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Form 990

Department of the Treasury
Internal Revenue Service

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

2009

Open to Public
Inspection

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

A For the 2009 calendar year, or tax year beginning

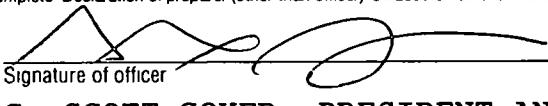
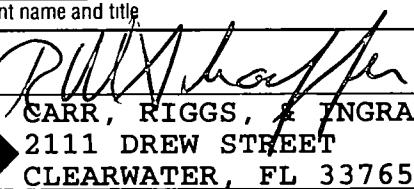
and ending

| | | | | |
|---|---|---|---|------------|
| B Check if applicable <input type="checkbox"/> Address change <input checked="" type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending | C Name of organization YOUNG MEN'S CHRISTIAN ASSOCIATION OF THE SUNCOAST, INC. FKA YMCA OF THE SUNCOAST | | D Employer identification number 59-0810731 E Telephone number (727) 467-9622 G Gross receipts \$ 31,484,958. | |
| | Doing Business As | | | |
| | Number and street (or P.O. box if mail is not delivered to street address) | | | Room/suite |
| | 2469 ENTERPRISE ROAD | | | |
| | City or town, state or country, and ZIP + 4 | | | |
| | CLEARWATER, FL 33763 | | | |
| F Name and address of principal officer: G. SCOTT GOYER 2469 ENTERPRISE ROAD, CLEARWATER, FL 33763 | | | | |
| I Tax-exempt status: <input checked="" type="checkbox"/> 501(c) (3) (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527 | | | | |
| J Website: ► WWW.SUNCOASTYMCA.ORG | | | | |
| K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ► | | L Year of formation: 1961 M State of legal domicile: FL | | |

Part I Summary

| | | | |
|--|--|---|--|
| Activities & Governance | 1 Briefly describe the organization's mission or most significant activities: TO PUT CHRISTIAN PRINCIPLES INTO PRACTICE WITH PROG'S THAT BUILD HEALTHY SPIRIT, MIND & BODY FOR ALL. | | |
| | 2 Check this box ► <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets. | | |
| | 3 Number of voting members of the governing body (Part VI, line 1a) | 3 29 | |
| | 4 Number of independent voting members of the governing body (Part VI, line 1b) | 4 28 | |
| | 5 Total number of employees (Part V, line 2a) | 5 1642 | |
| | 6 Total number of volunteers (estimate if necessary) | 6 1673 | |
| | 7a Total gross unrelated business revenue from Part VIII, column (C), line 12 | 7a 0. | |
| b Net unrelated business taxable income from Form 990-T, line 34 | 7b 0. | | |
| Revenue | 8 Contributions and grants (Part VIII, line 1h) | Prior Year 2,549,161. Current Year 2,439,455. | |
| | 9 Program service revenue (Part VIII, line 2g) | 20,385,090. 19,589,814. | |
| | 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) | <430,294. > 214,534. | |
| | 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | 153,329. 210,674. | |
| | 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 22,657,286. 22,454,477. | |
| | 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) | 15,304. | |
| | 14 Benefits paid to or for members (Part IX, column (A), line 4) | 14,186,305. 13,319,186. | |
| Expenses | 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) | 9,584,461. 9,402,279. | |
| | 16a Professional fundraising fees (Part IX, column (A), line 11e) | 23,786,070. 22,721,465. | |
| | b Total fundraising expenses (Part IX, column (D), line 25) ► 370,273. | <1,128,784. > <266,988. | |
| | 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) | Beginning of Current Year | |
| | 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) | 39,686,793. 39,571,335. | |
| | 19 Revenue less expenses Subtract line 18 from line 12 | 15,044,608. 14,695,409. | |
| | | 24,642,185. 24,875,926. | |
| Net Assets or Fund Balances | | | |
| 20 Total assets (Part X, line 16) | 5-5-2010 | | |
| 21 Total liabilities (Part X, line 26) | | | |
| 22 Net assets or fund balances. Subtract line 21 from line 20 | | | |

Part II Signature Block

| | | | | |
|---------------------------------|--|-------------------------|---|--|
| Sign Here | Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge | | | |
| |  G. SCOTT GOYER, PRESIDENT AND CEO Type or print name and title | | | |
| Paid Preparer's Use Only | Preparer's signature ►  | Date MAY 05 2010 | Check if self-employed ► <input type="checkbox"/> | Preparer's identifying number (see instructions) EIN ► 72-1388621 |
| | Firm's name (or yours if self-employed), address, and ZIP + 4 ► CARR, RIGGS, & INGRAM, LLC ► 2111 DREW STREET ► CLEARWATER, FL 33765-3215 | | | Phone no. ► 727-446-0504 |

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

 Yes No

'YOUNG' MEN'S CHRISTIAN ASSOCIATION OF THE
SUNCOAST, INC. FKA YMCA OF THE SUNCOAST

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Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission: SEE SCHEDULE O FOR CONTINUATION
THE YMCA NURTURES THE HEALTHY DEVELOPMENT OF CHILDREN AND TEENS, STRENGTHENS FAMILIES, PROVIDES SOCIALIZATION FOR OLDER ADULTS, AND MAKES ITS COMMUNITY A HEALTHIER, SAFER, BETTER PLACE TO LIVE. YMCA PROGRAMS ARE TOOLS FOR BUILDING THE CHARACTER DEVELOPMENT VALUES OF

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No
 If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No
 If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses
 Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

SEE SCHEDULE O FOR CONTINUATION(S)

4a (Code:) (Expenses \$ 9,182,302. including grants of \$) (Revenue \$ 8,884,128.)
HOLISTIC DEVELOPMENT OF CHILDREN AND YOUTH:

THE YMCA PROVIDES BEFORE AND AFTER-SCHOOL CHILD CARE THROUGHOUT THE SCHOOL YEAR TO PRE-K AND SCHOOL-AGE CHILDREN RESIDING FROM SEMINOLE TO BROOKSVILLE, INCLUDING EMOTIONALLY AND PHYSICALLY HANDICAPPED, FINANCIALLY DISADVANTAGED AND DEVELOPMENTALLY DISABLED CHILDREN AND FAMILIES. YMCA SCHOOL-AGE CARE ENSURES THAT THE TIME GAPS BEFORE AND AFTER SCHOOL ARE FILLED CREATIVELY AND CONSTRUCTIVELY. THIS PROGRAM PROVIDES WORKING PARENTS WITH SAFE, AFFORDABLE, QUALITY SUPERVISION FOR THEIR CHILDREN FROM THE HOURS OF 6:30 A.M. TO THE BEGINNING OF SCHOOL, AND FROM SCHOOL DISMISSAL TO 6:00 P.M., AND ALL DAY ON SCHOOL HOLIDAYS.

4b (Code:) (Expenses \$ 5,686,452. including grants of \$) (Revenue \$ 4,201,400.)
HEALTH AND WELL BEING FOR ALL:

FOR 160 YEARS, THE YMCA HAS INCLUDED AN EQUILATERAL TRIANGLE IN ITS LOGO AS A SYMBOL OF WELLNESS, THE PURSUIT OF WHICH HAS LONG BEEN ONE OF THE ORGANIZATION'S SOUGHT AFTER OUTCOMES. REPRESENTATIVE OF A BALANCED SPIRIT, MIND AND BODY, THE EQUILATERAL TRIANGLE HAS OFTEN BEEN DRAWN INSIDE OF A CIRCLE REPRESENTING THE SOCIAL DIMENSION OF HEALTH - OUR RELATIONSHIPS AND CONNECTIONS TO OTHER PEOPLE BEING A KEY COMPONENT OF OUR WELLNESS.

RECENTLY, SCIENCE HAS BEGUN TO SUPPORT THE EFFICACY OF A HOLISTIC APPROACH TO HEALTH (SPIRIT, MIND, BODY) AS WELL AS THE IMPORTANCE OF

4c (Code:) (Expenses \$ 4,881,091. including grants of \$) (Revenue \$ 6,504,286.)
FAMILY STRENGTHENING:

FAMILY MEMBERSHIP IS OUR LARGEST MEMBERSHIP CATEGORY, PROVIDING MEN, WOMEN AND CHILDREN WITH HEALTHY SERVICES IN SPIRIT, MIND, AND BODY. WITH WELLNESS CLASSES FOR ALL AGES, MOMMY AND ME ACTIVITIES, PARENT-CHILD SWIM, PARENT'S NIGHT OUT, AND MORE, THE YMCA FOSTERS STRONG FAMILY RELATIONSHIPS AND HEALTHY HOME HABITS THROUGH OUR PROGRAMS.

THE YMCA'S ADVENTURE GUIDES IS AN EXCITING PARENT-CHILD EXPERIENCE. IT CELEBRATES FAMILY, NATURE, COMMUNITY, AND OLD-FASHIONED FUN. AS ALWAYS, THE YMCA HIGHLIGHTS THE CHARACTER DEVELOPMENT VALUES OF CARING,

4d Other program services. (Describe in Schedule O)
 (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ► \$ 19,749,845.

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**YOUNG MEN'S CHRISTIAN ASSOCIATION OF THE
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Part IV Checklist of Required Schedules

| | Yes | No |
|--|--|-----------|
| 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i> | 1 <input checked="" type="checkbox"/> | X |
| 2 Is the organization required to complete Schedule B, Schedule of Contributors? | 2 <input checked="" type="checkbox"/> | X |
| 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> | 3 <input type="checkbox"/> | X |
| 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i> | 4 <input checked="" type="checkbox"/> | 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? <i>If "Yes," complete Schedule C, Part III</i> | 5 <input type="checkbox"/> | X |
| 6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i> | 6 <input checked="" type="checkbox"/> | 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? <i>If "Yes," complete Schedule D, Part II</i> | 7 <input checked="" type="checkbox"/> | X |
| 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> | 8 <input checked="" type="checkbox"/> | X |
| 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? <i>If "Yes," complete Schedule D, Part IV</i> | 9 <input type="checkbox"/> | X |
| 10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> | 10 <input checked="" type="checkbox"/> | X |
| 11 Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable | 11 <input checked="" type="checkbox"/> | X |
| • Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i> | 12 <input type="checkbox"/> | X |
| • Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII.</i> | 13 <input type="checkbox"/> | X |
| • Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII.</i> | 14a <input type="checkbox"/> | X |
| • Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX.</i> | 14b <input type="checkbox"/> | X |
| • Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i> | 15 <input type="checkbox"/> | X |
| • Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? <i>If "Yes," complete Schedule D, Part X.</i> | 16 <input type="checkbox"/> | X |
| 12 Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII.</i> | 17 <input type="checkbox"/> | X |
| 12A Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional</i> | 18 <input checked="" type="checkbox"/> | X |
| 13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> | 19 <input type="checkbox"/> | X |
| 14a Did the organization maintain an office, employees, or agents outside of the United States? | 20 <input type="checkbox"/> | X |
| b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Part I</i> | 21 <input type="checkbox"/> | X |
| 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? <i>If "Yes," complete Schedule F, Part II</i> | 22 <input type="checkbox"/> | X |
| 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? <i>If "Yes," complete Schedule F, Part III</i> | 23 <input type="checkbox"/> | X |
| 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> | 24 <input type="checkbox"/> | X |
| 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> | 25 <input type="checkbox"/> | X |
| 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> | 26 <input type="checkbox"/> | X |
| 20 Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i> | 27 <input type="checkbox"/> | X |

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Part IV Checklist of Required Schedules (continued)

21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21

22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22

23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 23

24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No", go to line 25 24a

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d

25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I 25b

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

27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III 27

28 Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions). 28a

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28c

c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 29

29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30

30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 31

31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 32

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

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

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

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

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

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 38

38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O.

