se | ction Yes No |
| 9 | In Part XIV, describe how the organization repinclude, if applicable, the text of the footnote to conservation easements | orts conservation easements in its revenue and the organization's financial statements that d | d expense statement, and balance sheet, and escribes the organization's accounting for |
| Pa | rt III Organizations Maintaining Colle Complete if the organization ans | ctions of Art, Historical Treasures, owered 'Yes' to Form 990, Part IV, line | or Other Similar Assets e 8. |
| 1: | a If the organization elected, as permitted under treasures, or other similar assets held for publ the text of the footnote to its financial statemen | ic exhibition, education, or research in furthera | ent and balance sheet works of art, historical ance of public service, provide, in Part XIV, |
| i | If the organization elected, as permitted under treasures, or other similar assets held for publi amounts relating to these items | c exhibition, education, or research in furthera | ent and balance sheet works of art, historical ance of public service, provide the following |
| | (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 ar amounts required to be reported under SFAS 1 | | for financial gain, provide the following |
| i | a Revenues included in Form 990, Part VIII, line | 1 | ▶ \$ |
| 1 | Assets included in Form 990, Part X | _ | ▶\$ |

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Schedule **D** (Form 990) 2008

| Schedule D (Form 990) 2008 Young | | | | | | | 58-164 | | | Page Z |
|--|--------------------------|----------------|--------------------------------|----------------------|---------------------------|-----------------|-------------------------|------------------|-------------------|--------------|
| Part III Organizations Maintai | ning Colle | ctions | of Art, Histo | rical T | easures | s, or O | ther Similar Ass | ets (co | ntınu | ed) |
| •3 Using the organization's accession that apply) | n and other re | ecords, c | check any of the | following | that are a | a signifi | cant use of its collect | ion items | (chec | k all |
| a Public exhibition | | | d 🗌 Loan d | or exchar | ige progra | ms | | | | |
| b Scholarly research | | | e 🗌 Other | | | | | | | |
| c Preservation for future genera | ations | | | | | | | | | |
| 4 Provide a description of the organ Part XIV | uzation's colle | ections a | ind explain how | they furth | ner the org | janizatio | on's exempt purpose | ın | | |
| 5 During the year, did the organizat assets to be sold to raise funds ra | ther than to b | oe maint | ained as part of | the orga | nızatıon's | collection | on? | Yes | | No |
| Part IV Trust, Escrow and Cu IV, line 9, or reported | stodial Arr an amount | angen on Fo | nents Comple rm 990, Part | ete if oi X, line | ganızatı 21. | on an | swered 'Yes' to F | orm 99 | 30, Pa | art |
| 1 a Is the organization an agent, trust included on Form 990, Part X? | | | | | outions or | other as | ssets not | Yes | | No |
| b If 'Yes,' explain the arrangement | in Part XIV ar | nd comp | lete the following | g table | | | | | | |
| | | • | | | | | | Amount | | |
| c Beginning balance | | | | | | | 1 c | | | |
| d Additions during the year | | | | | | | 1 d | | | |
| e Distributions during the year | | | | | | | 1 e | | | |
| f Ending balance | | | | | | | 1f | | | |
| 2a Did the organization include an ai | mount on Forr | m 990, F | Part X, line 217 | | | | | Yes | L | No |
| b If 'Yes,' explain the arrangement | | | | | | | | | | |
| Part V Endowment Funds Co | mplete if o | rganız | ation answer | <u>ed 'Yes</u> | <u>' to Forr</u> | <u>n 990,</u> | Part IV, line 10. | | | |
| | (a) Current | year | (b) Prior year | r | (c) Two year | s back | (d) Three years back | (e) F | our year | s back |
| 1 a Beginning of year balance | | | | | ··· | | • | 1, 3 | * #- j#E. | |
| b Contributions | | | , # } ' | | | | 40 | · · · · · | | |
| c Investment earnings or losses | | | | ^_ | ` | | <u>*</u> | | | * |
| d Grants or scholarships | | | | | | | 1,700 | · - (3 - 6 | 70 3 0 (1) | 4 |
| Other expenditures for facilities and programs | | | <i>y</i> | | Â | ·// | | | | |
| f Administrative expenses | | | , | ₃₀ 77 | : | | "是我们的一种关系。 | 1178 | X to all the | right 4 |
| g End of year balance | | | | | ^ | | 1 1 1 1 1 | 7.5 | | 4 1 |
| 2 Provide the estimated percentage | of the year e | nd balai | nce held as | | | | | | | |
| a Board designated or quasi-endow | ment > | | 8 | | | | | | | |
| b Permanent endowment | ક | | | | | | | | | |
| c Term endowment | % | | | | | | | | | |
| 3a Are there endowment funds not in organization by | the possess | ion of th | e organization th | nat are h | eld and ac | iministe | red for the | | Yes | No |
| (i) unrelated organizations | | | | | | | | 3a(i) | | <u> </u> |
| (ii) related organizations | | | | | | | | 3a(ii) | | <u> </u> |
| b If 'Yes' to 3a(II), are the related o | rganizations l | isted as | required on Sch | edule R | • | | | 3b | | <u> </u> |
| 4 Describe in Part XIV the intended | | | | | | | | | | |
| Part VI Investments-Land, B | uildings, a | nd Eq | uipment. See | <u> Form</u> | <u>990, Pa</u> | <u>rt X, lı</u> | ne 10. | | | |
| Description of investment | | | t or other basis ivestment) | | ost or othe is (other) | r | (c) Depreciation | (d) B | look Va | alue |
| 1 a Land | | | 50,000. | | | | | | 50 | ,000. |
| b Buildings | | | 512,533. | | | | 29,022. | | 483 | <u>,511.</u> |
| c Leasehold improvements | | | | | | | | | | |
| d Equipment | | | 30,896. | | | | 25,181. | | 5 | ,715. |
| e Other | | | | | | | | | | |
| Total. Add lines 1a 1e (Column (d) sho | ould equal For | m 990, i | Part X, column (| B), line | 10(c)) | | • | | 539 | ,226. |
| ВАА | | | | | | | Sche | dule D (F | | |

