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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)

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

OMB No 1545-0047

2009

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning 01-01-2009 and ending 12-31-2009

B Check if applicable
☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization
YOUNG MEN'S CHRISTIAN ASSOCIATION OF MIDDLE TENNESSEE

Doing Business As

Number and street (or P O box if mail is not delivered to street address) | Room/suite
1000 CHURCH STREET

City or town, state or country, and ZIP + 4
NASHVILLE, TN 37203

D Employer identification number
62-0476243

E Telephone number
(615) 259-9622

G Gross receipts $ 83,067,170

F Name and address of principal officer
john m johnson
1000 CHURCH STREET
NASHVILLE,TN 37203

H(a) Is this a group return for affiliates? ☐ Yes ☑ No

H(b) Are all affiliates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☑ 501(c) (3) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ www ymcamidtn org

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ | **L** Year of formation 1875 | **M** State of legal domicile TN

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
See Statement on Schedule O

2 Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	3	75
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	72
5	Total number of employees (Part V, line 2a)	5	5,552
6	Total number of volunteers (estimate if necessary)	6	6,000
7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	200,844
b	Net unrelated business taxable income from Form 990-T, line 34	7b	19,651

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	8,593,201	11,348,596
	9	Program service revenue (Part VIII, line 2g)	69,009,283	69,493,210
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	587,499	-35,122
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,090,789	1,627,540
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	79,280,772	82,434,224
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	266,714	276,325
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	43,181,721	43,317,052
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	177,613	115,800
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶1,718,747		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	34,189,106	34,308,436
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	77,815,154	78,017,613
	19	Revenue less expenses Subtract line 18 from line 12	1,465,618	4,416,611

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	165,308,722	164,174,310
	21	Total liabilities (Part X, line 26)	83,271,093	74,750,226
	22	Net assets or fund balances Subtract line 21 from line 20	82,037,629	89,424,084

Part II Signature Block

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

Sign Here

****** | 2010-09-28
Signature of officer | Date

Tim Weill cfo
Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶ Kevin Dostaler | Date 2010-09-27 | Check if self-employed ▶ ☐ | Preparer's identifying number (see instructions)

Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ KRAFTCPAS PLLC
555 GREAT CIRCLE ROAD
NASHVILLE, TN 37228

EIN ▶

Phone no ▶ (615) 242-7351

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

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission

See Statement on Schedule O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . ☐ Yes ☑ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . ☐ Yes ☑ No

If "Yes," describe these changes on Schedule O

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

4a (Code) (Expenses $ 45,879,626 including grants of $) (Revenue $ 52,614,634)

INSPIRING HEALTHIER LIFESTYLES - Our YMCA helps people live healthier lives Since our founding in 1875, health and wellness programs have remained integral to our mission of building spirit, mind and body As the nation faces a growing obesity and chronic disease epidemic, our YMCA continues to be a resource for healthy living that's made available to all through our Open Doors program, featuring an income-based rate scale In 2009, our YMCA - Helped 254,996 facility members and 23,221 program members representing 84,724 households to become healthier in spirit, mind and body - Provided total charitable subsidy and financial assistance of $13,525,968 - Continued our collaborative efforts to combat the obesity epidemic by joining the Tennessee Obesity Task Force and providing leadership through our Pioneering Healthier Communities team to four new PHC cities across the state - Engaged members in healthier living through 54,138 group fitness classes - Guided 20,879 people toward improved overall health through personal training - Taught 11,468 swim lessons to children and adults at 49 pools - Instilled confidence, character, athletic skills and active living in the lives of 18,399 children through youth sports - Enlisted 517 enthusiastic volunteer youth-sports coaches to strengthen children and teens by providing interaction with positive adult role models - Strengthened 14,083 active older adults through memberships and programs - Provided healthy living resources and tools to more than 5,000 kids and adults at our 18th Annual Healthy Kids Day events, aimed at helping families in our communities find ways to lead healthier lifestyles - Incorporated a nutrition and wellness component in the program curriculum at all YMCA before- and after-school care sites to combat rising childhood obesity rates Stepping Up is designed to provide education and resources for parents while helping children develop healthy eating habits and physical activity regimens in the critical hours before- and after-school - Provided leadership to Nashville on the Move, a collaborative effort to encourage workplace wellness by integrating regular lunchtime walks for downtown employees

4b (Code) (Expenses $ 15,693,248 including grants of $) (Revenue $ 15,429,674)

CAMPING & CHILDCARE- Our YMCA is a safe place that nurtures the potential of youth and teens Our youth programs are designed to help kids dream, learn, grow and work toward reaching their full potential We provide the community with quality, affordable camping and childcare opportunities that foster positive youth development All of our camping and childcare programs utilize the Search Institutes Developmental Assets framework to develop and implement staff training, curriculums and activities designed to help young people develop into kind, caring and responsible adults Like other programs offered at our YMCA, financial assistance is available for all of our youth programs such that children from all socio-economic backgrounds have access to quality camping experiences and childcare Our YMCA knows the more developmental assets young people have, the less likely they are to engage in risky behaviors Staff and volunteers working with youth in our YMCA are trained to recognize the importance of cultivating positive assets in youth, and the following programs are designed to give young people the skills and tools they need to thrive Camp Widjiwagan at the Joe C Davis YMCA Outdoor CenterOur Camp Widjiwagan at the Joe C Davis YMCA Outdoor Center provides rising first through eighth graders with a summer experience designed to strengthen and reinforce the positive assets all young people need to succeed Camp Widjiwagan strives to achieve three primary goals for all campers 1 Forge Friendships2 Strengthen Confidence3 Sharpen CharacterThrough an adventure-filled summer experience, campers have the opportunity to learn the art of cooperation and make good choices while developing competence in both camping and life skills The daily activities and interactions with positive adult role models at Camp Widjiwagan provide the ideal setting for character development Fun CompanyThrough our YMCA Fun Company program, we provide the community with quality, affordable before- and after-school enrichment opportunities that equip school aged children to develop their own interests through hands-on activity and project based learning experiences designed to promote group dynamics and foster innate curiosity Children enrolled in Fun Company have access to quality childcare in safe places where they can discover the joy of learning, pursue their creative passions and develop the strong character values, life-skills and decision-making abilities needed to achieve their full potential in spirit, mind and body Our YMCA operates 144 Fun Company sites, primarily in public elementary schools, where our staff volunteer a minimum of 5 hours a week (in addition to the hours spent operating our before- and after-school program) to their respective schools in order to serve as active partners in the schools' efforts to provide the children of our community with a quality, well-rounded educational experience Preschool CareOur state licensed preschools facilitate hands-on, age appropriate learning experiences designed to capture and build on a child's imagination and interest The curriculum actively engages a child's reasoning, creative thinking and social skills in a way that instills them with happiness and self-confidence Our YMCA preschools also incorporate a literacy curriculum designed to give toddlers the exposure to reading they need to be Kindergarten-ready Center Day CampsIn addition to the camping opportunities provided at Camp Widjiwagan, kids in our communities also have the option of attending summer camp a little closer to home by participating in any of 10 Center Day Camps Our Center Day Camp programs emphasize building strong character values and social interaction skills while engaging in summer fun Typical activities at a center day camp include swimming, sports, outdoor adventures, arts and crafts, science and much more The activities and calendars of events for our center day camps are standardized across our 12-county service area to ensure that every child has the same quality camping experience at our YMCAs regardless of where they live In 2009, our YMCA - Welcomed 5,012 day and overnight campers to strengthen confidence, forge friendships and sharpen character at Camp Widjiwagan--voted Best Day Camp for the 12th consecutive year by Nashville Parent readers - Provided academic, social and physical enrichment to 7,234 school-aged children at 144 sites through before and after-school Fun Company and Summer Odyssey in partnership with local schools - Fostered learning, laughter and love in 266 children through our licensed preschool services