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Part V Statements Regarding Other IRS Filings 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 | 1a | 17 |
| 1b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable | 1b | 0 |
| c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | 1c | <input checked="" type="checkbox"/> |
| 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 | 1642 |
| b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <i>Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)</i> | 2b | <input checked="" type="checkbox"/> |
| 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? | 3a | <input checked="" type="checkbox"/> |
| b If "Yes," has it filed a Form 990-T for this year? <i>If "No," provide an explanation in Schedule O</i> | 3b | |
| 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? | 4a | <input checked="" type="checkbox"/> |
| 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 | <input checked="" type="checkbox"/> |
| b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | <input checked="" type="checkbox"/> |
| c If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? | 5c | |
| 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? | 6a | <input checked="" type="checkbox"/> |
| b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? | 6b | |
| 7 Organizations that may receive deductible contributions under section 170(c). | 7a | <input checked="" type="checkbox"/> |
| a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? | 7b | <input checked="" type="checkbox"/> |
| b If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7c | <input checked="" type="checkbox"/> |
| c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? | 7d | |
| d If "Yes," indicate the number of Forms 8282 filed during the year | 7e | |
| e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7f | |
| f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7g | |
| g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? | 7h | |
| h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? | 8 | |
| 8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? | 9a | |
| 9 Sponsoring organizations maintaining donor advised funds. | 9b | |
| a Did the organization make any taxable distributions under section 4966? | 10a | |
| b Did the organization make a distribution to a donor, donor advisor, or related person? | 10b | |
| 10 Section 501(c)(7) organizations. Enter: | 11a | |
| a Initiation fees and capital contributions included on Part VIII, line 12 | 11b | |
| b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | 12a | |
| 11 Section 501(c)(12) organizations. Enter: | 12b | |
| a Gross income from members or shareholders | | |
| b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) | | |
| 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 | | |

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

Section A. Governing Body and Management

| | | Yes | No |
|----|---|-----|----|
| 1a | Enter the number of voting members of the governing body | 29 | |
| 1b | Enter the number of voting members that are independent | 28 | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? | 2 | X |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? | 3 | X |
| 4 | Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? | 4 | X |
| 5 | Did the organization become aware during the year of a material diversion of the organization's assets? | 5 | X |
| 6 | Does the organization have members or stockholders? | 6 | X |
| 7a | Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? | 7a | X |
| b | Are any decisions of the governing body subject to approval by members, stockholders, or other persons? | 7b | X |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | | |
| a | The governing body? | 8a | X |
| b | Each committee with authority to act on behalf of the governing body? | 8b | X |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O | 9 | X |

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

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

Section C. Disclosure

| | |
|----|--|
| 17 | List the states with which a copy of this Form 990 is required to be filed ► <u>FL</u> |
| 18 | Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. |
| | <input type="checkbox"/> Own website <input checked="" type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request |
| 19 | Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. |
| 20 | State the name, physical address, and telephone number of the person who possesses the books and records of the organization ► <u>LOIS JENKINS - 727-467-9622</u> |
| | <u>2469 ENTERPRISE ROAD, CLEARWATER, FL 33763</u> |

Form 990 (2009)

932006
02-04-10

**YOUNG MEN'S CHRISTIAN ASSOCIATION OF THE
SUNCOAST, INC. FKA YMCA OF THE SUNCOAST**

Form 990 (2009)

59-0810731

Page 7

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter 0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's **current** key employees. See instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if the organization did not compensate any current officer, director, or trustee.

| (A) Name and Title | (B) Average hours per week | (C) Position (check all that apply) | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|--------------------------------------|--|---|-----------------------|---------|--------------|---------------------------------|---|---|--|
| | | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | | | |
| ROB BOOS DIRECTOR | 1.00 | X | | | | | 0. | 0. | 0. |
| DAVID L. BRANDON VICE CHAIR | 1.00 | X | X | | | | 0. | 0. | 0. |
| KIMBERLY BRIGGS DIRECTOR | 1.00 | X | | | | | 0. | 0. | 0. |
| A.T. 'BUZZ' COOPER, III DIRECTOR | 1.00 | X | | | | | 0. | 0. | 0. |
| ALLEN S. CRUMBLEY CHAIRMAN | 1.00 | X | X | | | | 0. | 0. | 0. |
| CHESTER 'BUD' ELIAS, JR. DIRECTOR | 1.00 | X | | | | | 0. | 0. | 0. |
| LLOYD FERRENTINO DIRECTOR | 1.00 | X | | | | | 0. | 0. | 0. |
| SCOTT FINK DIRECTOR | 1.00 | X | | | | | 0. | 0. | 0. |
| BILL HARDY DIRECTOR | 1.00 | X | | | | | 0. | 0. | 0. |
| KEVIN HAYSLETT DIRECTOR | 1.00 | X | | | | | 0. | 0. | 0. |
| MARK HEPP DIRECTOR | 1.00 | X | | | | | 0. | 0. | 0. |
| EDWARD "BEBE" HOBSON DIRECTOR | 1.00 | X | | | | | 0. | 0. | 0. |
| STEVE JEFFERIES TREASURER | 1.00 | X | X | | | | 0. | 0. | 0. |
| MICHAEL KLINE DIRECTOR | 1.00 | X | | | | | 0. | 0. | 0. |
| MORGAN LISTON DIRECTOR | 1.00 | X | | | | | 0. | 0. | 0. |
| AMY MAGUIRE DIRECTOR | 1.00 | X | | | | | 0. | 0. | 0. |
| JOE MARTESKI DIRECTOR | 1.00 | X | | | | | 0. | 0. | 0. |

YOUNG MEN'S CHRISTIAN ASSOCIATION OF THE
SUNCOAST, INC. FKA YMCA OF THE SUNCOAST

Form 990 (2009)

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

| (A) Name and title | (B) Average hours per week | (C) Position (check all that apply) | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|--------------------------------------|--|---|-----------------------|---------|--------------|---------------------------------|---|---|--|
| | | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | | | |
| HONORABLE BERNARD MCCABE DIRECTOR | 1.00 | X | | | | | 0. | 0. | 0. |
| JENNIFER MOORE DIRECTOR | 1.00 | X | | | | | 0. | 0. | 0. |
| GARY PAPA DIRECTOR | 1.00 | X | | | | | 0. | 0. | 0. |
| ART SHAND DIRECTOR | 1.00 | X | | | | | 0. | 0. | 0. |
| PETER VOSOTAS DIRECTOR | 1.00 | X | | | | | 0. | 0. | 0. |
| AMBER WILLIAMS DIRECTOR | 1.00 | X | | | | | 0. | 0. | 0. |
| GREG SHOWERS DIRECTOR | 1.00 | X | | | | | 0. | 0. | 0. |
| FRANK CRUM, JR. DIRECTOR | 1.00 | X | | | | | 0. | 0. | 0. |
| WANDA MCCAWTHAN DIRECTOR | 1.00 | X | | | | | 0. | 0. | 0. |
| LINDA WILLIAMS DIRECTOR | 1.00 | X | | | | | 0. | 0. | 0. |
| 1b Total | | | | | | ► | 511,654. | 0. | 74,138. |

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

3

3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person

| | Yes | No |
|---|-----|----|
| 3 | | X |
| 4 | X | |
| 5 | | X |

Section B. Independent Contractors

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

| (A) Name and business address | (B) Description of services | (C) Compensation |
|--|--------------------------------|---------------------|
| PROUD PELICAN 2178 MARINER BLVD., SPRING HILL, FL 34609 | CONSTRUCTION | 315,023. |
| MANNA MEALS PO BOX 30181, PHILADELPHIA, PA 19103 | SNACK AND FOOD PROVIDER | 261,300. |
| YMCA OF MIDDLE TENNESSEE 900 CHURCH ST., NASHVILLE, TN 37203 | SOFTWARE PROVIDER | 219,368. |
| GRAPHIX SCREEN PRINTING, 720 E. TARPON AVENUE, TARPON SPRINGS, FL 34689 | T-SHIRT SUPPLIER | 144,731. |
| TRIANGLE POOL SERVICES 12801 BELCHER RD, LARGO, FL 33773 | POOL SERVICES | 137,463. |

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

7

SEE SCHEDULE J-2 FOR PART VII, SECTION A CONTINUATION

Form 990 (2009)

YOUNG MEN'S CHRISTIAN ASSOCIATION OF THE
SUNCOAST, INC. FKA YMCA OF THE SUNCOAST

Form 990 (2009)

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Part VIII Statement of Revenue

| | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512, 513, or 514 |
|---|---|---|--|--|--|
| Contributions, gifts, grants and other similar amounts | 1 a 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 contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f | 1a 142,587. 1b 1c 41,190. 1d 1e 1,264,986. 1f 990,692. 2439455. | | | |
| Program Service Revenue | 2 a MEMBERSHIP FEES b BEFORE & AFTER SCHOOL c SUMMER CAMP PROGRAMS d SPORTS & RECREATION e AQUATIC PROGRAMS f All other program service revenue g Total. Add lines 2a-2f | Business Code 713940 713940 713940 713940 713940 713940 19,589,814. | 9692829. 6427075. 1788414. 575,288. 439,815. 666,393. | 9692829. 6427075. 1788414. 575,288. 439,815. 666,393. | |
| Other Revenue | 3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties 6 a Gross Rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ 41,190. of contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory 11 a OTHER REVENUE b c d All other revenue e Total. Add lines 11a-11d 12 Total revenue. See instructions. | (i) Real 38,700. (ii) Personal 38,700. (i) Securities 8,976,593. (ii) Other 8,972,169. 2,707. 4,424. <2,707. a 172570. b 55,605. a b a b a b a b 541519 | 212,817. 38,700. 1,717. 116,965. 116,965. | 212,817. 38,700. 1,717. 116,965. | |
| | Miscellaneous Revenue | Business Code | | | |
| | 11 a OTHER REVENUE b c d All other revenue e Total. Add lines 11a-11d 12 Total revenue. See instructions. | 541519 | 55,009. 55,009. 22,454,477. | 55,009. 19,802,205. | 0. 212,817. |

**YOUNG MEN'S CHRISTIAN ASSOCIATION OF THE
SUNCOAST, INC. FKA YMCA OF THE SUNCOAST**

Form 990 (2009)

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Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

| Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
|---|-------------------------------|---|--|---|
| 1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 | | | | |
| 2 Grants and other assistance to individuals in the U.S. See Part IV, line 22 | | | | |
| 3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 | | | | |
| 4 Benefits paid to or for members | | | | |
| 5 Compensation of current officers, directors, trustees, and key employees | 585,792. | 32,363. | 486,492. | 66,937. |
| 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 | 10,503,838. | 9,507,479. | 884,963. | 111,396. |
| 8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) | 746,054. | 648,470. | 85,423. | 12,161. |
| 9 Other employee benefits | 577,513. | 438,210. | 117,421. | 21,882. |
| 10 Payroll taxes | 905,989. | 792,476. | 100,480. | 13,033. |
| 11 Fees for services (non-employees) | | | | |
| a Management | | | | |
| b Legal | | | | |
| c Accounting | 33,700. | | 33,700. | |
| d Lobbying | | | | |
| e Professional fundraising services. See Part IV, line 17 | | | | |
| f Investment management fees | | | | |
| g Other | 460,496. | 342,537. | 113,656. | 4,303. |
| 12 Advertising and promotion | | | | |
| 13 Office expenses | 1,336,213. | 1,297,162. | 37,067. | 1,984. |
| 14 Information technology | 135,283. | 111,770. | 22,091. | 1,422. |
| 15 Royalties | | | | |
| 16 Occupancy | 2,850,977. | 2,735,830. | 115,147. | |
| 17 Travel | 173,824. | 155,837. | 15,910. | 2,077. |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials | | | | |
| 19 Conferences, conventions, and meetings | 133,206. | 96,672. | 32,153. | 4,381. |
| 20 Interest | 652,823. | 588,014. | 64,809. | |
| 21 Payments to affiliates | 241,449. | 214,328. | 24,649. | 2,472. |
| 22 Depreciation, depletion, and amortization | 2,064,971. | 1,847,665. | 210,910. | 6,396. |
| 23 Insurance | 515,099. | 498,694. | 16,405. | |
| 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 EQUIPMENT EXPENSES | 293,463. | 220,098. | 70,727. | 2,638. |
| b PRINTING AND PUBLIC REL | 240,231. | 41,562. | 106,741. | 91,928. |
| c BANK CHARGES | 189,939. | 148,307. | 41,632. | |
| d POSTAGE AND SHIPPING | 30,054. | 19,383. | 8,428. | 2,243. |
| e BAD DEBT | 25,000. | | | 25,000. |
| f All other expenses | 25,551. | 12,988. | 12,543. | 20. |
| 25 Total functional expenses. Add lines 1 through 24f | 22,721,465. | 19,749,845. | 2,601,347. | 370,273. |
| 26 Joint costs. Check here ► <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation | | | | |

**YOUNG MEN'S CHRISTIAN ASSOCIATION OF THE
SUNCOAST, INC. FKA YMCA OF THE SUNCOAST**

Form 990 (2009)

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Part X Balance Sheet

| | | (A) Beginning of year | | (B) End of year |
|------------------------------------|--|----------------------------------|-------------|----------------------------|
| Assets | 1 Cash - non-interest-bearing | 53,049. | 1 | 95,336. |
| | 2 Savings and temporary cash investments | 2,226,686. | 2 | 3,953,351. |
| | 3 Pledges and grants receivable, net | 1,204,752. | 3 | 1,089,110. |
| | 4 Accounts receivable, net | 334,119. | 4 | 368,385. |
| | 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L | | 5 | |
| | 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L | | 6 | |
| | 7 Notes and loans receivable, net | | 7 | |
| | 8 Inventories for sale or use | | 8 | |
| | 9 Prepaid expenses and deferred charges | 609,516. | 9 | 598,975. |
| | 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D | 10a 42,742,867. | | |
| | b Less: accumulated depreciation | 10b 15,014,008. | 29,054,162. | 10c 27,728,859. |
| | 11 Investments - publicly traded securities | 5,933,869. | 11 | 5,488,046. |
| | 12 Investments - other securities See Part IV, line 11 | | 12 | |
| | 13 Investments - program-related. See Part IV, line 11 | | 13 | |
| | 14 Intangible assets | | 14 | |
| | 15 Other assets See Part IV, line 11 | 270,640. | 15 | 249,273. |
| | 16 Total assets. Add lines 1 through 15 (must equal line 34) | 39,686,793. | 16 | 39,571,335. |
| Liabilities | 17 Accounts payable and accrued expenses | 1,552,194. | 17 | 1,565,982. |
| | 18 Grants payable | | 18 | |
| | 19 Deferred revenue | 632,316. | 19 | 545,089. |
| | 20 Tax-exempt bond liabilities | | 20 | |
| | 21 Escrow or custodial account liability. Complete Part IV of Schedule D | | 21 | |
| | 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L | | 22 | |
| | 23 Secured mortgages and notes payable to unrelated third parties | 12,025,488. | 23 | 11,989,902. |
| | 24 Unsecured notes and loans payable to unrelated third parties | | 24 | |
| | 25 Other liabilities. Complete Part X of Schedule D | 834,610. | 25 | 594,436. |
| | 26 Total liabilities. Add lines 17 through 25 | 15,044,608. | 26 | 14,695,409. |
| Net Assets or Fund Balances | Organizations that follow SFAS 117, check here ► <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34. | | | |
| | 27 Unrestricted net assets | 21,604,446. | 27 | 22,190,924. |
| | 28 Temporarily restricted net assets | 2,037,739. | 28 | 1,685,002. |
| | 29 Permanently restricted net assets | 1,000,000. | 29 | 1,000,000. |
| | Organizations that do not follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 30 through 34. | | | |
| | 30 Capital stock or trust principal, or current funds | | 30 | |
| | 31 Paid-in or capital surplus, or land, building, or equipment fund | | 31 | |
| | 32 Retained earnings, endowment, accumulated income, or other funds | | 32 | |
| | 33 Total net assets or fund balances | 24,642,185. | 33 | 24,875,926. |
| | 34 Total liabilities and net assets/fund balances | 39,686,793. | 34 | 39,571,335. |

