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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 SEATTLE

Doing Business As

Number and street (or P O box if mail is not delivered to street address) | Room/suite
909 FOURTH AVENUE

City or town, state or country, and ZIP + 4
SEATTLE, WA 98104

D Employer identification number
91-0482710

E Telephone number
(206) 382-5003

G Gross receipts $ 72,899,523

F Name and address of principal officer
ROBERT B GILBERTSON JR
909 FOURTH AVENUE
SEATTLE, WA 98104

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 SEATTLEYMCA ORG

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1877

M State of legal domicile WA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
BUILDING STRONG KIDS, STRONG FAMILIES AND STRONG COMMUNITIES

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	30
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	30
5	Total number of employees (Part V, line 2a)	5	2,841
6	Total number of volunteers (estimate if necessary)	6	9,534
7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

		Prior Year	Current Year
Revenue			
8	Contributions and grants (Part VIII, line 1h)	25,195,540	27,823,211
9	Program service revenue (Part VIII, line 2g)	34,293,237	36,272,281
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-517,595	-1,225,747
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	216,383	222,502
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	59,187,565	63,092,247
Expenses			
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	444,774	498,726
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)	34,008,382	36,053,335
16a	Professional fundraising fees (Part IX, column (A), line 11e)		0
b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,614,994		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	19,927,270	21,410,329
18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	54,380,426	57,962,390
19	Revenue less expenses Subtract line 18 from line 12	4,807,139	5,129,857

		Beginning of Current Year	End of Year
Net Assets or Fund Balances			
20	Total assets (Part X, line 16)	132,785,703	147,947,398
21	Total liabilities (Part X, line 26)	36,083,755	39,198,783
22	Net assets or fund balances Subtract line 21 from line 20	96,701,948	108,748,615

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

****** | 2010-11-11
Signature of officer | Date

GLENN H TSUGAWA SENIOR VP/CFO
Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶ Jane M Searing	Date	Check if self-empolyed ▶ ☐	Preparer's identifying number (see instructions)
Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ Clark Nuber PS 10900 NE 4th Street Suite 1700 Bellevue, WA 98004			EIN ▶ Phone no ▶ (425) 454-4919

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

BUILDING A COMMUNITY WHERE ALL PEOPLE, ESPECIALLY THE YOUNG, ARE ENCOURAGED TO DEVELOP THEIR FULLEST POTENTIAL IN SPIRIT, MIND, AND BODY STRATEGIC GOALS * PROVIDE OPPORTUNITIES FOR YOUTH AND YOUNG ADULTS WHICH SHAPE VALUES AND ENCOURAGE LIFELONG COMMUNITY SERVICE* SUPPORT AND STRENGTHEN ALL FAMILIES* LEAD AND SUPPORT EFFORTS WHICH PROMOTE HEALTHY LIVING* PROVIDE OLDER ADULTS WITH OPPORTUNITIES TO CREATE HEALTHY AND PRODUCTIVE LIVES FOR THEMSELVES AND THE COMMUNITY* ATTRACT DIVERSE POPULATIONS PARTICIPATING TOGETHER TO CREATE A COMMUNITY WHERE ALL ARE WELCOMEOPERATING PRINCIPLES * FOSTER A SENSE OF BELONGING AND COMMUNITY AMONG MEMBERS* PROMOTE, DEVELOP AND SUPPORT THE VITAL ROLE OF VOLUNTEERS AND STAFF IN THE YMCA* SERVE AS A CATALYST IN ADDRESSING COMMUNITY ISSUES* SECURE AND EFFICIENTLY MANAGE THE FINANCIAL RESOURCES NECESSARY TO ACHIEVE OUR GOALS* SECURE THE FINANCIAL RESOURCES NECESSARY TO ACHIEVE OUR PROGRAM GOALS

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 $ 22,518,815 including grants of $ 15,810) (Revenue $ 22,060,304)