4c (Code) (Expenses $ 4,792,195 including grants of $ 276,325) (Revenue $ 1,375,158)

COMMUNITY OUTREACH & EDUCATION- In 2009, nearly 10,000 men, women and children in our communities took part in one or more of dozens of quality outreach programs and educational opportunities provided by our YMCA each year Designed to meet community needs, our outreach programs offer people of all ages and from all backgrounds the opportunity to grow toward reaching their full potential Our YMCA continues to enrich the lives of those in the communities we serve, not only through membership, but by reaching out beyond the walls of our wellness centers to meet people where they are and provide them with life-changing programs, services, tools and resources to live healthier lives in spirit, mind and body Our outreach programs serve people of all ages and from all walks of life Like all of our other programs and services, our outreach offerings are available to all regardless of income or ability to pay In 2009, our YMCA - Sowed confidence and positive values into 4,996 children and families through our Urban Services Youth Development Center, Y-CAP (YMCA Community Action Project), and Latino Achievers program - Offered career training and life skills development to 67 men ages 18-24 through Y-Build, an outreach program designed to equip young adults interested in the construction trade with the skills required for viable employment opportunities Y-Build participants without a high school diploma also have the opportunity to work toward obtaining their GED while in the program - Trained 33 young women for healthcare careers in our Y-MedCorps program - Encouraged spiritual, mental and physical growth in 267 students at the Preston Taylor Boys & Girls Club YMCA Youth Development Center at McKissack Middle School Located near the Preston-Taylor Public Housing Development, the center is a unique partnership between our YMCA, the Boys & Girls Club, Metro-Nashville Public Schools and the United Way - Guided 153 boys and girls toward long-term success and achievement though our Urban Services School of Academics & Athletics (USSAA) USSAA is a year-round outreach program designed to help students succeed both on the court and field and in the classroom In addition to intense athletic training, participants also receive college and career counseling, adult mentorship and ACT/SAT prep classes - Through our YMCA Center for Civic Engagement enriched 2,640 middle and high-school students statewide through the nation's second largest YMCA Youth in Government program and 29th Annual Tennessee YMCA Model United Nations conference - Expanded our Restore Ministries programs beyond Middle Tennessee, helping 1,230 men and women find hope and freedom from life-controlling issues through safe, caring support groups and individual counseling - Provided 252 men and women with health and wellness guidance, encouragement, support and education through health outreach programs including After Breast Cancer, DiabeteSmart and DS2 (DiabeteSmart for Kids) - Provided free tutoring to 50 students through the Literacy Programs at our Margaret Maddox and Northwest Family YMCAs, both located in areas where more than 80% of the school children live at or below the poverty level

4d Other program services (Describe in Schedule O) **See also Additional Data for Description**

(Expenses $ 1,184,266 including grants of $) (Revenue $ 577,172)

4e **Total program service expenses** ▶ $ 67,549,335

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		No
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities? *If "Yes," complete Schedule C, Part II*	4		No
5	**Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.** Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? *If "Yes," complete Schedule C, Part III*	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? *If "Yes," complete Schedule D, Part II*	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10		No
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	Yes	
	• Did the organization report an amount for land, buildings, and equipment in Part X, line10? *If "Yes," complete Schedule D, Part VI.*			
	• Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII.*			
	• Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII.*			
	• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX.*			
	• Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X.*			
	• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? *If "Yes," complete Schedule D, Part X.*			
12	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional* — 12A: Yes / No: No			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, and program service activities outside the United States? *If "Yes," complete Schedule F, Part I*	14b		No
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 U S ? *If "Yes," complete Schedule F, Part II*	15		No
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 U S ? *If "Yes," complete Schedule F, Part III*	16		No
17	Did the organization report a total of more than $15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I*	17	Yes	
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18	Yes	
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No
20	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20		No

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
21	Did the organization report more than $5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	Yes	
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	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 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	Yes	
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 questions 24b–24d and complete Schedule K. If "No," go to line 25*	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
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		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
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		No
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		No
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		No
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		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a	Yes	
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		No
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 owner? *If "Yes," complete Schedule L, Part IV*	28c	Yes	
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	33		No
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35		No
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	Yes	