| Schedule D (Form 990) 2008 Young's Men's Chris | tian Assn of Lafayet | te LA INC | 58-1640136 | Page 3 |
|--|--------------------------------|----------------------|---|-------------|
| Part VII Investments-Other Securities See F | | | | |
| (a) Description of security or category (including name of security) | (b) Book value | (c) Cost or | Method of valuation end-of-year market value | |
| Financial derivatives and other financial products | | | | |
| Closely-held equity interests | | | | |
| Other | | | · · · · · · · · · · · · · · · · · · · | |
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| Total (Column (b) should equal Form 990 Part X, col (B) line 12) ► | | | | |
| Part VIII Investments-Program Related (See | | | | |
| (a) Description of investment type | (b) Book value | (c) Cost or | Method of valuation end-of-year market value | |
| | | 0031 01 | cha-or year market value | |
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| Total Column (b)(should equal Form 990, Part X, Col (B) line 13) | | | • | |
| Part IX Other Assets (See Form 990, Part X | | | | |
| | Description | | (b) Boo | k value |
| Utility Deposit | | | | 1,016. |
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| Total. Column (b) Total (should equal Form 990, Part X, c | ol (B), line 15) | | • | 1,016. |
| Part X Other Liabilities (See Form 990, Par | rt X, line 25) | | | |
| (a) Description of Liability | (b) Amount | _ | | |
| Federal Income Taxes | | _ | | |
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| Total Column (b) Total (should equal Form 990, Part X, col (B) line 25) | • | | | |
| In Part XIV, provide the text of the footnote to the organiza positions under FIN 48 | ation's financial statements t | hat reports the orga | nization's liability for uncerta | ın tax |