Form 990 (2009)

**'YOUNG' MEN'S CHRISTIAN ASSOCIATION OF 'THE
SUNCOAST, INC. FKA YMCA OF THE SUNCOAST**

Form 990 (2009)

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Part XI Financial Statements and Reporting

| | Yes | No |
|---|--|---------------------------------------|
| 1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. | | |
| 2a Were the organization's financial statements compiled or reviewed by an independent accountant? | 2a <input type="checkbox"/> | <input checked="" type="checkbox"/> X |
| b Were the organization's financial statements audited by an independent accountant? | 2b <input checked="" type="checkbox"/> X | |
| c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. | 2c <input checked="" type="checkbox"/> X | |
| d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis | | |
| 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? | 3a <input type="checkbox"/> | <input checked="" type="checkbox"/> X |
| b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits. | 3b <input type="checkbox"/> | |

Form 990 (2009)

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2009

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

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

**YOUNG MEN'S CHRISTIAN ASSOCIATION OF THE
SUNCOAST, INC. FKA YMCA OF THE SUNCOAST**

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

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

| | |
|----|--|
| 1 | <input type="checkbox"/> A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). |
| 2 | <input type="checkbox"/> A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) |
| 3 | <input type="checkbox"/> A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). |
| 4 | <input type="checkbox"/> 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 | <input type="checkbox"/> An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) |
| 6 | <input type="checkbox"/> A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). |
| 7 | <input type="checkbox"/> An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) |
| 8 | <input type="checkbox"/> A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) |
| 9 | <input checked="" type="checkbox"/> An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) |
| 10 | <input type="checkbox"/> An organization organized and operated exclusively to test for public safety. See section 509(a)(4). |
| 11 | <input type="checkbox"/> An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h |
| | a <input type="checkbox"/> Type I b <input type="checkbox"/> Type II c <input type="checkbox"/> Type III - Functionally integrated d <input type="checkbox"/> Type III - Other |
| e | <input type="checkbox"/> By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) |
| f | If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box <input type="checkbox"/> |
| g | Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? |
| | (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? |
| | (ii) A family member of a person described in (i) above? |
| | (iii) A 35% controlled entity of a person described in (i) or (ii) above? |
| h | Provide the following information about the supported organization(s). |

| | Yes | No |
|----------|-----|----|
| 11g(i) | | |
| 11g(ii) | | |
| 11g(iii) | | |

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

| Calendar year (or fiscal year beginning in) ► | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) 2009 | (f) Total |
|---|----------|----------|----------|----------|----------|-----------|
| 1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.") | | | | | | |
| 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 3 The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 4 Total. Add lines 1 through 3 | | | | | | |
| 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 | | | | | | |

Section B. Total Support

| Calendar year (or fiscal year beginning in) ► | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) 2009 | (f) Total |
|--|----------|----------|----------|----------|----------|-----------|
| 7 Amounts from line 4 | | | | | | |
| 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | | | | | | |
| 9 Net income from unrelated business activities, whether or not the business is regularly carried on | | | | | | |
| 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) | | | | | | |
| 11 Total support. Add lines 7 through 10 | | | | | | |
| 12 Gross receipts from related activities, etc. (see instructions) | | | | | 12 | |

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ►

Section C. Computation of Public Support Percentage

| | | |
|---|----|---|
| 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) | 14 | % |
| 15 Public support percentage from 2008 Schedule A, Part II, line 14 | 15 | % |
| 16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/> | | |
| b 33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/> | | |
| 17a 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► <input type="checkbox"/> | | |
| b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► <input type="checkbox"/> | | |
| 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ► <input type="checkbox"/> | | |

YOUNG MEN'S CHRISTIAN ASSOCIATION' OF THE

Schedule A (Form 990 or 990-EZ) 2009 SUNCOAST, INC. FKA YMCA OF THE SUNCOAST 59-0810731 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 year beginning in) ► | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) 2009 | (f) Total |
|--|--------------------|--------------------|--------------------|--------------------|--------------------|---------------------|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | 3,438,820. | 3,855,706. | 2,799,509. | 2,549,161. | 2,439,455. | 15,082,651. |
| 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose | 20,307,931. | 21,186,255. | 21,359,922. | 20,520,812. | 19,762,384. | 103,137,304. |
| 3 Gross receipts from activities that are not an unrelated trade or business under section 513 | | | | | | |
| 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 5 The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 6 Total. Add lines 1 through 5 | 23,746,751. | 25,041,961. | 24,159,431. | 23,069,973. | 22,201,839. | 118,219,955. |
| 7a Amounts included on lines 1, 2, and 3 received from disqualified persons | | | | | | 0. |
| b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year | | | | | | 0. |
| c Add lines 7a and 7b | | | | | | 0. |
| 8 Public support. (Subtract line 7c from line 6) | | | | | | 118,219,955. |

Section B. Total Support

| Calendar year (or fiscal year beginning in) ► | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) 2009 | (f) Total |
|---|--------------------|--------------------|--------------------|--------------------|--------------------|----------------------------|
| 9 Amounts from line 6 | 23,746,751. | 25,041,961. | 24,159,431. | 23,069,973. | 22,201,839. | 118,219,955. |
| 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | 328,430. | 447,589. | 533,874. | 382,305. | 251,517. | 1,943,715. |
| b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | | |
| c Add lines 10a and 10b | 328,430. | 447,589. | 533,874. | 382,305. | 251,517. | 1,943,715. |
| 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on | | | | | | |
| 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) | 17,938. | 126,437. | 53,441. | 42,775. | 55,009. | 295,600. |
| 13 Total support (Add lines 9, 10c, 11, and 12) | 24,093,119. | 25,615,987. | 24,746,746. | 23,495,053. | 22,508,365. | 120,459,270. |
| 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here | | | | | | ► <input type="checkbox"/> |

Section C. Computation of Public Support Percentage

| | | | |
|---|----|-------|---|
| 15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) | 15 | 98.14 | % |
| 16 Public support percentage from 2008 Schedule A, Part III, line 15 | 16 | 98.17 | % |

Section D. Computation of Investment Income Percentage

| | | | |
|--|----|------|---------------------------------------|
| 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) | 17 | 1.61 | % |
| 18 Investment income percentage from 2008 Schedule A, Part III, line 17 | 18 | 1.61 | % |
| 19a 33 1/3% support tests - 2009. 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 | | | ► <input checked="" type="checkbox"/> |
| b 33 1/3% support tests - 2008. If the organization did not check a box on line 14 or line 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 | | | ► <input type="checkbox"/> |
| 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions | | | ► <input type="checkbox"/> |

Schedule A (Form 990 or 990-EZ) 2009

Department of the Treasury
Internal Revenue Service

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

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

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

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

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

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

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

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

Name of organization YOUNG MEN'S CHRISTIAN ASSOCIATION OF THE SUNCOAST, INC. FKA YMCA OF THE SUNCOAST Employer identification number 59-0810731

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

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

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

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

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ► \$ _____

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ► \$ _____

3 Total exempt function expenditures Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ► \$ _____

4 Did the filing organization file **Form 1120-POL** for this year? Yes No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV

| (a) Name | (b) Address | (c) EIN | (d) Amount paid from filing organization's funds If none, enter -0- | (e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0- |
|----------|-------------|---------|---|--|
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For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

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Schedule C (Form 990 or 990-EZ) 2009

YOUNG MEN'S CHRISTIAN ASSOCIATION OF THE

Schedule C (Form 990 or 990-EZ) 2009 SUNCOAST, INC. FKA YMCA OF THE SUNCOAST 59-0810731 Page 2

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

| Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) | | (a) Filing organization's totals | (b) Affiliated group totals |
|---|--|----------------------------------|-----------------------------|
| 1a Total lobbying expenditures to influence public opinion (grass roots lobbying) | | | |
| b Total lobbying expenditures to influence a legislative body (direct lobbying) | | | |
| c Total lobbying expenditures (add lines 1a and 1b) | | | |
| d Other exempt purpose expenditures | | | |
| e Total exempt purpose expenditures (add lines 1c and 1d) | | | |
| f Lobbying nontaxable amount. Enter the amount from the following table in both columns. | | | |
| If the amount on line 1e, column (a) or (b) is: | The lobbying nontaxable amount is: | | |
| Not over \$500,000 | 20% of the amount on line 1e. | | |
| Over \$500,000 but not over \$1,000,000 | \$100,000 plus 15% of the excess over \$500,000. | | |
| Over \$1,000,000 but not over \$1,500,000 | \$175,000 plus 10% of the excess over \$1,000,000. | | |
| Over \$1,500,000 but not over \$17,000,000 | \$225,000 plus 5% of the excess over \$1,500,000. | | |
| Over \$17,000,000 | \$1,000,000. | | |
| g Grassroots nontaxable amount (enter 25% of line 1f) | | | |
| h Subtract line 1g from line 1a. If zero or less, enter -0- | | | |
| i Subtract line 1f from line 1c. If zero or less, enter -0- | | | |
| j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

4-Year Averaging Period Under Section 501(h)

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

| Lobbying Expenditures During 4-Year Averaging Period | | | | | |
|--|----------|----------|----------|----------|-----------|
| Calendar year (or fiscal year beginning in) | (a) 2006 | (b) 2007 | (c) 2008 | (d) 2009 | (e) Total |
| 2a Lobbying nontaxable amount | | | | | |
| b Lobbying ceiling amount (150% of line 2a, column(e)) | | | | | |
| c Total lobbying expenditures | | | | | |
| d Grassroots nontaxable amount | | | | | |
| e Grassroots ceiling amount (150% of line 2d, column (e)) | | | | | |
| f Grassroots lobbying expenditures | | | | | |

Schedule C (Form 990 or 990-EZ) 2009

YOUNG MEN'S CHRISTIAN ASSOCIATION OF THE

SUNCOAST, INC. FKA YMCA OF THE SUNCOAST 59-0810731 Page 3

Schedule C (Form 990 or 990-EZ) 2009

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

| | (a) | | (b) |
|--|-----|----|--------|
| | Yes | No | Amount |
| 1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of | | | |
| a Volunteers? | | X | |
| b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? | | X | |
| c Media advertisements? | | X | |
| d Mailings to members, legislators, or the public? | | X | |
| e Publications, or published or broadcast statements? | | X | |
| f Grants to other organizations for lobbying purposes? | | X | |
| g Direct contact with legislators, their staffs, government officials, or a legislative body? | | X | |
| h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? | | X | |
| i Other activities? If "Yes," describe in Part IV | | X | |
| j Total Add lines 1c through 1i | | | 3,944. |
| 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? | | X | |
| b If "Yes," enter the amount of any tax incurred under section 4912 | | | |
| c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 | | | |
| d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? | | | |

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

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

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

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

Part IV Supplemental Information

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

Schedule D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No. 1545-0047

2009

Open to Public
Inspection

Name of the organization **YOUNG MEN'S CHRISTIAN ASSOCIATION OF THE SUNCOAST, INC. FKA YMCA OF THE SUNCOAST** Employer identification number **59-0810731**

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

| | (a) Donor advised funds | (b) Funds and other accounts |
|--|-------------------------|------------------------------|
| 1 Total number at end of year | | |
| 2 Aggregate contributions to (during year) | | |
| 3 Aggregate grants from (during year) | | |
| 4 Aggregate value at end of year | | |

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space

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

| | Held at the End of the Tax Year |
|----|---------------------------------|
| 2a | |
| 2b | |
| 2c | |
| 2d | |

a Total number of conservation easements
b Total acreage restricted by conservation easements
c Number of conservation easements on a certified historic structure included in (a)
d Number of conservation easements included in (c) acquired after 8/17/06

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

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

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

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

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

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

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1 ► \$ _____
(ii) Assets included in Form 990, Part X ► \$ _____

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

a Revenues included in Form 990, Part VIII, line 1 ► \$ _____
b Assets included in Form 990, Part X ► \$ _____

YOUNG MEN'S CHRISTIAN ASSOCIATION OF THE

SUNCOAST, INC. FKA YMCA OF THE SUNCOAST

59-0810731 Page 2

Schedule D (Form 990) 2009

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

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items

(check all that apply):

a Public exhibition
 b Scholarly research
 c Preservation for future generations

d Loan or exchange programse Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets

to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No**Part IV Escrow and Custodial Arrangements.** Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIV and complete the following table

c Beginning balance
 d Additions during the year
 e Distributions during the year
 f Ending balance

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIV

| | Amount |
|----|--------|
| 1c | |
| 1d | |
| 1e | |
| 1f | |

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

| | (a) Current year | (b) Prior year | (c) Two years back | (d) Three years back | (e) Four years back |
|--|------------------|----------------|--------------------|----------------------|---------------------|
| 1a Beginning of year balance | 2424912. | 3374991. | | | |
| b Contributions | 26,525. | 11,985. | | | |
| c Net investment earnings, gains, and losses | 519,298. | <856,330.> | | | |
| d Grants or scholarships | | | | | |
| e Other expenditures for facilities and programs | 105,000. | 105,734. | | | |
| f Administrative expenses | | | | | |
| g End of year balance | 2865735. | 2424912. | | | |

2 Provide the estimated percentage of the year end balance held as

a Board designated or quasi-endowment ► 65.00 %

b Permanent endowment ► 35.00 %

c Term endowment ► .00 %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization

by:

(i) unrelated organizations
 (ii) related organizations

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

| Yes | No |
|--------|----|
| 3a(i) | X |
| 3a(ii) | X |
| 3b | |

4 Describe in Part XIV the intended uses of the organization's endowment funds

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

| Description of investment | (a) Cost or other basis (investment) | (b) Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value |
|---------------------------|--------------------------------------|---------------------------------|------------------------------|----------------|
| 1a Land | | 3,752,760. | | 3,752,760. |
| b Buildings | | 29,982,546. | 9,833,432. | 20,149,114. |
| c Leasehold improvements | | 2,791,992. | 1,621,441. | 1,170,551. |
| d Equipment | | 5,949,494. | 3,559,135. | 2,390,359. |
| e Other | | 266,075. | | 266,075. |

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) ► 27,728,859.