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**	404			
b	Enter the number of Forms W-2G included in line 1a *Enter -0-* if not applicable	**1b**	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			**1c**	Yes	
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**	5,552			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note:** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			**2b**	Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?			**3a**	Yes	
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*			**3b**	Yes	
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**		No
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**		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			**5b**		No
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**		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			**6b**		
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			**7a**		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			**7b**		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			**7c**		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	**7d**				
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			**7e**		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			**7f**		No
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			**7g**	Yes	
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?			**7h**	Yes	
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			**8**		
9	**Sponsoring organizations maintaining donor advised funds.**					
a	Did the organization make any taxable distributions under section 4966?			**9a**		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			**9b**		
10	**Section 501(c)(7) organizations.** Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12	**10a**				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	**10b**				
11	**Section 501(c)(12) organizations.** Enter					
a	Gross income from members or shareholders	**11a**				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	**11b**				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			**12a**		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	**12b**				

Part VI **Governance, Management, and Disclosure** For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 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 . .	1a 75			
b	Enter the number of voting members that are independent . .	1b 72			
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	Yes	
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		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		4		No
5	Did the organization become aware during the year of a material diversion of the organization's assets?		5		No
6	Does the organization have members or stockholders?		6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?		8a	Yes	
b	Each committee with authority to act on behalf of the governing body?		8b	Yes	
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		No

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

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed ▶ TN , KY

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you make these available Check all that apply

☐ Own website ☐ Another's website ☑ Upon request

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

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶

MR TIM WEILL
1000 CHURCH STREEt
Nashville, TN 37203
(615) 259-9622

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, and **current** key employees 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, or 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 or former officer, director, trustee or key employee

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(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
See add'l data										

1b Total . . . . ▶	2,021,151	0	313,411

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 ▶16

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

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
ATIBA SOFTWARE LLC 1720 WEST END AVENUE STE 33 NASHVILLE, TN 37203	SOFTWARE PROGRAMMING	543,658
PRO-CLEAN LLC 700 INVERNESS AVE STE 102 NASHVILLE, TN 37204	JANITORIAL SERVICES	162,125
Won S Choi dba Happy Campers 226 Third Ave N nashville, TN 37201	Food Services	153,869
TRIANGLE 2 PARTNERS 34 b high street marblehead, MA 01945	CONSULTANTS	129,453
LIGHTHOUSE COUNSEL INC 101 Forest Crossing Blvd Ste 109 Franklin, TN 37064	FUNDRAISER	113,845

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 ▶5

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts							
1a	Federated campaigns . .	1a	93,268				
b	Membership dues	1b					
c	Fundraising events	1c					
d	Related organizations . . .	1d					
e	Government grants (contributions)	1e	2,931,871				
f	All other contributions, gifts, grants, and similar amounts not included above	1f	8,323,457				
g	Noncash contributions included in lines 1a-1f $						
h	**Total.** Add lines 1a-1f . . . . ▶			11,348,596			
Program Service Revenue			Business Code				
2a	Membership dues		713,940	46,816,793	46,816,793		
b	program service revenu		541,610	22,475,573	22,475,573		
c	corporate fitness		713,940	111,966		111,966	
d	consulting management		541,610	88,878		88,878	
e							
f	All other program service revenue						
g	**Total.** Add lines 2a–2f . . . . ▶			69,493,210			
Other Revenue							
3	Investment income (including dividends, interest and other similar amounts) . . . . . ▶			183,632			183,632
4	Income from investment of tax-exempt bond proceeds . . ▶						
5	Royalties . . . . ▶						
		(i) Real	(ii) Personal				
6a	Gross Rents						
b	Less rental expenses						
c	Rental income or (loss)						
d	Net rental income or (loss) . . . . ▶						
		(i) Securities	(ii) Other				
7a	Gross amount from sales of assets other than inventory		74,021				
b	Less cost or other basis and sales expenses		292,775				
c	Gain or (loss)		-218,754				
d	Net gain or (loss) . . . . ▶			-218,754	-218,754		
8a	Gross income from fundraising events (not including $ of contributions reported on line 1c) See Part IV, line 18 . . .	a	1,044,685				
b	Less direct expenses . . .	b	340,171				
c	Net income or (loss) from fundraising events . . ▶			704,514			704,514
9a	Gross income from gaming activities See Part IV, line 19 . . .	a					
b	Less direct expenses . . .	b					
c	Net income or (loss) from gaming activities . . . ▶						
10a	Gross sales of inventory, less returns and allowances .	a					
b	Less cost of goods sold . .	b					
c	Net income or (loss) from sales of inventory . . ▶						
	Miscellaneous Revenue		Business Code				
11a	OTHER INCOME		541,610	923,026	923,026		
b							
c							
d	All other revenue						
e	**Total.** Add lines 11a–11d . . . . . . ▶			923,026			
12	**Total revenue.** See Instructions . . . ▶			82,434,224	69,996,638	200,844	888,146

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	249,375	249,375		
2 Grants and other assistance to individuals in the U S See Part IV, line 22	26,950	26,950		
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	1,589,812	267,791	794,575	527,446
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	35,259,421	31,607,816	3,075,199	576,406
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	1,821,847	1,575,948	191,324	54,575
9 Other employee benefits	1,441,084	1,246,578	151,337	43,169
10 Payroll taxes	3,204,888	2,821,132	311,414	72,342
11 Fees for services (non-employees)				
a Management	161,233		161,233	
b Legal	88,014		88,014	
c Accounting	58,600		58,600	
d Lobbying				
e Professional fundraising *See Part IV, line 17*	115,800			115,800
f Investment management fees				
g Other	2,656,773	1,740,898	915,875	
12 Advertising and promotion				
13 Office expenses	6,390,998	5,417,991	913,890	59,117
14 Information technology				
15 Royalties				
16 Occupancy	8,890,144	8,447,793	437,370	4,981
17 Travel	1,039,930	860,514	153,306	26,110
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	1,028,571	820,922	201,656	5,993
20 Interest	2,498,738	2,066,131	432,607	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	8,134,521	8,134,521		
23 Insurance	448,304	443,072	5,232	
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 costs	1,847,736	1,113,457	729,637	4,642
b miscellaneous expense	443,942	305,910	128,262	9,770
c membership dues	399,659	397,559	0	2,100
d assistance, awards, and	216,296	0	0	216,296
e Unrelated business inco	4,977	4,977	0	0
f All other expenses				
25 **Total functional expenses.** Add lines 1 through 24f	78,017,613	67,549,335	8,749,531	1,718,747
26 **Joint costs.** Check here ▶ ☐ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