| Sche | edue D (Form 990) 2008 Young's Men's Christian Assn of Lafayette LA INC 5 | 8-1640136 | Page 4 |
|------|---|-------------------|--------------|
| | rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements | | |
| .1 | Total revenue (Form 990, Part VIII,column (A), line 12) | | 428,615. |
| 2 | Total expenses (Form 990, Part IX, column (A), line 25) | | 470,704. |
| 3 | Excess or (deficit) for the year Subtract line 2 from line 1 | | -42,089. |
| 4 | Net unrealized gains (losses) on investments | | |
| 5 | Donated services and use of facilities | | |
| 6 | Investment expenses | | |
| 7 | Prior period adjustments | | |
| 8 | Other (Describe in Part XIV) | | |
| 9 | Total adjustments (net) Add lines 4-8 | | |
| 10 | Excess or (deficit) for the year per financial statements. Combine lines 3 and 9 | | -42,089. |
| | rt XII Reconciliation of Revenue per Audited Financial Statements With Revenue per | Return | |
| 1 | Total revenue, gains, and other support per audited financial statements | 1 | 428,615. |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII line 12 | | |
| | a Net unrealized gains on investments | | |
| | b Donated services and use of facilities 2b | | |
| | c Recoveries of prior year grants | - , . | |
| | d Other (Describe in Part XIV) | - ´, | |
| | e Add lines 2a through 2d | 2e | |
| 3 | | 3 | 428,615. |
| _ | | 2 (· | 420,013. |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1 | | |
| | a Investments expenses not included on Form 990, Part VIII, line 7b | | |
| | b Other (Describe in Part XIV) | | |
| | c Add lines 4a and 4b | 4c | 420 615 |
| | Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12) | | 428,615. |
| | rt XIII Reconciliation of Expenses per Audited Financial Statements With Expenses p | 1 1 | 470,704. |
| | Total expenses and losses per audited financial statements | 1 | 470,704. |
| | 1 1 | · 3. | |
| | a Donated services and use of facilities 2a | - • | |
| | b Prior year adjustments 2b | | |
| | c Losses reported on Form 990, Part IX, line 25 | _ ^^ | |
| | d Other (Describe in Part XIV) | | |
| | e Add lines 2a through 2d | 2e | |
| 3 | Subtract line 2e from line 1 | 3 | 470,704. |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | * (* | |
| ä | a Investments expenses not included on Form 990, Part VIII, line 7b | | |
| ı | b Other (Describe in Part XIV) | | |
| • | c Add lines 4a and 4b | 4c | |
| | Total expenses Add lines 3 and 4c (This should equal Form 990, Part i, line 18) | 5 | 470,704. |
| Pa | rt XIV Supplemental Information | | |
| Com | nplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b | , lines 1b and 2b | , Part V, |
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| Schedule D | (Form 990) 2008 | Young's Men's | Christian Assn Ontinued) | of Lafayette | LA INC | 58-1640136 | Page 5 |
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BAA

Schedule D (Form 990) 2008

SCHEDULE O

Supplemental Information to Form 990

OMB No 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

58-1640136 Young's Men's Christian Assn of Lafayette LA INC Pt XI, Line 3b Organization did not receive federal contract to be audited. Pt_VI-A, Line 10 A MEETING WAS HELD TO REVIEW AND DISCUSS THE 990 TO BE FILED.__ Pt_VI-B, Line 12c REVIEWS THE ANNUAL DISCLOSURE OF INTERESTS FROM THE BOARD_____ Pt_VI_B, Line 12c IF ANY THAT ARE POSSIBLE ITS INVESTIGATED AND DEALT WITH____ Pt_VI-B, Line 12c BY VOTE OF OTHER MEMBERS. Pt VI-B, Line 15 Executive director and salary was voted on by the board. Pt_VI-C, Line 19 All governing documents, policies, and financial Pt_VI-C, Line 19 statements are for inspection at our location 800 Farrell_Rd Pt_VI-C, Line 19 Lafayette, LA 70508. 990 page 7 ____Micah Vidrine was the President as of 12/31/2007 he resign his position 990 page 7 at the beginning of 2008 so the original return had him listed ___ 990 page 7 ____as an officer and president for 2008 with receiving compensation ___ 990 page 7 ____ of \$3,661 but he did not it was his son Micah Vidrine Jr who was ____ 990 page 7 ____employed as a junior leader who received the 3,661 in compensation.__ 990 page 7 therefore Micah Vidrine name has been removed and 3661 of wages 990 page 7 has been removed. Brian Hotard was the president of the YMCA of Lafayette in 2008. 990 page 10 ___ The 3661 wages was removed from line 5 and put to line 7 for the above reasons. 58-1640136