Schedule D (Form 990) 2009

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

| (a) Description of security or category (including name of security) | (b) Book value | (c) Method of valuation: Cost or end-of-year market value |
|---|----------------|--|
| Financial derivatives | | |
| Closely-held equity interests | | |
| Other _____ | | |
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Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ►

Total. (Column (b) must equal Form 990, Part X, col (B) line 15.)

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

Total. (Column (b) must equal Form 990, Part X, col (B) line 25.)

594,436.

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

**YOUNG MEN'S CHRISTIAN ASSOCIATION OF THE
SUNCOAST, INC. FKA YMCA OF THE SUNCOAST**

Schedule D (Form 990) 2009

59-0810731 Page 4

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

| | | |
|---|----|-------------|
| 1 Total revenue (Form 990, Part VIII, column (A), line 12) | 1 | 22,454,477. |
| 2 Total expenses (Form 990, Part IX, column (A), line 25) | 2 | 22,721,465. |
| 3 Excess or (deficit) for the year Subtract line 2 from line 1 | 3 | <266,988. > |
| 4 Net unrealized gains (losses) on investments | 4 | 460,340. |
| 5 Donated services and use of facilities | 5 | |
| 6 Investment expenses | 6 | |
| 7 Prior period adjustments | 7 | |
| 8 Other (Describe in Part XIV.) | 8 | 40,389. |
| 9 Total adjustments (net) Add lines 4 through 8 | 9 | 500,729. |
| 10 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 | 10 | 233,741. |

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

| | | |
|--|----|-------------|
| 1 Total revenue, gains, and other support per audited financial statements | 1 | 22,966,001. |
| 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12. | | |
| a Net unrealized gains on investments | 2a | 460,340. |
| b Donated services and use of facilities | 2b | 10,795. |
| c Recoveries of prior year grants | 2c | |
| d Other (Describe in Part XIV.) | 2d | 40,389. |
| e Add lines 2a through 2d | 2e | 511,524. |
| 3 Subtract line 2e from line 1 | 3 | 22,454,477. |
| 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1. | | |
| a Investment expenses not included on Form 990, Part VIII, line 7b | 4a | |
| b Other (Describe in Part XIV.) | 4b | |
| c Add lines 4a and 4b | 4c | 0. |
| 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) | 5 | 22,454,477. |

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

| | | |
|--|----|-------------|
| 1 Total expenses and losses per audited financial statements | 1 | 22,732,260. |
| 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: | | |
| a Donated services and use of facilities | 2a | 10,795. |
| b Prior year adjustments | 2b | |
| c Other losses | 2c | |
| d Other (Describe in Part XIV.) | 2d | |
| e Add lines 2a through 2d | 2e | 10,795. |
| 3 Subtract line 2e from line 1 | 3 | 22,721,465. |
| 4 Amounts included on Form 990, Part IX, line 25, but not on line 1 | | |
| a Investment expenses not included on Form 990, Part VIII, line 7b | 4a | |
| b Other (Describe in Part XIV.) | 4b | |
| c Add lines 4a and 4b | 4c | 0. |
| 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) | 5 | 22,721,465. |

Part XIV Supplemental Information

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

PART V, LINE 4: TO PRESERVE THE VALUE OF THE FUND ADJUSTED FOR

INFLATION THROUGH LONG-TERM APPRECIATION OF PRINCIPAL (EQUAL TO OR GREATER THAN THE RATE OF INFLATION). TO PROVIDE FUNDING FOR PROGRAMS GIVING PRIORITY TO THE USE OF INCOME FOR MAJOR MAINTENANCE, MODERNIZATION, OR EXPANSION OF BUILDINGS AND FACILITIES, EXTENSION OF SERVICES AND DEVELOPING AND TRAINING PROFESSIONAL LEADERSHIP WHILE MAINTAINING THE PURCHASING POWER OF THE PORTFOLIO AND OFFSETTING INFLATION.

Part XIV Supplemental Information (continued)**PART XI, LINE 8 - OTHER ADJUSTMENTS:****CHANGE IN FAIR VALUE OF INTEREST SWAP****PART XII, LINE 2D - OTHER ADJUSTMENTS:****CHANGE IN FAIR VALUE OF INTEREST SWAP**

SCHEDULE G
(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047

2009

**Open To Public
Inspection**

Department of the Treasury
Internal Revenue Service

► Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

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

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

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

Name of the organization **YOUNG MEN'S CHRISTIAN ASSOCIATION OF THE SUNCOAST, INC. FKA YMCA OF THE SUNCOAST** Employer identification number **59-0810731**

Part I **Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part

1 Indicate whether the organization raised funds through any of the following activities Check all that apply

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

Total

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

YOUNG MEN'S CHRISTIAN ASSOCIATION OF THE

Schedule G (Form 990 or 990-EZ) 2009 SUNCOAST, INC. FKA YMCA OF THE SUNCOAST 59-0810731 Page 2

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000

| Revenue | FISHING TOURNAMENTS | (a) Event #1 (event type) | (b) Event #2 (event type) | (c) Other events (total number) | (d) Total events (add col. (a) through col. (c)) |
|---------|---|------------------------------|------------------------------|------------------------------------|--|
| | | GRAPE ESCAPE | | 2 | |
| | | | | | |
| 1 | Gross receipts | 93,301. | 28,085. | 48,128. | 169,514. |
| 2 | Less: Charitable contributions | 26,110. | 4,225. | 10,230. | 40,565. |
| 3 | Gross income (line 1 minus line 2) | 67,191. | 23,860. | 37,898. | 128,949. |
| 4 | Cash prizes | | | | |
| 5 | Noncash prizes | | | | |
| 6 | Rent/facility costs | | | | |
| 7 | Food and beverages | | | | |
| 8 | Entertainment | | | | |
| 9 | Other direct expenses | 32,424. | 5,699. | 15,763. | 53,886. |
| 10 | Direct expense summary. Add lines 4 through 9 in column (d) | | | | ► (53,886) |
| 11 | Net income summary. Combine line 3, column (d), and line 10 | | | | ► 75,063. |

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

| Revenue | | (a) Bingo | (b) Pull tabs/instant bingo/progressive bingo | (c) Other gaming | (d) Total gaming (add col. (a) through col. (c)) |
|---------|---|---|---|---|--|
| | | | | | |
| 1 | Gross revenue | | | | |
| 2 | Cash prizes | | | | |
| 3 | Noncash prizes | | | | |
| 4 | Rent/facility costs | | | | |
| 5 | Other direct expenses | | | | |
| 6 | Volunteer labor | <input type="checkbox"/> Yes _____ % <input type="checkbox"/> No | <input type="checkbox"/> Yes _____ % <input type="checkbox"/> No | <input type="checkbox"/> Yes _____ % <input type="checkbox"/> No | |
| 7 | Direct expense summary. Add lines 2 through 5 in column (d) | | | | ► () |
| 8 | Net gaming income summary. Combine line 1, column (d), and line 7 | | | | ► |

9 Enter the state(s) in which the organization operates gaming activities: _____

a Is the organization licensed to operate gaming activities in each of these states?

b If "No," explain

| Yes | No |
|-----|----|
| 9a | |

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

b If "Yes," explain

| | |
|-----|--|
| 10a | |
|-----|--|

11 Does the organization operate gaming activities with nonmembers?

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

| | |
|----|--|
| 11 | |
| 12 | |

YOUNG MEN'S CHRISTIAN ASSOCIATION OF THE

Schedule G (Form 990 or 990-EZ) 2009 SUNCOAST, INC. FKA YMCA OF THE SUNCOAST 59-0810731 Page 3

13 Indicate the percentage of gaming activity operated in:

- a The organization's facility
- b An outside facility

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ► _____

Address ► _____

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?

b If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____

c If "Yes," enter name and address of the third party:

Name ► _____

Address ► _____

16 Gaming manager information

Name ► _____

Gaming manager compensation ► \$ _____

Description of services provided ► _____
_____ Director/officer Employee Independent contractor

17 Mandatory distributions.

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$

17a

Schedule G (Form 990 or 990-EZ) 2009

SCHEDULE J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047

2009

Open to Public
Inspection

Name of the organization **YOUNG MEN'S CHRISTIAN ASSOCIATION OF THE SUNCOAST, INC. FKA YMCA OF THE SUNCOAST** Employer identification number **59-0810731**

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

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

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

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

3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply

| | |
|--|---|
| <input checked="" type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization.

a Receive a severance payment or change-of-control payment?
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?
c Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III

Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

a The organization?

b Any related organization?

If "Yes" to line 5a or 5b, describe in Part III

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

a The organization?

b Any related organization?

If "Yes" to line 6a or 6b, describe in Part III

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

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III

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

| | Yes | No |
|-----------|------------|-----------|
| 1b | | |
| 2 | X | |
| 4a | | X |
| 4b | | X |
| 4c | | X |
| 5a | | X |
| 5b | | X |
| 6a | | X |
| 6b | | X |
| 7 | | X |
| 8 | | X |
| 9 | | |

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

Schedule J (Form 990) 2009

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

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii).

Do not list any individuals that are not listed on Form 990, Part VII.

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

| (A) Name | (B) Breakdown of W-2 and/or 1099-MISC compensation | | | (C) Retirement and other deferred compensation | (D) Nontaxable benefits | (E) Total of columns (B)(i)-(D) | (F) Compensation reported in prior Form 990 or Form 990-EZ |
|-------------------|--|-------------------------------------|-------------------------------------|--|-------------------------|---------------------------------|--|
| | (i) Base compensation | (ii) Bonus & incentive compensation | (iii) Other reportable compensation | | | | |
| SCOTT GOYER | (i) 211,350. | | 9,000. | 25,978. | 4,655. | 250,983. | |
| | (ii) 164,000. | | 9,000. | 20,415. | 4,726. | 198,141. | |
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► Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

► See the Instructions for Form 990.

Name of the Organization **YOUNG MEN'S CHRISTIAN ASSOCIATION OF THE SUNCOAST, INC. FKA YMCA OF THE SUNCOAST** Employer Identification number **59-0810731**

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
CARING, HONESTY, RESPECT AND RESPONSIBILITY. OUR MISSION COMES ALIVE
THROUGH THE DEDICATED EFFORTS OF STAFF; THE GUIDANCE OF VOLUNTEERS; THE
ENGAGED PARTICIPATION OF MEMBERS; AND THE GENEROSITY OF DONORS TO THE
YMCA. THE YMCA OF THE SUNCOAST SERVES NEARLY 84,000 MEN, WOMEN AND
CHILDREN THROUGH 9 BRANCHES AND ALMOST 50 SCHOOL SITES IN FOUR
COUNTIES. FOR OVER 50 YEARS, OUR MISSION HAS BEEN TO PUT CHRISTIAN
PRINCIPLES INTO PRACTICE THROUGH PROGRAMS THAT BUILD HEALTHY SPIRIT,
MIND AND BODY FOR ALL. THIS MISSION IS INCLUSIVE OF ALL AGES, RACES,
ABILITIES, RELIGIONS, AND INCOMES WHO WISH TO BELONG. WE HELP PEOPLE
REACH THEIR FULLEST GOD-GIVEN POTENTIAL AND ACHIEVE OVERALL WELL-BEING,
PHYSICALLY, MENTALLY, AND SPIRITUALLY.

FORM 990, PART III, LINE 2, NEW PROGRAM SERVICES:
TO ITS MANY MISSION-DRIVEN PROGRAMS AND SERVICES, DURING 2009 WE JOINED
A YMCA-OF-THE-USA LED EFFORT CALLED THE AFRICAN-AMERICAN AND
HISPANIC/LATINO HEALTH AND WELL-BEING COLLABORATIVE (AAHL) WHICH
FOCUSSES ON THE UNIQUE CHALLENGES OF YMCAS LOCATED IN MAJORITY-MINORITY
NEIGHBORHOODS AND COMMUNITIES IN WHICH AFRICAN-AMERICANS/BLACKS MAKE UP
20% OR MORE OF THE POPULATION AND HISPANIC/LATINOS MAKE UP 20% OR MORE
OF THE POPULATION AND THE COMBINED MINORITY POPULATION IS OVER 51%.

THE ISSUE OF HEALTH DISPARITIES IS A RALLYING POINT FOR THE URGENCY AND
FOCUS OF THIS COLLABORATIVE. HEALTH DISPARITIES, IN WHICH BLACKS
(INCLUDING AFRICAN-AMERICAN AND CARIBBEAN-AMERICAN) AND LATINOS
EXPERIENCE A HIGHER INCIDENCE OF CHRONIC DISEASE AND/OR MORTALITY THAN
THE REST OF THE US POPULATION, IS A HEALTH CRISIS THAT IS INFLUENCED

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AND ENHANCED BY POLITICAL AND SOCIO-ECONOMIC FACTORS, THE ENVIRONMENT,
AND INDIVIDUAL LIFESTYLES.