Section	Line	Description			(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing			2,521,564	1	2,369,013
	2	Savings and temporary cash investments			21,582,481	2	19,243,750
	3	Pledges and grants receivable, net			11,556,122	3	8,281,800
	4	Accounts receivable, net			342,953	4	301,313
	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			963,416	9	888,821
	10a	Land, buildings, and equipment cost or other basis *Complete Part VI of Schedule D*	10a	186,826,318			
	b	Less accumulated depreciation	10b	55,623,537	127,929,307	10c	131,202,781
	11	Investments—publicly traded securities				11	
	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			412,879	15	1,886,832
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)			165,308,722	16	164,174,310
Liabilities	17	Accounts payable and accrued expenses			6,625,652	17	4,721,289
	18	Grants payable				18	
	19	Deferred revenue			2,841,656	19	2,600,734
	20	Tax-exempt bond liabilities			59,870,000	20	55,390,000
	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			6,413,703	23	7,487,965
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities Complete Part X of Schedule D			7,520,082	25	4,550,238
	26	**Total liabilities.** Add lines 17 through 25			83,271,093	26	74,750,226
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**					
	27	Unrestricted net assets			65,959,603	27	76,586,707
	28	Temporarily restricted net assets			16,078,026	28	12,837,377
	29	Permanently restricted net assets				29	
		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			82,037,629	33	89,424,084
	34	Total liabilities and net assets/fund balances			165,308,722	34	164,174,310

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ Other ____________ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? . .	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 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	Yes	
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 ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separated 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? . . . . will	3a	Yes	
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	Yes	

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SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
YOUNG MEN'S CHRISTIAN ASSOCIATION OF
MIDDLE TENNESSEE

Employer identification number

62-0476243

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

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

1 ☐ A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☑ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a ☐ Type I **b** ☐ Type II **c** ☐ Type III - Functionally integrated **d** ☐ Type III - Other

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(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 the supported organization?	**11g(i)**		
(ii) a family member of a person described in (i) above?	**11g(ii)**		
(iii) a 35% controlled entity of a person described in (i) or (ii) above?	**11g(iii)**		

h Provide the following information about the supported organization(s)

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

Part II **Support Schedule for Organizations Described in IRC 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 ")	4,880,829	51,226,483	40,505,406	10,035,341	12,393,281	119,041,340
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	4,880,829	51,226,483	40,505,406	10,035,341	12,393,281	119,041,340
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						119,041,340

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	4,880,829	686,735	40,505,406	10,035,341	12,393,281	119,041,340
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	445,068	686,735		601,869	183,632	1,917,304
9 Net income from unrelated business activities, whether or not the business is regularly carried on			33,343	40,274	22,655	96,272
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets						
11 **Total support** (Add lines 7 through 10)						121,054,916

12 Gross receipts from related activities, etc (See instructions) | **12** | 225,639,997

13 **First Five Years** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 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** | 98 340 %

15 Public Support Percentage for 2008 Schedule A, Part II, line 14 | **15** | 95 560 %

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 ▶ ☑

b **33 1/3% support test—2008.** If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

17a **10%-facts-and-circumstances test—2009.** If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶ ☐

b **10%-facts-and-circumstances test—2008.** If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶ ☐

18 **Private Foundation** If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions ▶ ☐

Part III **Support Schedule for Organizations Described in IRC 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 ")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public Support** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	**(a)** 2005	**(b)** 2006	**(c)** 2007	**(d)** 2008	**(e)** 2009	**(f)** Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 **Total support** (Add lines 9, 10c, 11 and 12)						

14 **First Five Years** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

15 Public Support Percentage for 2009 (line 8 column (f) divided by line 13 column (f))	15	
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2009** (line 10c column (f) divided by line 13 column (f))	17	
18 Investment income percentage from **2008** Schedule A, Part III, line 17	18	

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 ▶☐

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 ▶☐

20 **Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions ▶☐

Part IV **Supplemental Information.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

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 MIDDLE TENNESSEE

Employer identification number
62-0476243

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 may 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 importantly land area
- ☐ Protection of natural habitat
- ☐ Preservation of a certified historic structure
- ☐ Preservation of open space

2 Complete lines 2a–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 Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable 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 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 ▶ $ ______

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

3 Using the organization's 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 programs
e ☐ 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 the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

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

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

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

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

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					
b Contributions					
c Investment earnings or losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

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

a Board designated or quasi-endowment ▶ %

b Permanent endowment ▶ %

c Term endowment ▶ %

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

		Yes	No
(i) unrelated organizations	3a(i)		
(ii) related organizations	3a(ii)		
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	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		7,351,707		7,351,707
b Buildings		138,048,703	32,344,378	105,704,325
c Leasehold improvements				
d Equipment		29,864,472	19,644,257	10,220,215
e Other		11,561,436	3,634,902	7,926,534
Total. Add lines 1a-1e *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)* ▶				131,202,781

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		
Total. *(Column (b) should equal Form 990, Part X, col (B) line 12)* ▶		

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

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. *(Column (b) should equal Form 990, Part X, col (B) line 13)* ▶		

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

(a) Description	(b) Book value
Total. *(Column (b) should equal Form 990, Part X, col.(B) line 15.)* . . . . ▶	

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

1 (a) Description of Liability	(b) Amount
Federal Income Taxes	
DERIVATIVE LIABILITY - INTEREST RATE SWAP	4,550,238
Total. *(Column (b) should equal Form 990, Part X, col (B) line 25)* ▶	4,550,238

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

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	82,434,224
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	78,017,613
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	4,416,611
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	2,969,844
9	Total adjustments (net) Add lines 4 - 8	9	2,969,844
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	7,386,455

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	82,774,395
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d	340,171		
e	Add lines **2a** through **2d**			2e	340,171
3	Subtract line **2e** from line **1**			3	82,434,224
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 should equal Form 990, Part I, line 12)			5	82,434,224

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

1	Total expenses and losses per audited financial statements			1	75,387,940
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIV)	2d	-2,629,673		
e	Add lines **2a** through **2d**			2e	-2,629,673
3	Subtract line **2e** from line **1**			3	78,017,613
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 should equal Form 990, Part I, line 18)			5	78,017,613

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, 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

Identifier	Return Reference	Explanation
Part XI, Line 8 - Other Adjustments		CHANGE IN DERIVATIVE LIABILITY 2969844
Part XII, Line 2d - Other Adjustments		Fundraising expenses 340171
Part XIII, Line 2d - Other Adjustments		change in derivative liability -2969844 Fundraising expenses 340171

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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.