Part III Identification of Related Organizations Taxable as a Partnership

| (A) Name, address, and EIN of related organization | (B) Primary Activity | (C) Legal domicile (state or foreign | (C) (D) Legal Direct domicile controlling entity (State or foreign | (E) Predominant income (related, investment, unrelated) | (F) Share of total income | (G) Share of end-of-year assets | (H) Disproportionate allocations? | Code V-UBI amount in Box 20 of Schedule K-1 | (J) . General or managing partner? |
|--|----------------------|--|--|---|------------------------------|---------------------------------------|-----------------------------------|--|------------------------------------|
| | | country) | | | | | Yes No | (Form 1065) | Yes No |
| | | | | | | | | | |
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| Part IV Identification of Related Organizations Taxable as a Corporation or Trust | |
|---|--------------|
| axable as a Corporation or | |
| axable as a Corporation or | Trust |
| Part IV Identification of Related Organizations Taxable as a Corporation | 9 |
| Part IV Identification of Related Organizations Taxable as a C | orporation |
| Part IV Identification of Related Organizations Taxable as | a (|
| Part IV Identification of Related Organizations Taxable | as |
| Part IV Identification of Related Organizations Ta | axable |
| Part IV Identification of Related Organization: | ξ |
| Part IV Identification of Related O | rganizations |
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| | Part IV |

| רמונוד ומכווחוכמווסו כן ויכומוכת כו אמווידמווסוו ומעתפוכ מי | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | , | | | | |
|---|----------------------|--|---|---|--|---|--------------------------|
| (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) | (B) (C) (D) (D) (E) Type of entity (C corp. S corp. state or foreign country) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C | (G) Share of end-of-year assets | (H) Percentage ownership |
| | | | | | | | |
| | | | | | | | |
| | | | | | | 5 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - | |
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| ВАА | | TEEA5002 12/23/08 | 723/08 | | | Schedule R (Form 990) (2008) | 990) (2008) |

Part V Transactions With Related Organizations

| Note Complete line 1 if any entity is listed in Parts II, III, or IV | | | 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 | | 1 | , I |
| a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity | | 1a | |
| b Gift, grant, or capital contribution to other organization(s) | | 1 b | × |
| c Gift, grant, or capital contribution from other organization(s) | | ا د | × |
| d Loans or loan guarantees to or for other organization(s) | | 19 | |
| e Loans or loan guarantees by other organization(s) | | 1e | |
| | | i . | 1 |
| f Sale of assets to other organization(s) | | = | - |
| g Purchase of assets from other organization(s) | | 19 | - |
| h Exchange of assets | | 모 | |
| ı Lease of facilities, equipment, or other assets to other organization(s) | | ;= | - |
| | | 1 | 1 |
| j Lease of facilities, equipment, or other assets from other organization(s) | | <u>-</u> | |
| k Performance of services or membership or fundraising solicitations for other organization(s) | | - | |
| l Performance of services or membership or fundraising solicitations by other organization(s) | | = | - |
| m Sharing of facilities, equipment, mailing lists, or other assets | | = | 1 |
| n Sharing of paid employees | | - | |
| | | * 1 | |
| o Reimbursement paid to other organization for expenses | | 10 | |
| p Reimbursement paid by other organization for expenses | | J | |
| | | * 1 | |
| q Other transfer of cash or property to other organization(s) | | | _ |
| r Other transfer of cash or property from other organization(s) | | 11 | |
| 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 | nd transaction thresholds | | |
| (A) Name of other organization | (B) Transaction type (a-r) | (C) Amount involved | volved |
| A Thited May | | - | 35.000 |
| | | | |
| (2) YMCA of United States National Support | q | | 9,790 |
| | , | | |
| (6) | | | |
| (4) | | | |
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| | oli ibodo) | | 0000 |
| 1EEA5003 07/02/08 | סרוומחמום | 2 = 10 L) 1 | 7 (5.55) |

Schedule R (Form 990) 2008 Young's Men's Christian Assn of Lafayette LA INC

Part VI Unrelated Organizations Taxable as a Partnership

Provide the following information for each entity taxed as a partnership through which the 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) | (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? | al or ging er? |
|--------------------------------------|----------------------|--|--|--|-----------------------------------|---|---|----------------------|
| | | | Yes No | | Yes No | | Yes | 2 |
| | | | | | | | | |
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| ВАА | | TEEA5004 01/21/09 | | | | Schedule R (Form 990) (2008) | м 990) (| (2008) |

Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization (Including Information on Listed Property)