HEALTH & WELLNESS FOR MORE THAN 130 YEARS, THE YMCA OF GREATER SEATTLE HAS UPHELD A COMMITMENT TO HELP PEOPLE OF ALL AGES AND ABILITIES DEVELOP HEALTH IN SPIRIT, MIND AND BODY THE YMCA'S TOTAL HEALTH APPROACH HELPS INDIVIDUALS AND FAMILIES CREATE REALISTIC GOALS FOR SELF-IMPROVEMENT, LEADING TO HEALTHIER, MORE BALANCED LIVES YMCA PROGRAMS EMPHASIZE PREVENTION THROUGH REGULAR EXERCISE, PROPER NUTRITION, STRESS MANAGEMENT AND HEALTH EDUCATION INSTRUCTIONAL AQUATICS AND FITNESS HELP 25,000 PARTICIPANTS DEVELOP HEALTHIER LIFESTYLES THAT NUMBER INCLUDES 14,000 OLDER ADULTS (PER WEEK) PARTICIPATING IN PROGRAMS THAT PROMOTE HEALTHY ACTIVITY, SOCIAL NETWORKS AND SKILL DEVELOPMENT YOUTH SPORTS PROGRAMS PROVIDE THE OPPORTUNITY FOR 9,000 PARTICIPANTS TO ENGAGE IN MEANINGFUL PHYSICAL ACTIVITY YMCA PROGRAMS ARE DESIGNED FOR PEOPLE OF ALL AGES, ABILITIES, FAITHS, ETHNIC GROUPS AND INCOMES YMCAS OFFER A WELCOMING ATMOSPHERE WHERE PARTICIPANTS FEEL COMFORTABLE AND RECEIVE THE SUPPORT THEY NEED TO IMPROVE THEIR HEALTH SERVICES ARE OFFERED AT AFFORDABLE FEES FOR THE COMMUNITY AT-LARGE, WITH FINANCIAL ASSISTANCE AVAILABLE FOR THOSE WHO CANNOT AFFORD THE FULL FEE HEALTH & WELLNESS PROGRAMS SUPPLEMENT THE PROGRAM FEES, GOVERNMENT GRANTS AND CONTRIBUTIONS TO OTHER PROGRAM AREAS APPROXIMATE PARTICIPANTS 2009 97,825

4b (Code) (Expenses $ 13,655,160 including grants of $ 482,916) (Revenue $ 2,552,747)

COMMUNITY/SOCIAL PROGRAMS/YOUTH DEVELOPMENT FOR MORE THAN 130 YEARS, THE YMCA OF GREATER SEATTLE HAS LED THE WAY IN PROVIDING INNOVATIVE PROGRAMS TO BUILD STRONG KIDS, STRONG FAMILIES AND STRONG COMMUNITIES IN THESE PROGRAMS, THE YMCA BUILDS ON PEOPLE'S STRENGTHS, RATHER THAN FOCUSING ON THE DEFICIENCIES IN THEIR LIVES YOUTH DEVELOPMENT PROGRAMS (INCLUDING ENVIRONMENTAL, SERVICE LEARNING, MENTORING, CULTURAL AWARENESS, VIOLENCE REDUCTION AND CIVIC ENGAGEMENT PROGRAMS FOR TEENS AND YOUNG ADULTS) CREATE AN EFFECTIVE FOUNDATION FOR LIFE-LONG LEADERSHIP SKILLS AND AN ETHIC OF SERVICE FOR PARTICIPANTS RESOURCE CENTERS, FAMILY NIGHTS AND PARENT-CHILD PROGRAMS HELP BUILD HEALTHY RELATIONSHIPS, BOTH WITHIN AND AMONG FAMILIES, AND BETTER COMMUNICATIONS SKILLS MORE THAN 6,700 YOUTH-AT-RISK ARE SERVED EACH YEAR WITH EDUCATION AND EMPLOYMENT PROGRAMS, ALONG WITH INNOVATIVE HOUSING PROGRAMS THAT PROVIDE YOUTH, YOUNG ADULTS AND SINGLE PARENTS WITH COMPREHENSIVE SUPPORT SERVICES, INCLUDING CASE MANAGEMENT, MENTAL HEALTH SERVICES AND LIFE-SKILLS TRAINING MANY PROGRAMS IN THIS CATEGORY ARE PROVIDED AT NO CHARGE TO THE PARTICIPANT FINANCIAL ASSISTANCE IS MADE AVAILABLE FOR FEE-BASED PROGRAMS, SO THAT A YOUNG PERSON'S ECONOMIC CIRCUMSTANCES DO NOT PRESENT A BARRIER TO PARTICIPATION CONTRIBUTIONS AND GOVERNMENT GRANTS PROVIDE PRIMARY FUNDING FOR PROGRAM EXPENSES APPROXIMATE PARTICIPANTS 2009 48,028