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization
YOUNG MEN'S CHRISTIAN ASSOCIATION OF
MIDDLE TENNESSEE

Employer identification number
62-0476243

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

a ☑ Mail solicitations
b ☑ Internet and e-mail solicitations
c ☑ Phone solicitations
d ☑ In-person solicitations
e ☑ Solicitation of non-government grants
f ☑ Solicitation of government grants
g ☑ Special fundraising events

2a 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 activities? ☑ Yes ☐ No

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 Form 990-EZ filers are not required to complete this table

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions? Yes	No	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
LIGHTHOUSE COUNSEL	CONSULTANT		No	0	113,845	-113,845
Total . . . . ▶					113,845	-113,845

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

TN,KY

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.

		(a) Event #1 legacy golf tournament & Dinner (event type)	**(b)** Event #2 Maryland Farms Kickoff (event type)	**(c)** Other Events 30 (total number)	**(d)** Total Events (Add col **(a)** through col **(c)**)
Revenue	1 Gross receipts	162,432	109,445	772,808	1,044,685
	2 Less Charitable contributions	162,432	109,445	772,808	1,044,685
	3 Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Non-cash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	78,635	39,445	222,091	340,171
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				340,171
	11 Net income summary Combine lines 3, column d, and line 10 ▶				-340,171

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.

		(a) Bingo	**(b)** Pull tabs/Instant bingo/progressive bingo	**(c)** Other gaming	**(d)** Total gaming (Add col **(a)** through col **(c)**)
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Non-cash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	
	7 Direct expense summary Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary Combine lines 1, column d, and line 7 ▶				

			Yes	No
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?	9a		
b	If "No," Explain ______			
10a	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	10a		
b	If "Yes," Explain ______			
11	Does the organization operate gaming activities with nonmembers?	11		
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?	12		

			Yes	No
13 Indicate the percentage of gaming activity operated in				
a The organization's facility	**13a**			
b An outside facility	**13b**			
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records				

Name ▶ ______________________________

Address ▶ ______________________________

		Yes	No
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	**15a**		

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

Name ▶ ______________________________

Address ▶ ______________________________

16 Gaming manager information

Name ▶ ______________________________

Gaming manager compensation ▶ $ ______________

Description of services provided ▶ ______________________________

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions

		Yes	No
a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	**17a**		

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

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
YOUNG MEN'S CHRISTIAN ASSOCIATION OF MIDDLE TENNESSEE

Employer identification number
62-0476243

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . ☑ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than $5,000. Check this box if no one recipient received more than $5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed . . . . ▶ ☐

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
ymca of chattanooga301 w 6th street chattanooga, TN 37402	620475699	501(C)(3)	83,125				To further exempt purpose
ymca of knoxville10713 kingston pike knoxville, TN 37934	620475700	501(C)(3)	83,125				To Further exempt purpose
ymca of memphis & the mid-South6373 quail hollow road suite 201 memphis, TN 38120	620476304	501(C)(3)	83,125				To Further Exempt Purpose

2 Enter total number of section 501(c)(3) and government organizations . . . . ▶ 3

3 Enter total number of other organizations . . . . ▶

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	**(b)** Number of recipients	**(c)** Amount of cash grant	**(d)** Amount of non-cash assistance	**(e)** Method of valuation (book, FMV, appraisal, other)	**(f)** Description of non-cash assistance
tuition/scholarship	20	20,700		FMV	
books & school related costs	4	6,250		FMV	
See Additional Data Table					

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	**Return Reference**	**Explanation**
Other Information	Part IV	part 1, #2 all grant individuals are required to provide receipts or invoices for all expenditures

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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, question 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 MIDDLE TENNESSEE

Employer identification number
62-0476243

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax idemnification and gross-up payments ☐ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain	**1b**		
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?	**2**	Yes	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply ☑ Compensation committee ☐ Written employment contract ☐ Independent compensation consultant ☑ Compensation survey or study ☐ Form 990 of other organizations ☑ Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
a	Receive a severance payment or change-of-control payment?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**		No
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	**4c**		No
	Only 501(c)(3) and 501(c)(4) organizations only 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?	**5a**		No
b	Any related organization? If "Yes," to line 5a or 5b, describe in Part III	**5b**		No
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?	**6a**		No
b	Any related organization? If "Yes," to line 6a or 6b, describe in Part III	**6b**		No
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	**7**		No
8	Were any amounts reported in Form 990, Part VII, paid or accured 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	**8**		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	**9**		

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

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

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
JOHN MARK JOHNSON	(i)	282,755	7,900	276	29,400	7,075	327,406	0
	(ii)	0	0	0	0	0	0	0
DAVID L BYRD	(i)	214,309	0	276	25,200	4,677	244,462	0
	(ii)	0	0	0	0	0	0	0
peter M oldham	(i)	169,235	0	276	21,196	7,075	197,782	0
	(ii)	0	0	0	0	0	0	0
TIMOTHY WEILL	(i)	158,977	0	792	19,416	292	179,477	0
	(ii)	0	0	0	0	0	0	0
michael heilbronn	(i)	152,311	0	516	19,054	7,075	178,956	0
	(ii)	0	0	0	0	0	0	0
HAKAN DARUD	(i)	146,211	0	0	18,330	7,075	171,616	0
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

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

Identifier	Return Reference	Explanation

Schedule K (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O (Form 990).
▶ 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 MIDDLE TENNESSEE

Employer identification number
62-0476243

Part I Bond Issues

	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Price	(f) Description of Purpose	(g) Defeased Yes	(g) Defeased No	(h) On Behalf of Issuer Yes	(h) On Behalf of Issuer No
A	INDUSTRIAL DEVELOPMENT BOARD OF THE METROP GOVT OF NASHVILLE & DAVIDSON CO	62-1162842	592065018	12-06-2007	31,440,000	CONSTRUCTION AND EQUIPMENT Activities		X		X