2008

OMB No 1545-0172

Attachment Sequence No 67

Name(s) shown on return

Young's Men's Christian Assn of Lafavette LA INC

Identifying number 58-1640136

| Busine | ss or activity to which this form relate | es | narajocco m. | | | | | ·-· | |
|---|--|--|--|------------------------|------------|----------------|---------------|----------|---|
| | m 990 / Form 990E | | | | | | | | |
| Par | | ense Certain F | Property Under Sec | tion 179 | | | | | |
| 1 | Maximum amount See the | | complete Part V before y | | 11 (1 | | | 1 | \$250,000. |
| 2 | Total cost of section 179 pro | | 5 | 31163363 | | | | 2 | 7200/0000 |
| 3 | Threshold cost of section 17 | | , | ee instructions |) | | | 3 | \$800,000. |
| 4 | Reduction in limitation Sub | | | | , | | | 4 | |
| 5 | Dollar limitation for tax year | | | | narried | filing | | | |
| | separately, see instructions | | | | | | | 5 | |
| 6_ | (a) | Description of property | | (b) Cost (busines | s use only | (c) (| Elected cos | st | , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| | | | | | | | | | Same and the same |
| | | | | | 7 | | | | |
| | Listed property Enter the a Total elected cost of section | | | imes 6 and 7 | | | | 8 | |
| 8 9 | Tentative deduction Enter f | - | | , mies o and 7 | | | | 9 | |
| 10 | Carryover of disallowed dec | | | 2 | | | | 10 | |
| 11 | Business income limitation | | | |) or line | 5 (see ins | strs) | 11 | |
| 12 | Section 179 expense deduc | | | | | | | 12 | |
| 13 | Carryover of disallowed dec | | | | ▶ 13 | | | | * x |
| Note | : Do not use Part II or Part I | Il below for listed | property Instead, use Pa | art V | | | | | |
| Par | t II Special Depreci | ation Allowan | ce and Other Depre | ciation (Do n | ot inclu | de listed pr | operty) | (See | instructions) |
| 14 | Special depreciation allowa | ince for qualified o | property (other than listed | l property) plac | ed in se | ervice durin | ng the | İ | |
| | tax year (see instructions) | | , (| | | | • | 14 | · |
| 15 | | | | | | | | 15 | |
| 16 Other depreciation (including ACRS) | | | | | | | 0. | | |
| Par | t III MACRS Deprec | iation (Do not in | clude listed property) (S | |) | | | | |
| | Section A | | | | | | | | |
| 17 MACRS deductions for assets placed in service in tax years beginning before 2008 | | | | | | 17 | 15,458. | | |
| 18 | If you are electing to group asset accounts, check here | any assets piaced | d in service during the ta | x year into one | or more | e general | > | | |
| | | | in Service During 2008 1 | ax Year Using | the Ge | neral Depre | eciation | Syste | m |
| | (a) Classification of property | (b) Month and year placed in service | (c) Basis for depreciation (business/investment use only — see instructions) | (d) Recovery period | | (e) vention | (f) Method | 1 | (g) Depreciation deduction |
| 19 a | 3-year property | 28,50 | | | | | | | |
| Ŀ | 5-year property | | | | | | | | |
| | 7-year property | | | | | | | | |
| | 10-year property | | | | | | | | |
| | e 15-year property | | İ | | | | | | <u></u> |
| f | 20-year property | | | | | | | | |
| - | 25-year property | , | | 25 yrs | | | S/I | • | ļ |
| ł | n Residential rental | | | 27.5 yrs | | MM | S/I | | ļ |
| | property | | | 27.5 yrs | _ ! | MM | S/I | | |
| i | Nonresidential real | | | 39 yrs | | MM | S/I | | |
| | property | | | | | MM | S/I | | |
| | Section C - | - Assets Placed in | Service During 2008 Ta | x Year Using t | he Alte | rnative Dep | | | tem |
| _20 a | a Class life | | | | | | _S/I | | |
| t | 1 2-year | | | 12 yrs | <u> </u> | | S/I | | <u> </u> |
| | 40-year | 1 | !1 | 40 yrs | | MM | S/I | <u> </u> | <u> </u> |
| Pai | rt IV Summary (See in | | | | | | | | |
| 21 | Listed property Enter amo | unt from line 28 | | | | | } | 21 | |
| | Total Add amounts from line 12, the appropriate lines of your return | n Partnerships and S | corporations — see instruction | S | re and or |) | | 22 | 15,458. |
| 23 | For assets shown above arthe portion of the basis atte | nd placed in service ributable to section | ce during the current yean 263A costs | r, enter | 23 | | | | * (*) |