4c (Code) (Expenses $ 10,842,004 including grants of $) (Revenue $ 7,948,002)

CHILD CARE AND DAY CAMP SAFE, HIGH QUALITY AND AFFORDABLE PROGRAMS PROVIDE PARENTS WITH SERVICES THAT ALLOW THEM TO ATTEND SCHOOL OR WORK TO SUPPORT THEIR FAMILIES FULLY LICENSED INFANT, TODDLER, PRESCHOOL AND SCHOOL AGE PROGRAMS OFFER VALUES-BASED AND EDUCATIONAL OPPORTUNITIES FOR NEARLY 2,000 CHILDREN PER DAY AT 48 CONVENIENT LICENSED LOCATIONS, MAKING THE YMCA THE LARGEST PROVIDER OF CHILD CARE IN WASHINGTON STATE DAY CAMP AND SUMMER ENRICHMENT PROGRAMS, SERVING 2,400 CHILDREN PER WEEK, OFFER ADVENTURES AND LEARNING TO FILL OUT-OF-SCHOOL MONTHS WITH NURTURING AND HEALTHY ACTIVITIES CURRICULUM GOALS PREPARE CHILDREN FOR GREATER SCHOOL SUCCESS BY IMPROVING THEIR PHYSICAL, EMOTIONAL, SOCIAL, MENTAL AND PHYSICAL WELL BEING ANNUALLY, NEARLY 1,500 DIFFERENT YOUNG PEOPLE DIRECTLY BENEFIT FROM FINANCIAL ASSISTANCE TO ENABLE THEIR PARTICIPATION FINANCIAL ASSISTANCE IS MADE POSSIBLE THROUGH CONTRIBUTIONS AND GOVERNMENT GRANTS APPROXIMATE PARTICIPANTS 2009 4,200

4d Other program services (Describe in Schedule O) **See also Additional Data for Description**
(Expenses $ 4,296,959 including grants of $) (Revenue $ 3,711,228)

4e **Total program service expenses** ▶ $ 51,312,938

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	Yes	
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	Yes	
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? **Yes** **No**			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional **12A** 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	Yes	
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	Yes	
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		No
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)*

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**		No
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**		No
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	273		
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	2,841		
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			No
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*	3b			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a			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		Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		Yes	
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			
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 30		
b	Enter the number of voting members that are independent . .	1b 30		
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		No
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		No
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	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	Yes	
	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 ▶ WA

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 ▶

GLENN H TSUGAWA
909 FOURTH AVE
SEATTLE, WA 981041194
(206) 382-4928

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)						(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			
See add'l data										

1b Total . . . . . ▶	1,300,354	0	239,609

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 ▶ 11

			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
GLY CONSTRUCTION PO BOX 6728 BELLEVUE, WA 98008	BUILDING CONTRACTOR	14,085,955
MARKETING INTELLIGENCE 3620 CALIFORNIA AVE SW SEATTLE, WA 98116	ADVERTISING CONSULTANT	522,600
CLEANING SOLUTIONS PO BOX 105 KENT, WA 98305	JANITORIAL SERVICES	395,079
WESTERN HARDWOOD PO BOX 55961 SHORELINE, WA 98155	CONTRACTOR	348,168
RON WALLACE BUILDER INC 2115 ENCHANTED FOREST ROAD EASTBOUND, WA 98245	BUILDING CONTRACTOR	247,866
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 ▶ 10		