Part II Proceeds

		A	B	C	D	E
1	Total proceeds of issue	31,440,000				
2	Gross proceeds in reserve funds					
3	Proceeds in refunding or defeasance escrows					
4	Other unspent proceeds	5,321,897				
5	Issuance costs from proceeds	174,304				
6	Working capital expenditures from proceeds					
7	Capital expenditures from proceeds	25,943,799				
8	Year of substantial completion					

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No	E Yes	E No
9	Were the bonds issued as part of a current refunding issue?		X								
10	Were the bonds issued as part of an advance refunding issue?		X								
11	Has the final allocation of proceeds been made?		X								
12	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X									

Part III Private Business Use

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No	E Yes	E No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X								
2	Are there any lease arrangements with respect to the financed property which may result in private business use?		X								

Part III Private Business Use *(Continued)*

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No	E Yes	E No
3a	Are there any management or service contracts with respect to the financed property which may result in private business use?		X								
3b	Are there any research agreements with respect to the financed property which may result in private business use?		X								
3c	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?		X								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶		0 %								
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶		0 %								
6	Total of lines 4 and 5		0 %								
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?		X								

Part IV Arbitrage

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No	E Yes	E No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		X								
2	Is the bond issue a variable rate issue?	X									
3a	Has the organization or the governmental issuer identified a hedge with respect to the bond issue on its books and records?	X									
b	Name of provider	Bank of America									
c	Term of hedge	20 000000000000									
4a	Were gross proceeds invested in a GIC?		X								
b	Name of provider										
c	Term of GIC										
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?										
5	Were any gross proceeds invested beyond an available temporary period?		X								
6	Did the bond issue qualify for an exception to rebate?		X								

Schedule L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38a or 40b.**
▶ **Attach to Form 990 or Form 990-EZ.** ▶**See separate instructions.**

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
YOUNG MEN'S CHRISTIAN ASSOCIATION OF MIDDLE TENNESSEE

Employer identification number
62-0476243

Part I Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected? Yes	No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 . . . . . . ▶ $

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . . . ▶ $

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

(a) Name of interested person and purpose	(b) Loan to or from the organization? To	From	(c) Original principal amount	(d) Balance due	(e) In default? Yes	No	(f) Approved by board or committee? Yes	No	(g) Written agreement? Yes	No
Total . . . . ▶ $										

Part III Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of grant or type of assistance

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues? Yes	No
DECOSTA JENKINS	BOARD MEMBER and Asst Treasurer	1,936,877	Electrical Services Provided to facilities from Nashville Electric		No
MARSHALL POLK	bOARD MEMBER	817,927	Insurance services Provided by First Horizon		No
Walter knestrick	bOARD MEMBER	587,686	Knestrick Contractors, provided Renovation and remodeling services to YMCA facilities		No

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

NonCash Contributions

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

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
YOUNG MEN'S CHRISTIAN ASSOCIATION OF MIDDLE TENNESSEE

Employer identification number
62-0476243

Part I Types of Property

	(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art—Works of art				
2 Art—Historical treasures .				
3 Art—Fractional interests . .				
4 Books and publications . .				
5 Clothing and household goods				
6 Cars and other vehicles . .				
7 Boats and planes				
8 Intellectual property . . .				
9 Securities—Publicly traded .				
10 Securities—Closely held stock .				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous . .				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other . . .				
15 Real estate—Residential .				
16 Real estate—Commercial . .				
17 Real estate—Other . . .	X	1	1,500,000	Appraisal
18 Collectibles				
19 Food inventory . . .				
20 Drugs and medical supplies .				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens . .				
24 Archeological artifacts . . .				
25 Other ▶ (Computer Software)	X	1	1,751,633	Comparable Sales
26 Other ▶( )				
27 Other ▶( )				
28 Other ▶ ( )				

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

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

Part II

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

Identifier	Return Reference	Explanation

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
YOUNG MEN'S CHRISTIAN ASSOCIATION OF
MIDDLE TENNESSEE

Employer identification number
62-0476243

Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 2		Lee Barfield, a board member and Law son Allen, a board member have a family relationship David Wilds, a board member and Cal Turner, a board member have a business relationship
Form 990, Part VI, Section A, line 6		The Bylaw s define "voting members" to be members of the Association Board and of each center board
Form 990, Part VI, Section A, line 7a		The Y has "voting members" w ho elect the Association Board (the "Governing Body") each year The bylaw s define "voting members" to be members of the Association Board and of each Center Board
Form 990, Part VI, Section A, line 7b		Decisions of the governing body that are subject to approval by the voting members are set forth in Tennessee law and include mergers betw een the Y and other entities
Form 990, Part VI, Section B, line 11		The Y's CFO and CAO w ork w ith its auditors to prepare the 990 After being review ed by the CFO and CAO, the 990 is posted on a secure w ebsite to facilitate its review by board members prior to its being filed w ith the IRS All board members are notified of the posting (either via email or regular mail), given a link to the w ebsite, and afforded w hat the CFO and CAO believe to be a reasonable amount of time to review the 990 Board Members are requested to indicate on the w ebsite w hen they have completed their review Board Members w ho prefer it are given a hard copy of the 990 to review Separately, the Y sends the Form 990 to each member of its finance committee requesting their review prior to the 990 being filed w ith the IRS
Form 990, Part VI, Section B, line 12c		The Y has a Conflicts Committee, w hich is composed of 3 volunteers This committee annually distributes a copy of the Association's Conflicts Policy and a Disclosure Statement to all Association Board Members and senior executives All such persons must complete, sign and return the Disclosure Statement The Disclosure Statements are review ed by the Conflicts Committee The Conflicts Committee has full pow er to evaluate and approve or disapprove any transaction presented as a potential conflict Board Members and senior executives are under a continuing responsibility to notify the Conflicts Committee about potential conflicts that may arise prior to the distribution of the next annual Disclosure Statement In addition, those staff members w ho are authorized to engage in transactions on behalf of the Y must report to the Conflicts Committee and proposed transactions betw een the Y and an Association Board member The Committee may approve or disapprove any such proposed transaction Any member of the Association's Board w ho has a potential conflict of interest in a specific transaction under consideration at a Board meeting is expected to recuse him/herself from any influence on such action, request the minutes of the meeting note his/her abstention and, w here appropriate leave the room during discussion of the action
Form 990, Part VI, Section B, line 15a		The Y uses the Hay System in "Pointing" all of its positions, including the CEO Compensation of the Y's CEO is determined each year by the CEO Compensation Committee, consisting of 4 Board Members The Committee establishes annual goals for the CEO, evaluates the CEO's performance, and uses comparability data in setting the CEO's compensation The Committee maintains w ritten records of its deliberations and discussions Compensation of other Officers and key employees is determined by their supervisors, utilizing the Hay System and the expertise of the Y's People's Services Department
Form 990, Part VI, Section C, line 19		The Y's governing documents, conflict of interest policy, and financial statements are available upon request