| | 1 4562 (2008) Young's Men' 1 V Listed Property (Include entertainment, recreation, or | automobi | les, certa | | | | | | | mputer | 58-16 s, and p | | | Page : |
|--|---|-------------------------------|-------------------------------|---|------------------------------|--------------|---------------------------|-----------------------|------------------------------|-------------------------|-----------------------------------|-------------|---------------------------------------|-------------|
| • | Note: For any vehicle for whi columns (a) through (c) of Si | ch you ar | e using th | ne standa tion B, a | ard milea nd Secti | age rate | or o | leducting le cable | ase exp | ense, c | omplete | only 24 | a, 24b, | |
| | Section A - Depreciation | | | | ıtion: Se | _ | | | | | | mobiles | _ | |
| 24 a | a Do you have evidence to support the business | | | - | | Yes | ┸┸ | No 24b If ' | | | | | Yes | No |
| (a) (b) CC Business/ investment use percentage | | (d) Cost or other basis | | (e) Basis for depreciation (business/investment use only) | | tion ient | (f) Recovery period | Me | (g) Method/ Convention | | (h) Depreciation deduction | | (i) Elected section 179 cost | |
| 25 | Special depreciation allowance for used more than 50% in a qualified l | qualified li | sted prop | erty plac | ced in se | ervice d | uring | the tax year | ar and | 25 | | | • 55 1 | |
| 26 | | | | - | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | - | | | | | |
| | | | | | | | | | <u> </u> | | | | | |
| 27 | Property used 50% or less in a qual | ified busii | ness use | | | | | | -1 | | | | 7 | |
| | | | _ | | | | | | | | | | | |
| | | | | | | | | | + | | | | | |
| 28 | Add amounts in column (h), lines 29 | through | 27 Enter | here an | d on line | e 21, pa | ige 1 | | | 28 | | | F 15. 30 2 2 2 2 | ۲ » |
| 29 | Add amounts in column (i), line 26 | Enter her | e and on | line 7, p | age 1 | | | | | | | 29 | | |
| | | | Section | | | | | | | | | | | |
| om | plete this section for vehicles used bour employees, first answer the quest | y a sole p | oprietor, | , partner, | or othe | r 'more | than | 5% owner | or rela | ted pers | son If yo | ou provi | ded vehic | cles |
| э ус | our employees, first answer the ques | .10115 111 50 | -T | | | | Cebin | | | | | | 1 | n |
| 30 | Total business/investment miles dri | ven | 1 | a) | (b) Vehicle 2 | | \ | (c) /ehicle 3 | | (d) Vehicle 4 | | e) cle 5 | (f) Vehicle 6 | |
| | during the year (do not include commuting miles) | | | Vehicle 1 | | Veriicie 2 | | Cilicic 5 | VOIII | | | | | |
| 31 | Total commuting miles driven during the year | | | | | | | | | | _ | | | |
| 32 | | | | | | | | | | | | | | |
| | miles driven | | | | | | <u> </u> | | | | - | | ļ | - |
| 33 | Total miles driven during the year lines 30 through 32 | Add | | | | | | T | | Γ | | | 1 | |
| | Maria di Cara da Cara | | Yes | No | Yes | No | Ye | s No | Yes | No | Yes | No | Yes | No |
| 34 | Was the vehicle available for perso during off-duty hours? | nai use | | | | | | | | | | i | | |
| 35 | Was the vehicle used primarily by a than 5% owner or related person? | more | | | | | | | | | | | | |
| 36 | Is another vehicle available for personal use? | | | | | | | | | | | | | |
| | Section C - | | | | | | | | | | | | | |
| Ansi 5% | wer these questions to determine if y owners or related persons (see instru | ou meet a ictions) | an except | ion to co | mpleting | g Sectio | n B f | or vehicles | used by | emplo | yees wh | o are no | ot more t | han |
| 37 | Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? | | | | | | | Yes | No | | | | | |
| 38 | | | | | | | | | | | | | | |
| 39 | | | - | | | _,00 | , | | | - | | | | |
| 40 | | cles to yo | ur employ | | | rmation | from | your empl | oyees al | bout the | use of | the | | |
| 41 | Do you meet the requirements cond Note: <i>If your answer to 37, 38, 39,</i> | erning qu | ialified au | itomobile | demon | stration | use? | (See instr | uctions |) ·les | | | 1 | |
| D ₂ | rt VI Amortization | 40, 01 41 | 15 165, 1 | do not co | inpiete | Jection | <i>D</i> 10 | i the cover | - Verne | | | | .1 | L |
| Га | (a) Description of costs | | (b) Date amortization begins | | (c) Amortizable amount | | (d) | | | (e) | | (f) | | |
| | | | | | | | | Code section | | pe | Amortization period or percentage | | Amortization for this year | |
| | Amortization of costs that begins d | | 2008 tax | vear (s | ee instri | uctions) | | | | | | - | | |
| 42 | | uring you | 2000 10/ | | | | | | | | | | | |
| 42 | | uring you | 2000 (4) | .) | | | | | | | | | | |
| 42 | | uning you | | | | | | | | | 43 | | | |