THIS COLLABORATIVE (AAHL) IS AN EFFORT OF THE YMCA MOVEMENT TO IDENTIFY
PRACTICES THAT SUCCESSFULLY ENGAGE MEMBERS OF MAJORITY-MINORITY
COMMUNITIES IN MAKING LIFESTYLE CHOICES THAT POSITIVELY IMPACT THEIR
HEALTH AND WELL-BEING. OUR CLEARWATER BRANCH, GREATER RIDGECREST
BRANCH, AND HIGH POINT BRANCH YMCAS ARE SERVING MAJORITY-MINORITY
COMMUNITIES AND WILL WORK TOGETHER TO ADDRESS HEALTH DISPARITIES BY
FOCUSING ON THE HEALTH AND WELL-BEING OF BLACK AND LATINO INDIVIDUALS
AND FAMILIES BY:

1) DEVELOPING UNIQUELY APPROPRIATE, CULTURALLY-COMPETENT APPROACHES TO
ENGAGING AND SUPPORTING INDIVIDUALS AND FAMILIES IN THEIR PURSUIT OF
HEALTH AND WELL-BEING.

2) SUPPORTING A HIGHLY SKILLED STAFF TEAM THAT IS MADE UP OF
INDIVIDUALS VIEWED AS CULTURALLY COMPETENT, AND WHOM CHILDREN AND
ADULTS CONSIDER CREDIBLE ROLE MODELS.

3) ADOPTING A PROGRAM THAT THAT BEEN PROVEN TO PROMOTE HEALTHY
LIFESTYLE CHANGE IN MINORITY POPULATIONS.

4) DEVELOPING A BROAD RANGE OF PROGRAMS, ACTIVITIES, CLUBS AND EVENTS
THAT HELP INDIVIDUALS AND FAMILIES DEVELOP IN SPIRIT, MIND, AND BODY.

5) FOCUSING ON THE TOTAL HEALTH AND WELL-BEING OF COMMUNITIES INCLUDING
INDIVIDUALS AND FAMILIES.

6) REACHING BEYOND THE WALLS OF THE YMCA TO ENGAGE COMMUNITY PARTNERS.

7) ALIGNING THE COMMUNITY RESOURCES NECESSARY TO SUPPORT HEALTH AND
WELL-BEING BY EMPOWERING, CONVENING AND SUPPORTING COMMUNITY BASED

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ORGANIZATIONS WHO SHARE THE YMCA'S VALUES AND MISSION AND BY RESPECTING
AND INCORPORATING THE LATINO ORGANIZATION'S VALUES AND MISSION INTO THE
YMCA'S.

THE OUTCOMES AND LEARNINGS FROM THE AAHL ARE EXPECTED TO GENERATE
LEADING PRACTICES THAT WILL BE SHARED WITH OTHER YMCAS AND INDIVIDUALS
COMMITTED TO MAKING A DIFFERENCE IN IMPROVING THE LIVES AND WELL BEING
OF BLACKS AND LATINOS ACROSS THE COUNTRY.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS

CHILDREN HAVE THE CHANCE TO EXPRESS THEIR TALENTS IN THE ARTS, SPORTS,
AND OTHER AREAS OF INTEREST, TAKING ADVANTAGE OF ALL THE Y HAS TO
OFFER. KIDS FIND OUT WHAT SUCCESS IS ALL ABOUT IN AN APPROACH THAT
SAYS, "EVERYBODY PLAYS, EVERYBODY WINS." TIME IS SET ASIDE FOR TACKLING
HOMEWORK WITH ADULT HELP AVAILABLE.

PROGRAM COMPONENTS INCLUDE VALUE SESSIONS FOCUSING ON CHARACTER
DEVELOPMENT, READING, ARTS AND CRAFTS, HOMEWORK HELP, MONTHLY
NEWSLETTERS, COMPUTER TIME, VOLUNTEER COMMUNITY SERVICE, FAMILY NIGHTS,
SWIMMING, AND INDOOR AND OUTDOOR RECREATION. EACH OF THESE PROGRAMS
CONTRIBUTE TO DEVELOPING FAMILY INTERACTION AND COMMUNICATION, AS WELL
AS EDUCATING CHILDREN IN THE IMPORTANCE OF FAMILY, COMMUNITY AND MAKING
GOOD CHOICES FOR A HEALTHY FUTURE.

THE FRAMEWORK FOR EACH PROGRAM IS BASED ON CORE VALUES OF THE YMCA:

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CARING, HONESTY, RESPECT AND RESPONSIBILITY. CURRICULUM INCLUDES
CONTENT FROM THE SIX PILLARS OF CHARACTER: MAKING ETHICAL DECISIONS BY
CHARACTER COUNTS, CHARACTER EDUCATION GRADES PRE-K-6 BY INCENTIVE
PUBLICATIONS, INC., 2000 PROJECT WISDOM AND THE VIRTUES PROJECT.
COMPONENTS OF THE CURRICULUM INCLUDE: ACTIVITIES SURROUNDING
PEACEKEEPING, COOPERATION, RESPONSIBILITY, CARING, HONESTY, RESPECT,
TRUST, FRIENDSHIPS, CONFLICT RESOLUTION, TEAMWORK AND COMMUNICATION.
OTHER ACTIVITIES INCLUDE EXPRESSIVE ARTS, RECREATION, MUSIC, NUTRITION,
HEALTHY LIFESTYLES AND FIELD TRIPS. THE CURRICULUM IDENTIFIES,
UTILIZES AND RECOGNIZES CULTURAL DIFFERENCES AND COMMONALITIES
THROUGHOUT MOST ACTIVITIES AND IS ALWAYS HELD TO SUNSHINE STATE
STANDARDS.

THIS PROGRAM OPERATES IN NEARLY 50 ELEMENTARY SCHOOLS, MIDDLE SCHOOLS
AND YMCA SITES SERVING OVER 4,300 CHILDREN THROUGHOUT THE SCHOOL YEAR.
FINANCIALS ASSISTANCE WAS PROVIDED FOR APPROXIMATELY 30% OF CHILDREN
TOTALING \$560,000. IN 2009, WE CONTINUED OUR VERY SUCCESSFUL
PARTNERSHIP WITH THE TARPO SPRINGS HOUSING AUTHORITY, PROVIDING 80
CHILDREN RESIDING IN PUBLIC HOUSING WITH AFTER SCHOOL PROGRAMMING.

IN PARTNERSHIP WITH OTHER AREA YOUTH-SERVING NOT-FOR-PROFIT
ORGANIZATIONS, THE YMCA CONTINUED THE HEALTHY INTERACTIVE PREVENTION
(HIP) CLUBS AT OUR HIGH POINT BRANCH AND LARGO AND CLEARWATER
FUNDAMENTAL MIDDLE SCHOOLS. THE PROGRAM PROVIDES MORNING AND AFTERNOON
CARE FOR MIDDLE SCHOOL AGE STUDENTS DELIVERED IN A CLUB BASED SETTING,
WITH CLUBS DEVELOPED BY THE YOUTH, WHICH MAY INCLUDE, BUT ARE NOT

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LIMITED TO, PERSONAL AND ACADEMIC ENRICHMENT ACTIVITIES, PHOTOGRAPHY,
COOKING, DRAMA, ARTS AND CRAFTS, MUSIC, ETC. THE PROGRAM ALSO INCLUDES
COMMUNITY SERVICE PROJECTS, SUBSTANCE ABUSE COMPONENTS, ADULT
TRAININGS, ADULT EVENTS, GUEST SPEAKERS, FIELD TRIPS, AND ACADEMIC
ENRICHMENT.

OUR SCHOOL AGE PROGRAMS ALSO PROVIDE SERVICES WHEN SCHOOL IS NOT IN
SESSION; YMCA SUMMER CAMPS SERVE PRE-SCHOOL, SCHOOL-AGE CHILDREN, AND
TEENAGERS RESIDING IN OUR FOUR COUNTY SERVICE AREA. KIDS HAVE FUN WHILE
THEY LEARN HOW TO MAKE NEW FRIENDS, BUILD NEW SKILLS AND GROW IN
SELF-CONFIDENCE. FOR KIDS, Y CAMP IS A FUN WAY TO ENJOY THE SUMMER.
FOR MOMS AND DADS, IT'S A WAY TO GIVE THEIR CHILDREN A POSITIVE
DEVELOPMENTAL EXPERIENCE. FOR PARENTS WHO WORK OUTSIDE THE HOME, Y CAMP
ALSO SERVES AS CHILDCARE. SOME PARTICIPANTS ATTEND FOR THE SOCIAL AND
EDUCATIONAL BENEFITS, EVEN THOUGH A PARENT MAY BE AT HOME. SERVICE
BEGINS THE FIRST DAY OF SUMMER VACATION AND CONTINUES UNTIL SCHOOL
BEGINS AGAIN IN THE FALL. FOR OVER 4,400 CHILDREN, CAMP PROVIDES HIGH
QUALITY, AFFORDABLE, SAFE PLACES WITH QUALIFIED SUPERVISION. FINANCIAL
ASSISTANCE WAS GIVEN TO MANY CAMPERS TOTALING \$202,000.

BASED ON THE NATIONAL YMCA PROGRAM MODEL, YMCA CAMP PROVIDES CHILDREN
WITH AN OUTDOOR, SOCIAL EXPERIENCE BUILT IN AN ATMOSPHERE OF FUN,
LEARNING AND RESPECT FOR THE PURPOSE OF BUILDING SELF-ESTEEM THROUGH
GROWTH OF THE SPIRIT, MIND, AND BODY. THIS IS ACCOMPLISHED THROUGH
ACTIVITIES THAT INCLUDE, FIELD TRIPS, CRAFTS, SONGS, ARCHERY, VALUES,
FITNESS, SPORTS, NATURE ACTIVITIES, SWIMMING, AND CANOEING.

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DEPENDING ON THE AGE LEVEL, STAFF RATIOS RANGE FROM 1:10 TO 1:15. CAMP FOCUSES ON THE INDIVIDUAL CAMPER-TO-COUNSELOR RELATIONSHIP BASED ON THE WORTH OF INDIVIDUALS AS A BIRTHRIGHT. THIS RELATIONSHIP IS THE PRIMARY VEHICLE FOR THE DEVELOPMENT OF POSITIVE SELF-ESTEEM, UPON WHICH, WE BELIEVE, ALL BEHAVIOR IS BASED. OUTDOOR EDUCATION, OUTDOOR SKILL DEVELOPMENT, AND SHARING OF INTERNATIONAL CULTURES THROUGH COUNSELOR EXCHANGE PROGRAMS REMAIN IMPORTANT PARTS OF THE CONTENT OF OUR PROGRAMS. AS "THE EXPERIENCE THAT LASTS A LIFETIME", YMCA CAMPING IS WHERE THE CHILD SPENDS THE MOST TIME DURING THE SUMMER - A RESPONSIBILITY THAT THE YMCA TAKES VERY SERIOUSLY.

YMCA YOUTH SPORTS PROGRAMS PROMOTE AN APPRECIATION OF ONE'S OWN WORTH. YOUTH SPORTS FOCUS ON THE FULL AND EQUAL PARTICIPATION OF ALL: EVERY CHILD PLAYS IN EVERY GAME. YOUNG PEOPLE PARTICIPATING IN SPORTS BUILD LIFELONG POSITIVE ATTITUDES, ESTABLISH HABITS OF HEALTHY EXERCISE AND GOOD NUTRITION, AND LEARN WAYS TO HAVE FUN. BOTH ADULT AND YOUTH SPORTS PROGRAMS VALUE COOPERATION OVER COMPETITION, FAIR PLAY OVER WINNING AT ANY COST, GOOD FEELING AND GOOD HEALTH OVER POINTS SCORED, AND BUILDING SELF-ESTEEM OVER BEATING THE OPPONENT. THE YMCA KNOWS THAT WITH THIS APPROACH EVERYONE WINS-UNDEFEATED IN SPIRIT, MIND AND BODY.

DURING THE YEAR, THE YOUTH SPORTS PROGRAMS SERVE CHILDREN IN T-BALL, GYMNASTICS, SOCCER, BASEBALL, FLAG FOOTBALL, BASKETBALL, TENNIS, VOLLEYBALL, HOCKEY, AND IN-LINE SKATING. ADULT SPORTS PROGRAMS INCLUDE

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BASKETBALL, BASEBALL, VOLLEYBALL, TENNIS, SOFTBALL, RACQUETBALL, AND
FLOOR HOCKEY.

THE YMCA OF THE SUNCOAST USES THE SEARCH INSTITUTE'S 40 DEVELOPMENTAL
ASSETS MODEL TO MEASURE THE SUCCESS OF OUR YOUTH AND TEEN PROGRAMS.
THROUGH EXTENSIVE RESEARCH, THE SEARCH INSTITUTE HAS IDENTIFIED 40
POSITIVE EXPERIENCES AND QUALITIES THAT ALL YOUTH AND TEENS NEED TO
BECOME HEALTHY, CONTRIBUTING ADULTS. THE YMCA HELPS TO PROVIDE THESE
ASSETS IN THE LIVES OF THE YOUTH AND TEENS WE SERVE. FOR EXAMPLE, ONE
OF THE ASSETS IS HONESTY. WHEN WE SURVEYED THE PARENTS OF YOUTH IN
CHILD CARE, 99% REPORTED THAT THEY FEEL THE YMCA STAFF CREATE AN
ENVIRONMENT WHERE IT'S IMPORTANT FOR THEIR CHILD TO TELL THE TRUTH,
EVEN WHEN IT'S NOT EASY. RESPECT IS ANOTHER OF THE ASSETS; 100% OF
PARENTS FEEL THE YMCA STAFF CREATE AN ENVIRONMENT WHERE IT IS IMPORTANT
TO RESPECT OTHERS.