Identifier	Return Reference	Explanation
Form 990, Part XI, Line 2		Neither the oversight Process nor the selection process have changed from the prior year

Form 990, Part I, line 1 and Form 990, Part III, Line 1 The YMCA of Middle Tennessee is a not-for-profit, worldwide charitable fellowship united by a common loyalty to Jesus Christ for the purpose of helping persons grow in spirit, mind and body Through a range of life-changing programs and services, we meet critical needs in our communities and provide a welcoming place for people of all ages The YMCA of Middle Tennessee provides vital community resources to nurture the potential of youth and teens, improve the health and wellbeing of people in our community and provide opportunities for people to serve others and support their neighbors Our YMCA is open and accessible to everyone in our communities such that men, women and children from all walks of life have a place at our Y Through our We Build People annual sustaining campaign and our income-based rate scale, we ensure that our YMCA remains available to all, regardless of income level or ability to pay Our vision is to offer Hope for Life to people of all ages, faiths, races, backgrounds and abilities, regardless of their socio-economic circumstance Through a range of quality outcome-based programs, services, partnerships and collaborations, we offer hope throughout Middle Tennessee and southern Kentucky by Inspiring Youth, Improving Health, Creating Community and Serving Others In all that we do--from inspiring healthier lifestyles to providing quality outreach programs that meet community needs--we strive to model and teach the YMCA's core character values of caring, honesty, respect and responsibility With 29 centers and 297 program locations, the YMCA of Middle Tennessee reaches 284,162 lives in the 12-county area it serves through membership, camping and childcare, program participation, community outreach, volunteerism and philanthropy

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
▶ 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 MIDDLE TENNESSEE

Employer identification number
62-0476243

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

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

Part II **Identification of Related Tax-Exempt Organizations** (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity
YMCA FOUNDATION OF MIDDLE TENNESSEE 1000 CHURCH STREET NASHVILLE, TN 372033420 51-0196924	MAINTAINS A PERMANENT ENDOWMENT FUND FOR THE YMCA OF MIDDLE TENNESSEE	TN	501 (c) (3)		

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations? Yes	(h) No	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership

Part V **Transactions With Related Organizations** (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36.)

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

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved
(1) YMCA OF MIDDLE TN RECEIVED GRANTS FROM THE YMCA FOUNDATION	C	149,961
(2) YMCA OF MIDDLE TN SHARES OFFICE SPACE & EQUIP WITH THE FOUNDATION	M	0
(3) ymca of middle tn received reimbursement for personnel expenses	P	118,923
(4) ymca of middle tn received reimbursements for various expenses from time to		
(5) time such as meals & other expenses charges on ymca credit cards	P	14,831
(6)		

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?		(e) Share of end-of-year assets	(f) Disproprtionate allocations?		(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) General or managing partner?	
			Yes	**No**		**Yes**	**No**		**Yes**	**No**

Additional Data

Software ID:
Software Version:
EIN: 62-0476243
Name: YOUNG MEN'S CHRISTIAN ASSOCIATION OF MIDDLE TENNESSEE

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services

(Code) (Expenses $ 1,184,266 including grants of $) (Revenue $ 577,172)

Youth, Teen and Adult Programs such as Music, Dance, Art, Birthday Parties, Parents Day/Night Out, Cheerleading, Etc