Supplemental Information to Form 990

OMB No 1545-0047

2008

Open to Public

Department of the Treasury Internal Revenue Service

Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

| Name of the organization | Employer identification number |
|--|--------------------------------|
| Young's Men's Christian Assn of Lafayette LA INC | 58-1640136 |
| Pt XI, Line 3b Organization did not receive federal contract | to_be_audited |
| Pt_VI-A, Line 10 A MEETING WAS HELD TO REVIEW AND DISCUSS THE 9 | 90 TO BE FILED. |
| Pt_VI-B, Line 12c REVIEWS THE ANNUAL DISCLOSURE OF INTERESTS FRO | M_THE_BOARD |
| Pt_VI-B, Line 12c IF ANY THAT ARE POSSIBLE ITS INVESTIGATED AND | DEALT WITH |
| Pt VI-B, Line 12c BY VOTE OF OTHER MEMBERS. | |
| Pt VI-B, Line 15 Executive director and salary was voted on by | the board. |
| Pt_VI-C, Line 19 All governing_documents, policies, and financi | al |
| Pt VI-C, Line 19 statements are for inspection at our location | 800 Farrell Rd |
| Pt VI-C, Line 19 Lafayette, LA 70508. | |
| 990 page 7Micah Vidrine was the President as of 12/31/200 | 7 he resign his position |
| 990 page 7 at the beginning of 2008 so the original return | n had him listed |
| 990 page 7as an officer and president for 2008 with rece | iving compensation |
| 990 page 7 of \$3,661 but he did not it was his son Micah | Vidrine Jr who was |
| 990 page 7employed as a junior leader who received the 3 | ,661 in compensation. |
| 990 page 7 therefore Micah Vidrine name has been removed | and 3661 of wages |
| 990 page 7 has been removed. Brian Hotard was the president of the | ne YMCA of Lafayette in 2008. |
| 990 page 10 The 3661 wages was removed from line 5 and put to li | ne 7 for the above reasons. |
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SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Young's Men's Christian Assn of Lafayette LA INC

OMB No 1545-9047

2008

Attach to Form 990. To be completed by organizations that answered 'Yes' to Form 990, Part IV, lines 33, 34, 35, 36, or 37.
 See separate instructions.

Related Organizations and Unrelated Partnerships

Open to Public Inspection

Employer identification number 58-1640136

Schedule R (Form 990) (2008) (F)
Direct controlling
entity (F)
Direct controlling entity (E)
Public charity status (if section 501(c)(3)) **(E)** End·of·year assets (D) Exempt Code section **(D)** Total income TEEA5001 12/23/08 Legal domicile (state or foreign country) (C)
Legal domicile (state or foreign country) ် BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Primary activity (B) Primary activity Part II Identification of Related Tax-Exempt Organizations (A) (A) Name, address, and EIN of related organization (A)
Name, address, and EIN of disregarded entity Part I Identification of Disregarded Entities

Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 1 (continued)

Briefly describe the organization's mission

self-worth, integrity, and respect in all of its activities. Christian principles are put in practice through programs that build a healthy spirit, mind and body.

Schedule O (Form 990) Supplemental Information to Form 990 Form 990, Page 6, Line 11 (continued)

| Name | Address | City | St | ZIP | |
|-----------------|------------------------|-------------|----|-------|--|
| Pam Crist | 201 Alva Rd | Youngsville | LA | 70592 | |
| Andre' Mitchell | 1602 W Pinhook Rd #207 | Lafayette | LA | 70508 | |