IN 2009, THE YMCA OF THE SUNCOAST SERVED OVER 9,000 TEENS IN A VARIETY
OF PROGRAMS. YMCA YOUTH AND TEEN PROGRAMS GIVE KIDS POSITIVE ROLE
MODELS TO HELP THEM DEVELOP SELF-ESTEEM AND GOOD VALUES, INCLUDING
COOPERATION, RESPECT FOR THE BODY, GOOD CITIZENSHIP, AND A STRONG WORK
ETHIC. TEEN ACTIVITIES ARE AMONG THE MOST RAPIDLY GROWING YMCA
PROGRAMS, REFLECTING THE GROWING AWARENESS THAT ADOLESCENTS NEED
STRUCTURE AND ACTIVITIES, ESPECIALLY IN THE AFTER-SCHOOL HOURS.

THE YMCA YOUTH IN GOVERNMENT PROGRAM SERVED 165 STUDENTS FROM THREE
HIGH SCHOOLS IN PINELLAS COUNTY. THESE STUDENTS PARTICIPATED IN THE

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STATE CONFERENCE IN TALLAHASSEE. AT THE STATE CONFERENCE, MEMBERS OF
THE SUNCOAST YMCA DELEGATION WON MANY AWARDS, INCLUDING THOSE FOR BILL
WRITING, JUDICIAL PROCEEDINGS, DEBATING AND GOVERNOR.

WE CONTINUE TO HAVE POPULAR TEEN CENTERS AT OUR CLEARWATER, HIGH POINT,
GREATER RIDGECREST, NORTH PINELLAS, HERNANDO COUNTY, JAMES P. GILLS
FAMILY AND GREATER PALM HARBOR BRANCHES. WE CONTINUE TO SERVE TEENS
WELL AND LOOK TO FIND MORE WAYS TO ENGAGE TEENS IN YMCA PROGRAMS.

THE GREATER RIDGECREST BRANCH SERVED TEENS THROUGH "BRENDA'S KIDS," A
GROUP OF YOUNG TEENS GATHERED IN HONOR OF A MOTHER WHO LOST HER SON TO
VIOLENCE. NOW, THIS GROUP OF TEENS MEETS AT THE YMCA TO LEARN LIFE
LESSONS FROM BIBLICAL TEACHINGS ABOUT RESPONSIBILITY, LEADERSHIP,
ACCOUNTABILITY, AND COMMUNITY SERVICE. OVER 150 YOUTH WERE SERVED IN
THIS PROGRAM DURING 2009.

DEVELOPED IN PARTNERSHIP WITH LEADERSHIP PINELLAS, THE YOUTH LEADERSHIP
PINELLAS PROGRAM SEEKS TO PROVIDE INFORMATION ON COMMUNITY RESOURCES
AND ISSUES, DEVELOP AN EXCELLENCE IN LEADERSHIP, BUILD TEAMWORK SKILLS,
AND FOSTER INVOLVEMENT IN COMMUNITY SERVICES FOR A DIVERSE GROUP OF
HIGH SCHOOL STUDENTS. DIALOGUE IS CREATED BETWEEN ESTABLISHED AND
POTENTIAL LEADERS OF DIVERSE BACKGROUNDS, INCLUDING BUSINESS AND
PROFESSIONAL PERSONS, PLUS LEADERS OF GOVERNMENT, EDUCATION, ETC.

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SOCIAL BONDS TO OUR WELL-BEING. THESE ARE THE GOALS THAT CONTINUE TO

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DRIVE THE YMCA'S WORK TOWARD THE FULFILLMENT OF ITS MISSION.

THE YMCA OF THE SUNCOAST PROVIDES NUMEROUS HEALTH AND WELLNESS PROGRAMS
FOR ITS MEMBERS AND PROGRAM PARTICIPANTS.

AMONG CHILDREN AND FAMILIES, THE YMCA PROMOTES THE IMPORTANCE OF A
PHYSICALLY ACTIVE LIFESTYLE THROUGH PROGRAMS LIKE CHILD CARE, SUMMER
DAY CAMP, SWIM LESSONS AND YOUTH SPORTS. TO SUPPORT THESE PROGRAMMATIC
EFFORTS, THE YMCA OF THE SUNCOAST CONTINUED ITS EFFORTS AS A PIONEER
FOR OTHER YMCAS IN LEADING THE YMCA OF THE USA ACTIVATE AMERICA
INITIATIVES. USING AN EXPERIMENTAL FEEDBACK COLLECTION EFFORT, THE
YMCA ENGAGED PARENTS OF CHILDREN IN FOUR YMCA AFTER SCHOOL PROGRAMS IN
A YEAR-LONG EFFORT TO PROVIDE MONTHLY FEEDBACK REVOLVING AROUND YMCA
IMPROVEMENT EFFORTS. THE AREAS MEASURED INCLUDED PHYSICAL ACTIVITY FOR
CHILDREN, HEALTHY RELATIONSHIPS BETWEEN STAFF MEMBERS AND CHILDREN,
STRONGER RELATIONSHIPS BETWEEN STAFF AND PARENTS, AND GROWING
CONNECTIONS AMONG FAMILIES. ADDITIONALLY, THE YMCA SOUGHT FOR THE
FIRST TIME TO MEASURE THE IMPACT OF ITS PROGRAMS UPON FAMILIES' TIME
TOGETHER, COMMITMENT TO EATING HEALTHY, COMMITMENT TO BEING PHYSICALLY
ACTIVE, AND RELATIONSHIPS WITH OTHER FAMILIES. ALL OF THIS DATA WILL
BE USED AS GROUNDWORK FOR FUTURE EFFORTS TO BUILD HEALTH AND WELLNESS
THROUGH PROGRAMS THAT SERVE FAMILIES. WE HAVE ALSO SPREAD THIS
COLLABORATIVE WORK TO MANY MORE SCHOOL SITES THAT ARE SHOWING SIMILAR
SUCCESS MEASURES.

FOR ADULTS THE YMCA HAS CONTINUED TO FOCUS ON THE NEEDS OF THE PERSONS

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WHO MOST NEED OUR SUPPORT TO MAKE HEALTHY BEHAVIOR CHANGES. USING NEW
DATA COLLECTION TECHNIQUES LEARNED AS A RESULT OF OUR CONTINUING
PARTICIPATION IN THE YMCA OF THE USA ACTIVATE AMERICA INITIATIVES, THE
YMCA OF THE SUNCOAST PAID PARTICULAR ATTENTION TO THE WAY IN WHICH WE
ENGAGED PERSONS COMING TO OUR YMCA FOR THE FIRST TIME. IT IS OUR GOAL
TO HELP EACH INDIVIDUAL FIND HIS OR HER WAY TO THE PROGRAM OR PLACE IN
OUR YMCA THAT WILL BEST HELP THEM CONNECT TO A LIFE CHANGING ACTIVITY,
GROUP, OR NEW BEHAVIOR. WE ARE INCREASINGLY MEASURING THE CONNECTIONS
AMONG MEMBERS THAT SUSTAIN AND SUPPORT THESE BEHAVIORS. IN SO DOING,
WE HOPE TO IDENTIFY AND BUILD ON SUCCESSFUL STEPS INTRODUCED BY OUR
STAFF TEAMS TO THIS EFFORT.

THE YMCA CONTINUES TO OFFER A HOST OF PROGRAMS FOR ADULTS INCLUDING
SWIMMING GROUPS, WALKING CLUBS, RUNNING CLUBS, YOGA, PILATES, STRESS
MANAGEMENT, PERSONAL TRAINING, GROUP EXERCISE, OLDER ADULT PROGRAMMING,
STRENGTH TRAINING, AND MUCH MORE. WITH ITS COMMITMENT TO NEVER TURNING
A PERSON OR FAMILY AWAY BECAUSE OF AN INABILITY TO PAY FOR SERVICES,
THE YMCA CONTINUES TO BE THE PLACE IN THE COMMUNITY THAT PERSONS OF ALL
INCOMES AND BACKGROUNDS CAN FIND PROFESSIONAL SUPPORT FOR HEALTHY
BEHAVIOR CHANGES. THE YMCA OF THE SUNCOAST PROVIDES FINANCIAL
ASSISTANCE FOR ALL PERSONS IN NEED. CHARITABLE CONTRIBUTIONS TO THE
YMCA ENABLE US TO PROVIDE FINANCIAL ASSISTANCE ON A SLIDING SCALE. WE
PROMISE THAT EVERYONE WHO QUALIFIES WILL RECEIVE ASSISTANCE TO THE
GREATEST EXTENT POSSIBLE BASED ON THE AVAILABILITY OF FUNDS.

YMCA AQUATICS PROGRAMS ARE PART OF THE Y'S OVERALL GOAL OF BUILDING

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HEALTHY SPIRIT, MIND AND BODY. IN ADDITION TO PROVIDING SPECIFIC SWIMMING AND WATER SAFETY SKILLS, THEY PROMOTE GOOD HEALTH THROUGH REGULAR EXERCISE. THEY ALSO PROMOTE TEAMWORK, SELF-CONFIDENCE, AND LEADERSHIP. THESE PROGRAMS ARE OFFERED AT FEES AFFORDABLE TO THE COMMUNITY AT LARGE, WITH FINANCIAL ASSISTANCE FOR THOSE WHO CAN'T AFFORD THE FULL FEES.

THE YMCA TAUGHT OVER 2,700 PEOPLE TO SWIM IN POOLS LOCATED IN CITRUS, HERNANDO, PASCO AND PINELLAS COUNTIES IN 2009. DROWNING IS THE SECOND-LEADING CAUSE OF DEATH IN CHILDREN IN THIS COMMUNITY. WE FEEL LEARNING TO SWIM IS A NECESSITY, NOT A LUXURY. LEARN-TO-SWIM LESSONS ARE CONDUCTED DAILY THROUGHOUT THE YEAR FOR INFANTS FROM 6 MONTHS OLD TO ADULTS.

IN YMCA AQUATICS PROGRAMS, CHILDREN LEARN TO BE SAFE AROUND WATER AND THEY FEEL THE SENSE OF ACCOMPLISHMENT THAT COMES WITH LEARNING SOMETHING NEW. YOUTH PROGRESSIVE SWIMMING IS THE YMCA'S THIRD MOST WIDELY OFFERED PROGRAM NATIONWIDE. IT USES A PROBLEM-SOLVING, GUIDED-DISCOVERY TEACHING APPROACH IN A POSITIVE, CARING ENVIRONMENT. KIDS CAN DEVELOP LIFELONG SKILLS THAT CAN HELP THEM STAY SAFE AND HEALTHY.

CLASSES AND PROGRAMS ARE PROVIDED TO HELP ELDERLY PEOPLE MAINTAIN THEIR SELF-SUFFICIENCY AND INDEPENDENCE BY MAINTAINING A HEALTHY LIFESTYLE. THE ARTHRITIS AND WATER EXERCISE CLASSES ARE DESIGNED ESPECIALLY FOR SENIORS TO MAINTAIN MUSCLE TONE AND FLEXIBILITY USING THE WATER TO

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CUSHION THE JOINTS. IN ADDITION TO ENHANCING MOTOR FUNCTION, THESE PROGRAMS SERVE A PREVENTATIVE HEALTH FUNCTION IN THAT THEY MAY PREVENT OR POSTPONE THE NEED FOR SURGERIES.

IN ADDITION, AQUATIC EXERCISE CLASSES FOR PEOPLE WITH DISABILITIES ARE AVAILABLE. STAFF IS TRAINED TO ACCOMMODATE INDIVIDUAL NEEDS. SPECIAL POPULATION CLIENTS ARE INTERVIEWED INDIVIDUALLY AND MATCHED WITH A COMPATIBLE STAFF PERSON. AS CLIENTS PROGRESS WITH THEIR PHYSICAL STRENGTHENING, THEIR PROGRAMS ARE CHANGED TO SUIT THEIR NEEDS. THIS MAY INCLUDE ACTUAL SWIMMING INSTRUCTION, SURVIVAL TECHNIQUES IN WATER, WALKING, NAUTILUS, ETC. THIS PROGRAM IS ONGOING AND YEAR-ROUND. NOT ONLY DOES IT GIVE THEM POSITIVE EXPERIENCES, IT STRENGTHENS THEM PHYSICALLY AND ALLOWS THEM TO SOCIALIZE WITH OTHERS IN A CARING ATMOSPHERE.

YMCA POOLS ARE ALSO USED FOR SCUBA PROGRAMS, PRIVATE SWIM LESSONS, SWIM TEAMS, AND LIFEGUARD TRAINING CLASSES. THE YMCA CONTINUES TO PROVIDE POOLS FOR AREA HIGH SCHOOL SWIM TEAMS.

THE YMCA OF THE SUNCOAST HAS ESTABLISHED FAMILY AQUATIC CENTERS AT OUR HIGH POINT, JAMES P. GILLS FAMILY, GREATER RIDGECREST, AND GREATER PALM HARBOR FACILITIES. THESE CENTERS FEATURE SLIDES, A ZERO-DEPTH ENTRY, AND INTERACTIVE DESIGN WITH FOUNTAINS, SPRAYS AND ACTIVITIES. POOLS ARE ALSO LOCATED AT OUR CLEARWATER, NORTH PINELLAS AND HERNANDO COUNTY YMCA BRANCHES.