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns	1a 1,099,289				
	b	Membership dues	1b				
	c	Fundraising events	1c 24,886				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e 13,871,375				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f 12,827,661				
	g	Noncash contributions included in lines 1a-1f $ 27,502					
	h	**Total.** Add lines 1a-1f		27,823,211			
Program Service Revenue			Business Code				
	2a	MEMBERSHIPS	900,099	19,285,031	19,285,031		
	b	DAY CARE, DAY CAMP	900,099	7,948,002	7,948,002		
	c	RESIDENT CAMP	900,099	3,711,228	3,711,228		
	d	HEALTH & WELLNESS	900,099	2,775,273	2,775,273		
	e	COMMUNITY, SOCIAL	900,099	2,552,747	2,552,747		
	f	All other program service revenue					
	g	**Total.** Add lines 2a–2f		36,272,281			
	3	Investment income (including dividends, interest and other similar amounts)		412,384			412,384
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
			(i) Real / (ii) Personal				
	6a	Gross Rents	98,173 /				
	b	Less rental expenses	/				
	c	Rental income or (loss)	98,173 /				
	d	Net rental income or (loss)		98,173			98,173
			(i) Securities / (ii) Other				
	7a	Gross amount from sales of assets other than inventory	5,866,901 / 2,131,818				
	b	Less cost or other basis and sales expenses	7,908,181 / 1,728,669				
	c	Gain or (loss)	-2,041,280 / 403,149				
	d	Net gain or (loss)		-1,638,131			-1,638,131
Other Revenue	8a	Gross income from fundraising events (not including $ 24,886 of contributions reported on line 1c) See Part IV, line 18	a 36,540				
	b	Less direct expenses	b 33,294				
	c	Net income or (loss) from fundraising events		3,246			3,246
	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 258,215				
	b	Less cost of goods sold	b 137,132				
	c	Net income or (loss) from sales of inventory		121,083			121,083
		Miscellaneous Revenue	Business Code				
	11a						
	b						
	c						
	d	All other revenue					
	e	**Total.** Add lines 11a–11d					
	12	**Total revenue.** See Instructions		63,092,247	36,272,281	0	-1,003,245

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	65,486	65,486		
2	Grants and other assistance to individuals in the U S See Part IV, line 22	419,675	419,675		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	13,565	13,565		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	704,119		704,119	
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	28,553,736	25,651,470	2,007,989	894,277
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	1,731,867	1,584,184	90,152	57,531
9	Other employee benefits	2,220,745	1,832,643	269,155	118,947
10	Payroll taxes	2,842,868	2,595,761	167,962	79,145
11	Fees for services (non-employees)				
a	Management				
b	Legal	42,941		42,941	
c	Accounting	74,543		74,543	
d	Lobbying				
e	Professional fundraising *See Part IV, line 17*				
f	Investment management fees	14,364		14,364	
g	Other	2,985,131	2,206,126	635,072	143,933
12	Advertising and promotion				
13	Office expenses	1,076,022	879,471	174,034	22,517
14	Information technology				
15	Royalties				
16	Occupancy	5,360,000	5,317,273	38,998	3,729
17	Travel	1,200,789	1,038,345	123,739	38,705
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	58,287	29,975	24,371	3,941
20	Interest	361,997	361,997		
21	Payments to affiliates	288,023	269,050	15,644	3,329
22	Depreciation, depletion, and amortization	2,924,603	2,801,545	123,058	
23	Insurance				
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a	PROGRAM SUPPLIES	4,076,797	3,738,803	218,906	119,088
b	PUBLIC RELATIONS	1,788,004	1,662,512	30,047	95,445
c	EQUIPMENT RENTAL	492,736	425,784	62,424	4,528
d	TRAINING	426,057	219,106	178,142	28,809
e	AGENCY DUES	70,570	65,920	3,833	817
f	All other expenses	169,465	134,247	34,965	253
25	**Total functional expenses.** Add lines 1 through 24f	57,962,390	51,312,938	5,034,458	1,614,994
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