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply) Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(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
frank drowata CHAIRman	2 00	X		X				0	0	0
JOYCE COOK SECRETARY	2 00	X		X				0	0	0
RANDY LASZEWSKI TREASURER	2 00	X		X				0	0	0
DECOSTA JENKINS ASST TREAS	2 00	X		X				0	0	0
H LEE BARFIELD II BOARD MEMBER	1 00	X						0	0	0
DAVID BOHAN BOARD MEMBER	1 00	X						0	0	0
LEILANI BOULWARE Board MEMBER	1 00	X						0	0	0
STEWART BRONAUGH BOARD MEMBER	1 00	X						0	0	0
DR ELBERT BROOKS BOARD MEMBER	1 00	X						0	0	0
WOOD CALDWELL BOARD MEMBER	1 00	X						0	0	0
FRED CASSETTY BOARD MEMBER	1 00	X						0	0	0
GEORGE H CATE BOARD MEMBER	1 00	X						0	0	0
DARRYL COOPER BOARD MEMBER	1 00	X						0	0	0
FLORENCE DAVIS BOARD MEMBER	1 00	X						0	0	0
PETE DELAY BOARD MEMBER	1 00	X						0	0	0
MARTY DICKENS BOARD MEMBER	1 00	X						0	0	0
JOHN EAKIN BOARD MEMBER	1 00	X						0	0	0
ALISON EGERTON BOARD MEMBER	1 00	X						0	0	0
FARSHEED FERDOWSI BOARD MEMBER	1 00	X						0	0	0
STEVEN FORD BOARD MEMBER	1 00	X						0	0	0
SANDRA FULTON BOARD MEMBER	1 00	X						0	0	0
HOMER B GIBBS JR BOARD MEMBER	1 00	X						0	0	0
BRENDA GILMORE BOARD MEMBER	1 00	X						0	0	0
JAMES W GRANBERY BOARD MEMBER	1 00	X						0	0	0
ROUPEN M GULBENK BOARD MEMBER	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(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
JACQUELYN GUTHRIE BOARD MEMBER	1 00	X						0	0	0
JASON HANCOCK BOARD MEMBER	1 00	X						0	0	0
GERRY HELPER BOARD MEMBER	1 00	X						0	0	0
BILL HENDERSON BOARD MEMBER	1 00	X						0	0	0
CRAIG JOHNSON bOARD MEMBER	1 00	X						0	0	0
JOE KELLEY BOARD MEMBER	1 00	X						0	0	0
WILLIAM KNESTRICK BOARD MEMBER	1 00	X						0	0	0
WALTER KNESTRICK BOARD MEMBER	1 00	X						0	0	0
RONALD F KNOX JR BOARD MEMBER	1 00	X						0	0	0
BILL LEE BOARD MEMBER	1 00	X						0	0	0
RANDY LOWRY BOARD MEMBER	1 00	X						0	0	0
THOMAS LYNN BOARD MEMBER	1 00	X						0	0	0
DON MACLEOD BOARD MEMBER	1 00	X						0	0	0
PAT MCGUIGAN BOARD MEMBER	1 00	X						0	0	0
JOHN ED MILLER BOARD MEMBER	1 00	X						0	0	0
PHIL PFEFFER BOARD MEMBER	1 00	X						0	0	0
MARSHALL POLK BOARD MEMBER	1 00	X						0	0	0
ROBERT PULLEN BOARD MEMBER	1 00	X						0	0	0
DOYLE RIPPEE BOARD MEMBER	1 00	X						0	0	0
JIM SHAUB BOARD MEMBER	1 00	X						0	0	0
REV BOB SPAIN BOARD MEMBER	1 00	X						0	0	0
BARBARA SUTTON BOARD MEMBER	1 00	X						0	0	0
RICHARD TOMKINS BOARD MEMBER	1 00	X						0	0	0
CLAIRE TUCKER BOARD MEMBER	1 00	X						0	0	0
CAL TURNER BOARD MEMBER	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(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	Former			
WILLIAM E TURNER JR BOARD MEMBER	1 00	X						0	0	0
WILLIAM B WADLINGTONMD BOARD MEMBER	1 00	X						0	0	0
JAMES A WEBB III BOARD MEMBER	1 00	X						0	0	0
BERNARD WERTHAN bOARD MEMBER	1 00	X						0	0	0
DAVID WILDS BOARD MEMBER	1 00	X						0	0	0
W RIDLEY WILLS II BOARD MEMBER	1 00	X						0	0	0
WILLIAM WILSON BOARD MEMBER	1 00	X						0	0	0
Jenny Adcox BoARD MEMBER	1 00	X						0	0	0
Lız Alexander BoARD MEMBER	1 00	X						0	0	0
Lawson Allen BoarD MEMBER	1 00	X						0	0	0
Paul Anderson BOARD MEMBER	1 00	X						0	0	0
Mack Barrett BoARD MEMBER	1 00	X						0	0	0
Brent Browning BOARD MEMBER	1 00	X						0	0	0
Bıll DeLoache BOARD MEMBER	1 00	X						0	0	0
Keıth Dennen BoARD MEMBER	1 00	X						0	0	0
Rıch Ford BoARD MEMBER	1 00	X						0	0	0
Martha Hopson BoARD MEMBER	1 00	X						0	0	0
Karen Johnson BoarD MEMBER	1 00	X						0	0	0
Shawn Johnson BoARD MEMBER	1 00	X						0	0	0
Gale Moore BoARD MEMBER	1 00	X						0	0	0
Tom Ozburn BoaRD MEMBER	1 00	X						0	0	0
Tom Parrısh BoARD MEMBER	1 00	X						0	0	0
James M Patterson Jr BoARD MEMBER	1 00	X						0	0	0
Frank Shope Board MEMBER	1 00	X						0	0	0
Jeff Themm BoARD MEMBER	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(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	Former			
Scott Weaver BoARD MEMBER	1 00	X						0	0	0
Lari White BoARD MEMBER	1 00	X						0	0	0
Liz Wilson bOARD MEMBER	1 00	X						0	0	0
Darren Woodruff BoARD MEMBER	1 00	X						0	0	0
George Yowell bOARD MEMBER	1 00	X						0	0	0
JOHN MARK JOHNSON ceo	45 00			X				290,931	0	36,475
DAVID L BYRD coo	45 00			X				214,585	0	29,877
peter M oldham SR VP, General Counsel	45 00			X				169,511	0	28,271
TIMOTHY WEILL SR VP OF FINANCE	45 00			X				159,769	0	19,708
JEFFERY D PARSLEY SR VP OF FINANCIAL DEVEL	45 00			X				124,139	0	22,181
KEITH COSS SR VP OF PEOPLE & STRATE	45 00				X			140,922	0	22,827
michael heilbronn SR VP OF OPERATIONS	45 00				X			152,827	0	26,129
DONALD JONES SR VP OF PROPERTY MANAGE	45 00				X			136,645	0	23,986
HAKAN DARUD HEAD TENNIS PRO	45 00					X		146,211	0	25,405
LISA BECK VP OF SCHOOL AGE SERVICE	45 00					X		115,046	0	16,340
ROBERT W GRAY GROUP VP	45 00					X		117,718	0	14,665
CAROLE CARTER GROUP VP	45 00					X		112,776	0	18,663
Robert Knestrick grouP VP	45 00					X		108,440	0	20,733
Laurel Wilson GrouP VP	45 00					X		104,930	0	20,072
Michael Brennan Group VP	45 00					X		102,133	0	19,969
Maria Wolfe VP of Marketing	45 00					X		102,135	0	14,923

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	**(A) Total expenses**	**(B) Program service expenses**	**(C) Management and general expenses**	**(D) Fundraising expenses**
equipment costs	1,847,736	1,113,457	729,637	4,642
miscellaneous expense	443,942	305,910	128,262	9,770
membership dues	399,659	397,559	0	2,100
assistance, awards, and	216,296	0	0	216,296
Unrelated business inco	4,977	4,977	0	0