Supplemental Information to Form 990

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OMB No. 1545-0047

2009

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SUBSIDIES VALUED AT NEARLY \$9,300 WERE PROVIDED TO OVER 330 CHILDREN
AND ADULTS IN SWIMMING CLASSES DURING THE YEAR.

THE YMCA WORKS HARD TO CONTINUOUSLY MEET COMMUNITY NEEDS AND MAKE OUR
PROGRAMS AND SERVICES AVAILABLE TO EVERYONE. THROUGH OUR MISSION OF
DEVELOPING HEALTHY SPIRIT, MIND AND BODY FOR ALL, WE SERVE PEOPLE OF
ALL FAITHS, RACES, NATIONAL ORIGINS, ABILITIES, AGES AND INCOMES. IN
2009, OUR YMCA PROVIDED OVER \$1.8 MILLION IN FULL AND PARTIAL
SCHOLARSHIPS TO PEOPLE WHO WOULD OTHERWISE NOT HAVE BEEN ABLE TO
PARTICIPATE IN YMCA PROGRAMS AND SERVICES.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS
HONESTY, RESPECT AND RESPONSIBILITY. THIS PROGRAM IS ABOUT HAVING FUN,
TEACHING VALUES, STRENGTHENING PARENT-CHILD RELATIONSHIPS, AND FEELING
SUPPORT FROM OTHER FAMILIES. PARENT AND CHILD TAKE A JOURNEY OF
DISCOVERY AND LEARNING. THROUGHOUT THIS JOURNEY THE ADVENTURE GUIDES
COMPASS POINTS (FAMILY, NATURE, COMMUNITY, FUN AND THE YMCA CHARACTER
DEVELOPMENT VALUES) PROVIDE A SENSE OF DIRECTION AND INSPIRATION.

CONDUCTING GROUP EXERCISES IN THE CIRCLE FOSTERS LEADERSHIP, PROBLEM
SOLVING, GROUP WORK SKILLS AND A SENSE OF COMMITMENT TO A LARGER
COMMUNITY; ALL WHICH REINFORCE THE YMCA'S PLEDGE TO BUILD STRONG KIDS,
STRONG FAMILIES AND STRONG COMMUNITIES.

RESPONDING TO THE NATION'S HEALTH CRISIS, THE YMCA CREATED A PROGRAM
CALLED HEALTHY FAMILY HOME (WWW.HEALTHYFAMILYHOME.ORG) TO HELP THE
ENTIRE FAMILY WORK TOGETHER AT HOME TO MAKE HEALTHIER CHOICES AND LIVE

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HEALTHIER LIVES. THIS NATIONWIDE PROGRAM WAS HIGHLIGHTED DURING YMCA
HEALTHY KIDS' DAY ON SATURDAY, APRIL 18, 2009 IN CITRUS, HERNANDO,
PASCO, AND PINELLAS COUNTIES. YMCA HEALTHY KIDS DAY INVITES CHILDREN
AND FAMILIES TO ENGAGE IN A DAY OF FUN AND GAMES TO PROMOTE HEALTHY
INTERACTION AND FUN. WE PRESENTED THE YMCA HEALTHY FAMILY HOME KITS TO
THOUSANDS OF COMMUNITY MEMBERS, ENCOURAGING SMALL STEPS TOWARD
HEALTHIER LIFESTYLES.

HEALTHY FAMILY HOME PROVIDES FAMILIES WITH PRACTICAL, FLEXIBLE TOOLS
AND SUPPORT FOR MAKING LASTING CHANGES FOR A HEALTHIER, HAPPIER LIFE.
ACTIONS AIMED AT THE WHOLE FAMILY THAT LEAD TO SMALL, SUSTAINED
CHANGES-LIKE EATING BETTER, GETTING EXERCISE AND CONNECTING AS A
FAMILY-ARE PROVEN TO HAVE A LONG-TERM IMPACT.

IN APRIL OF 2009, THE "YMCA PARENT GUIDE", A FREE GUIDE WITH TIPS FOR
HEALTHY LIVING, WAS MADE AVAILABLE FOR COMMUNITY MEMBERS. THE HEALTHY
FAMILY HOME PROGRAM IS DESIGNED TO WORK IN ANY HOME AND IN ANY
COMMUNITY, AND LETS FAMILIES PICK THE ACTIONS AND HEALTH GOALS THAT
MAKE THE MOST SENSE FOR THEM. A SAMPLE FROM THE HEALTHY FAMILY HOME
STARTER KIT:

1) MAKE FAMILY TIME. SIT DOWN AS A FAMILY FOR ONE MEAL A DAY. RESEARCH
HAS SHOWN THAT FAMILY MEALS ARE MORE NUTRITIOUS THAN "SOLO" MEALS AND
KIDS WHO EAT WITH THEIR FAMILY END UP MAKING HEALTHIER SNACK CHOICES.

2) SNEAK IN MORE PHYSICAL ACTIVITY. PLAN A WEEKLY FAMILY BREAKFAST
WHERE YOU ARE THE TRANSPORTATION. SKIP THE CAR, BUS OR TRAIN AND RIDE

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BIKES, WALK OR JOG/RUN.

3) GET MORE FRUITS AND VEGETABLES IN YOUR DIET. HAVE ALL FAMILY
MEMBERS IDENTIFY THEIR FAVORITE FRUIT AND WRITE EACH ONE DOWN ON A
LIST. THEN FILL A FAMILY FRUIT BOWL WITH THOSE FRUITS AND KEEP IT ON
THE COUNTER. THIS WAY EVERYONE IN THE FAMILY WILL HAVE EASY ACCESS TO
THEIR FAVORITE FRUIT WHEN THEY'RE LOOKING FOR A SNACK.

4) MAKE GETTING EXERCISE FUN. TURN UP THE MUSIC AND DO CHORES TOGETHER
(CLEAN THE HOUSE, WASH WINDOWS, DO LAUNDRY, ETC.).

WITH THESE SMALL DAILY CHANGES, WE CAN HELP FAMILIES CREATE HEALTHIER
HOME ENVIRONMENTS, HEALTHIER HABITS, AND HEALTHIER BONDS IN SPIRIT,
MIND, AND BODY.

FORM 990, PART VI, SECTION A, LINE 2: SCOTT FINK AND PETER VOSOTAS HAVE A
BUSINESS RELATIONSHIP.

CHESTER ELIAS JR. AND SCOTT FINK HAVE A BUSINESS RELATIONSHIP.

CHESTER ELIAS JR. AND PETER VOSOTAS HAVE A BUSINESS RELATIONSHIP.

FORM 990, PART VI, SECTION B, LINE 11: THE YMCA OF THE SUNCOAST HAS
APPOINTED A DESIGNEE TO CONDUCT A THOROUGH REVIEW OF THE COMPLETE 990 TO
PROVIDE AN INDEPENDENT, PROFESSIONAL REVIEW. THE YMCA OF THE SUNCOAST
BOARD OF DIRECTORS ALSO RECEIVES AN EMAILED COPY OF THE PUBLIC DISCLOSURE
VERSION OF THE 990 PRIOR TO ITS BOARD MEETING NEAREST THE DATE OF THE
FILING DEADLINE, TYPICALLY IN LATE APRIL. THE BOARD MAY REVIEW THE

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INFORMATION PRIOR TO ITS PRESENTATION IN THE MEETING, MAKE INQUIRIES
REGARDING THE 990 AND MAKE RECOMMENDATIONS FOR CHANGES PRIOR TO THE FILING
DEADLINE. THE COMPLETE 990 IS AVAILABLE FOR REVIEW AT THE BOARD MEETING.
IN ADDITION, THE CEO AND VICE PRESIDENT OF FINANCE ALSO REVIEW THE COMPLETE
FORM AND OVERSEE THE PREPARATION INPUTS AND PROCESS.

FORM 990, PART VI, SECTION B, LINE 12C: IN MAY OF EACH YEAR, THE YMCA OF
THE SUNCOAST DISTRIBUTES TO ALL FULL-TIME STAFF, VOLUNTEERS SERVING IN A
DECISION-MAKING CAPACITY AND THE ASSOCIATION BOARD MEMBERS AND ITS
COMMITTEE MEMBERS A CONFLICT OF INTEREST STATEMENT OF DISCLOSURE TO BE
COMPLETED AND RETAINED AT THE ASSOCIATION OFFICES. THE FORMS ARE COLLECTED
BY THE HUMAN RESOURCE DEPARTMENT AND LOGGED INTO ITS DATABASE AS HAVING
BEEN RECEIVED. AT LEAST ONCE A YEAR, THEY ARE REVIEWED BY THE AUDIT
COMMITTEE.

FORM 990, PART VI, SECTION B, LINE 15: THE EXECUTIVE COMPENSATION
COMMITTEE WAS COMMISSIONED BY YMCA OF THE SUNCOAST TO ADVISE, EVALUATE AND
CONFIRM THAT THE COMPENSATION FOR SENIOR STAFF, AS DEFINED BY INTERMEDIATE
SANCTIONS, IS NOT EXCESSIVE.

THE COMMITTEE, CONSISTING OF MEMBERS OF THE BOARD OF DIRECTORS AND THE
BOARD CHAIR, MEETS ANNUALLY. THE COMMITTEE REVIEWED THE COMPENSATION OF
THE PRESIDENT AND CEO, THE EXECUTIVE VICE PRESIDENT/CHIEF OPERATING
OFFICER, VICE PRESIDENT OF FINANCE/CHIEF FINANCE OFFICER, VICE PRESIDENT OF
HUMAN RESOURCES, VICE PRESIDENT OF FINANCIAL DEVELOPMENT AND VICE PRESIDENT
OF BUILDINGS AND GROUNDS. THEY USED COMPARABLE DATA INCLUDING THE 2008

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

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YMCA METRO SOUTH GROUP COMPENSATION STUDY, THE 2008 YMCA'S SURVEY OF EXECUTIVE COMPENSATION COMPLIED BY SULLIVAN COTTER AND THE 2007 TAMPA BAY ONLINE SALARY SURVEY DATA. MEMBERS ALSO REVIEWED THE 2009 SALARY ADMINISTRATION GUIDELINE RECOMMENDATIONS PROVIDED BY THE YMCA HUMAN RESOURCES AND TALENT MANAGEMENT TASK FORCE.

THE COMMITTEE ACKNOWLEDGED AND SUPPORTED THAT THERE WAS NO INCREASE BUDGETED FOR MERIT.

THE COMMITTEE DETERMINED THAT THE COMPENSATION WAS COMPARABLE TO OTHER YMCA AND NON-PROFIT EXECUTIVES AND NOT EXCESSIVE.

MINUTES OF THE MEETING WERE TAKEN AND RETAINED IN A SECURED FILE IN HUMAN RESOURCES. THE EXECUTIVE COMPENSATION COMMITTEE SUBMITTED A MOTION TO THE BOARD OF DIRECTORS THAT WAS APPROVED.

FORM 990, PART VI, SECTION C, LINE 19: GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, FINANCIAL STATEMENTS, AND ANNUAL RETURNS ARE AVAILABLE TO THE PUBLIC UPON VERBAL OR WRITTEN REQUEST. THE IRS FORM 990 MAY ALSO BE FOUND ON GUIDESTAR.COM.

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: CHESTER ELIAS JR.

(D) DESCRIPTION OF TRANSACTION: SCHEDULE O - OWNS A COMPANY THAT PROVIDES LONG TERM DISABILITY INSURANCE TO THE YMCA. MR. ELIAS IS PAID A COMMISSION FOR THE SERVICES PROVIDED.

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(A) NAME OF PERSON: WELLS FARGO

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

CHARLES ROBINSON, DIRECTOR OF YMCA IS ALSO A VP AT WELLS FARGO

(D) DESCRIPTION OF TRANSACTION: SCHEDULE O - WELLS FARGO EARNS

COMMISSION INCOME FROM THE BROKERAGE RELATIONSHIP WITH THE ORGANIZATION.

PART III THREE LARGEST PROGRAM SERVICE ACCOMPLISHMENTS CONTINUED

HOLISTIC DEVELOPMENT OF CHILDREN AND YOUTH- CONTINUED

EACH CLASS HAS THE OPPORTUNITY TO MEET COMMUNITY DECISION MAKERS AND TO

ENGAGE THEM IN FRANK, OFF-THE-RECORD DISCUSSIONS ON CURRENT ISSUES.

LEADERS CLUBS ARE AT SEVERAL OF OUR YMCA BRANCHES. THE PROGRAM

INSTILLS POSITIVE DISCIPLINE BY DEVELOPING LEADERSHIP QUALITIES, BUILDS

SELF-ESTEEM AND A SENSE OF ACCOMPLISHMENT THROUGH A SERIES OF

WELL-ROUNDED TRAININGS IN THE AREA OF PHYSICAL EDUCATION, HEALTHY

LIVING, PERSONAL GROWTH, AND VALUES. STUDENTS LEARN VALUABLE WORK AND

COMMUNITY SERVICE EXPERIENCE THROUGH VOLUNTEER ACTIVITY. YOUTH AGES 12

- 17 MEET REGULARLY FOR WORKSHOPS, PROGRAM UPDATES AND RECREATIONAL

ACTIVITIES.

PART III THREE LARGEST PROGRAM SERVICE ACCOMPLISHMENTS CONTINUED

HEALTH AND WELL BEING FOR ALL - CONTINUED

THE NORTH PINELLAS BRANCH, JAMES P. GILLS BRANCH, AND GREATER PALM

HARBOR BRANCH YMCAS SERVED 50 PEOPLE IN THEIR MASH (MAINSTREAM ADULTS

SHARING HOPE) PROGRAMS IN 2009. THERE ARE A GROWING NUMBER OF ADULTS

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

932211
02-03-10

Schedule O (Form 990) 2009

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WHO ARE PHYSICALLY AND/OR MENTALLY CHALLENGED AND LIVING AT HOME WITH THEIR PARENTS OR RELATIVES IN OUR PASCO AND UPPER PINELLAS AREA. MANY OF THESE ADULTS ARE ISOLATED DUE TO THE FACT THAT THEY ARE NEW TO THE AREA, THEY ARE UNABLE TO INDEPENDENTLY GET THEMSELVES OUT OF THEIR OWN ENVIRONMENT, OR THEY DO NOT HAVE A CIRCLE OF FRIENDS. THESE INDIVIDUALS DO NOT CONSIDER THEMSELVES HANDICAPPED; RATHER THEY ARE CHALLENGED FOR INDEPENDENT LIVING. THE YMCA AND MASH PARENTS HAVE ACCEPTED THE CHALLENGE TO HELP CREATE INDEPENDENCE IN THEIR LIVES. THE GOAL WITHIN THE PROGRAM IS TO ENCOURAGE AND SUPPORT SINGLE "CHALLENGED ADULTS" TO MEET AND SOCIALIZE WITH THEIR PEERS AND TO EXPERIENCE THE ENJOYMENT OF FRIENDSHIP, FUN, AND PHYSICAL ACTIVITY. PHYSICALLY AND/OR MENTALLY CHALLENGED ADULTS WITHIN THE NORTH PINELLAS AREA ARE ABLE TO PARTICIPATE IN A PROGRAM THAT ALLOWS THEM TO GROW IN SPIRIT, MIND AND BODY THROUGH INTERACTION WITH FRIENDS, EXPRESSING THEIR CREATIVITY, AND PARTICIPATING IN RECREATIONAL PROGRAMS.

IN 2009, THE YMCA OF THE SUNCOAST HELD ITS FOURTH MAYOR'S PRAYER BREAKFAST, HOSTED BY THE CITY OF CLEARWATER'S MAYOR. THIS EVENT, ATTENDED BY MORE THAN 350 PEOPLE, WAS A TIME FOR THE COMMUNITY TO COME TOGETHER IN FELLOWSHIP AND PRAYER. AS WELL, OUR PASCO COUNTY YMCAS HELD THEIR 3RD ANNUAL PRAYER BREAKFAST IN THEIR COMMUNITY AND OUR HERNANDO BRANCH HELD THEIR ANNUAL INTERFAITH SERVICE, JOINING FORCES WITH COMMUNITY CHURCHES AND RELIGIOUS INSTITUTIONS FOR A MORNING OF PRAISE.

THE YMCA OF THE SUNCOAST CONTINUED TO PARTICIPATE IN A NATIONAL CHILD LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 832211 02-03-10

Schedule O (Form 990) 2009

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CARE COLLABORATIVE WITH FOUR OTHER YMCA'S FROM DIFFERENT PARTS OF THE COUNTRY, FUNDED BY THE ENTERTAINMENT INDUSTRY FOUNDATION (EIF). TODAY, THE YMCA IS FACING A NEW SET OF CHALLENGES: A NATIONAL LIFESTYLE HEALTH CRISIS WHICH CALLS US TO MAKE CERTAIN WE ARE CREATING HEALTHY ENVIRONMENTS IN WHICH KIDS WILL DEVELOP HEALTHY HABITS; ISOLATION OF FAMILIES AND THE HIGH STRESS OF FAMILY LIFE WHICH CALLS US TO FIND NEW WAYS TO SUPPORT PARENTS AND FAMILIES THAT REDUCES, NOT INCREASES, STRESS; AND CHANGES IN SCHOOL FUNDING AND PROGRAMMING WHICH CALL US TO RECONSIDER OUR SATISFACTION WITH WORKING ONLY WITH CHILD CARE KIDS AND TO CONSIDER THE BROADER SCHOOL COMMUNITY AS OUR TARGET POPULATION FOR YMCA PROGRAMS, ACTIVITIES, CLUBS AND EVENTS.

FOR THE FIRST TIME IN OUR HISTORY AMERICA'S CHILDREN MAY NOT LIVE AS WELL OR AS LONG AS THEIR PARENTS. THE ALARMING INCREASES IN DIABETES AND HEART DISEASE WHICH ARE EXACERBATED BY INACTIVITY, POOR EATING HABITS, STRESS AND OTHER ENVIRONMENTAL CONDITIONS PRESENTS A CHALLENGE THAT THE YMCA IS UNIQUELY POSITIONED TO CONFRONT.

- BUILDING RELATIONSHIPS WITH AND AMONG FAMILIES AND CREATING SUPPORTIVE SMALL COMMUNITIES;
- CREATING A RICH MIX OF INNOVATIVE PROGRAMS, ACTIVITIES, CLUBS AND EVENTS FOR KIDS, PARENTS AND FAMILIES WHICH RESPOND TO THEIR NEEDS AND INTEREST WHICH FOSTER SMALL COMMUNITIES;
- PROVIDING ENVIRONMENTS THAT ARE DESIGNED TO SUPPORT PARTICIPANTS IN THEIR PURSUIT OF HEALTH AND WELL-BEING ENVIRONMENTS RICH IN HEALTHY CHOICES FOR BALANCED EATING, PLAYFUL PHYSICAL ACTIVITY AND SOCIALIZING

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|--------------------------|---|---|
| Name of the organization | YOUNG MEN'S CHRISTIAN ASSOCIATION OF THE SUNCOAST, INC. FKA YMCA OF THE SUNCOAST | Employer identification number 59-0810731 |
|--------------------------|---|---|

- FOCUSING ON SUPPORTING BOTH OUR CHILD CARE FAMILIES AND ALL OTHER INTERESTED FAMILIES FROM THE BROADER SCHOOL COMMUNITY, IN THE PURSUIT OF THEIR GOALS FOR HEALTH AND WELL-BEING.

- HAVING STAFF WHO INTENTIONALLY MODEL THEIR PERSONAL JOURNEY TOWARDS THEIR GOALS FOR HEALTH AND WELL-BEING, AND WHO ARE SUPPORTED IN DOING SO BY YMCA EMPLOYEE POLICIES AND PRACTICES.

THE YMCA OF THE SUNCOAST WILL CONTINUE SERVING THE CHILDREN AND FAMILIES IN OUR SERVICE AREA, USING OUR LEARNINGS TO IMPROVE OUR SERVICE AND HELP PEOPLE GROW IN SPIRIT, MIND AND BODY.



Department of State

I certify the attached is a true and correct copy of the Amended and Restated Articles of Incorporation, filed on June 12, 2009, for YMCA OF THE SUNCOAST, INC. which changed its name to YOUNG MEN'S CHRISTIAN ASSOCIATION OF THE SUNCOAST, INC., a Florida corporation, as shown by the records of this office.

The document number of this corporation is 702395.

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capitol, this the Eighteenth day of June, 2009



CR2EO22 (01-07)

A handwritten signature in black ink, appearing to read "Kurt S. Browning".

Kurt S. Browning
Secretary of State

AMENDED AND RESTATED
ARTICLES OF INCORPORATION
OF
YMCA OF THE SUNCOAST, INC.

09 July 12 AM/DB/32

Pursuant to Section 617.1006 and 617.1007, Florida Statutes, the undersigned as the Secretary of YMCA of the Suncoast, Inc., hereby certifies that the Articles of Incorporation shall be amended by these Amended and Restated Articles of Incorporation provided for herein, which were adopted by the Board of Directors on the 30 day of April, 2009, and the number of votes cast for these amendments was sufficient for approval. The Amended and Restated Articles of Incorporation does not contain any amendments requiring member approval.

ARTICLE I
Name

The name of the Corporation shall be YOUNG MEN'S CHRISTIAN ASSOCIATION OF THE SUNCOAST, INC.

ARTICLE II
Duration

The Corporation shall have perpetual existence.

ARTICLE III
Purposes

The purposes for which the Corporation is organized are activities exclusively for charitable purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code of 1986, as amended (the "Code") as follows:

3.1 To develop, establish and administer a Young Men's Christian Association for Pinellas, Pasco, Hernando and Citrus Counties, Florida.

3.2 Solely for the above purposes, the Corporation is empowered to exercise all rights and powers conferred by the laws of the State of Florida upon corporations not for profit, including but without limitation thereon, the power to contract for the management of housing; to sell, lease, mortgage and otherwise deal in real and personal property; to borrow money and to issue evidence of indebtedness therefore; to receive gifts, bequests and contributions in any form, to use, apply, invest and reinvest the principal and/or income therefrom or distribute the same for the above purposes.

ARTICLE IV
Members

The Corporation may have members, but members shall be non-voting only. The Bylaws of the Corporation shall govern all aspects of membership, including but not limited to

admission and termination of members, qualification of members, and the rights and duties of members

ARTICLE V Influencing Legislation

No substantial part of the activities of the Corporation shall be devoted to attempting to influence legislation by propaganda or otherwise, and the Corporation shall not participate in, or intervene in (including the publication or distribution of statements with respect to) any political campaign on behalf of or in opposition to any candidate for public office.

ARTICLE VI Registered Agent and Office

The address of the registered office of the Corporation is:

2469 Enterprise Road
Clearwater, FL 33763

The name of the registered agent of the Corporation at such address is:

G. Scott Goyer
2469 Enterprise Road
Clearwater, FL 33763

ARTICLE VII Directors

The management of the Corporation shall be vested in a Board of Directors. The number of directors constituting the Board of Directors shall be as prescribed by the Bylaws of the Corporation, but shall not be less than fifteen (15). The qualifications, term of office, and manner of election and termination of directors shall be as prescribed by the Bylaws of the Corporation.

ARTICLE VIII Limitations

The Corporation shall have no capital stock and no part of the net earnings of the Corporation shall inure in whole or in part to the benefit of, or be distributable to, any officer, director, or other individual having a personal or private interest in the activities of the Corporation, or to any person or organization other than an organization which is exempt from federal income taxation under Sections 501(a) and 501(c) of the Code, except that the Corporation shall be authorized and empowered to pay reasonable compensation for services rendered, to make reimbursement for reasonable expenses incurred on its behalf, and to make payments and distributions in furtherance of the purposes stated in Article III.

ARTICLE IX **Distributions Upon Dissolution**

In the event of dissolution, after paying or making provisions for the payment of all liabilities of the Corporation, and returning, transferring or conveying all assets held by the Corporation upon condition requiring return, transfer or conveyance, the remaining assets of the Corporation shall be distributed at the discretion of the directors to any nonprofit organization of this state, provided that the purposes of such organization are not inconsistent with those stated in Article III of these Articles of Incorporation. And further provided that said organization qualifies as a charitable, religious or educational organization under Section 501(c)(3) of the Internal Revenue Code of 1986, as amended, and has been recognized as exempt from federal income taxes by the Internal Revenue Service.

ARTICLE X **Indemnification**

Each director or former director of the Corporation may be indemnified and may be advanced reasonable expenses by the Corporation against any liabilities imposed upon him or her and reasonable expenses incurred him or her in connection with any claim against him or her, or, any action, suit or proceeding to which he or she may be a party by reason of his or her being, or having been such director and against such sum as independent counsel selected by the directors shall deem reasonable payment made in settlement of any such claim, action, suit or proceeding primarily with the view of avoiding expenses of litigation; provided, however, that no director or officer shall be indemnified: a) with respect to matters as to which he or she shall be adjudged in such action, suit or proceeding to be intentional misconduct or a knowing violation of law by such director; or b) with respect to matters as to which he or she shall be adjudged in such action, suit or proceeding to be transactions that such director personally received a benefit in money, property or services to which the director was not legally entitled. Such rights of indemnification shall be in addition to any other rights to which directors may be entitled under any bylaw, agreement, corporate resolutions, vote of directors or otherwise. The Corporation shall have the power to purchase or maintain, at its cost and expense, insurance on behalf of such persons to the fullest extent permitted by this Article and applicable state law

ARTICLE XI

National Council

By acceptance of membership in the National Council of the Young Men's Christian Associations, our association acknowledges that the name "Young Men's Christian Association," the letters "Y" and the red triangle, and all other names, marks, and symbols owned, used, or authorized by the National Council, are the property of the National Council and can be used only as authorized by the National Board. It is further recognized and acknowledged that such names, marks, and symbols may only be used by our association with respect to our own constituency and geographical area and only so long as we are in good standing with the National Council.

ARTICLE XII

Amendments

The Corporation reserves the right to amend, alter, change or repeal any provision contained in these Articles of Incorporation, in the manner now or hereafter described by law, and all rights and powers conferred herein are subject to revision.

The undersigned has executed these Amended and Restated Articles of Incorporation on the 30 day of April, 2009.



David Brandon
Secretary



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 18, 2009

LOIS JENKINS
YMCA OF THE SUNCOAST, INC.
2469 ENTERPRISE ROAD
CLEARWATER, FL 33763

Re: Document Number 702395

The Amended and Restated Articles of Incorporation for YMCA OF THE SUNCOAST, INC. which changed its name to YOUNG MEN'S CHRISTIAN ASSOCIATION OF THE SUNCOAST, INC., a Florida corporation, were filed on June 12, 2009.

The certification you requested is enclosed.

Should you have any questions concerning this matter, please telephone (850) 245-6050, the Amendment Filing Section.

Darlene Connell
Regulatory Specialist II
Division of Corporations

Letter Number: 909A00020767