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		9,036	1	9,196
	2	Savings and temporary cash investments		13,359,507	2	10,326,046
	3	Pledges and grants receivable, net		6,374,730	3	6,471,981
	4	Accounts receivable, net		1,479,980	4	1,750,126
	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		2,857,819	7	2,541,844
	8	Inventories for sale or use		71,058	8	65,358
	9	Prepaid expenses and deferred charges		504,583	9	489,944
	10a	Land, buildings, and equipment cost or other basis *Complete Part VI of Schedule D*	10a 119,372,377			
	b	Less accumulated depreciation	10b 27,483,892	75,959,314	10c	91,888,485
	11	Investments—publicly traded securities		21,484,518	11	23,365,530
	12	Investments—other securities See Part IV, line 11		9,270,617	12	9,270,600
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		1,414,541	15	1,768,288
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		132,785,703	16	147,947,398
Liabilities	17	Accounts payable and accrued expenses		2,494,936	17	3,306,193
	18	Grants payable			18	
	19	Deferred revenue		3,088,931	19	5,329,005
	20	Tax-exempt bond liabilities		30,000,000	20	30,000,000
	21	Escrow or custodial account liability *Complete Part IV of Schedule D*		77,371	21	84,043
	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			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities Complete Part X of Schedule D		422,517	25	479,542
	26	**Total liabilities.** Add lines 17 through 25		36,083,755	26	39,198,783
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		87,167,130	27	95,789,268
	28	Temporarily restricted net assets		3,866,190	28	5,675,062
	29	Permanently restricted net assets		5,668,628	29	7,284,285
		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		96,701,948	33	108,748,615
	34	Total liabilities and net assets/fund balances		132,785,703	34	147,947,398

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?	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 SEATTLE

Employer identification number
91-0482710

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 ")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public Support.** Subtract line 5 from line 4						

Section B. Total Support

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

12 Gross receipts from related activities, etc (See instructions) **12**

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

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) **14**

15 Public Support Percentage for 2008 Schedule A, Part II, line 14 **15**

16a **33 1/3% support test—2009.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

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 ")	17,482,061	13,366,682	18,744,481	25,195,540	27,823,211	102,611,975
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	37,595,998	40,394,845	41,075,055	34,293,237	36,272,281	189,631,416
3 Gross receipts from activities that are not an unrelated trade or business under section 513	280,962	279,030	287,612	254,354	258,215	1,360,173
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	55,359,021	54,040,557	60,107,148	59,743,131	64,353,707	293,603,564
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	1,010,000					1,010,000
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						0
c Add lines 7a and 7b	1,010,000					1,010,000
8 **Public Support** (Subtract line 7c from line 6)						292,593,564

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	55,359,021	54,040,557	60,107,148	59,743,131	64,353,707	293,603,564
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	749,266	1,152,527	1,695,291	1,153,754	510,557	5,261,395
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	749,266	1,152,527	1,695,291	1,153,754	510,557	5,261,395
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	7,214		670		3,246	11,130
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)	56,115,501	55,193,084	61,803,109	60,896,885	64,867,510	298,876,089

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	97 900 %
16	Public support percentage from 2008 Schedule A, Part III, line 15	16	97 650 %

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2009** (line 10c column (f) divided by line 13 column (f))	17	1 760 %
18	Investment income percentage from **2008** Schedule A, Part III, line 17	18	1 920 %

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

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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 SEATTLE

Employer identification number
91-0482710

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	10,442,239	16,770,960			
b Contributions	620,092	458,165			
c Investment earnings or losses	2,560,539	-5,232,519			
d Grants or scholarships	27,300	26,875			
e Other expenditures for facilities and programs	643,979	593,838			
f Administrative expenses		933,654			
g End of year balance	12,951,591	10,442,239			

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

- a Board designated or quasi-endowment ▶ 50 890 % %
- b Permanent endowment ▶ 49 110 % %
- 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)		No
(ii) related organizations	3a(ii)		No
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		14,618,515		14,618,515
b Buildings		93,508,757	21,300,849	72,207,908
c Leasehold improvements				
d Equipment		1,868,184	1,486,383	381,801
e Other		9,376,921	4,696,660	4,680,261
Total. Add lines 1a-1e *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)* ▶				91,888,485

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 INVESTMENT IN 909 4TH YMCA LP	9,109,140	F
NONMARKETABLE INVESTMENTS	161,460	F
Total. *(Column (b) should equal Form 990, Part X, col (B) line 12)* ▶	9,270,600	

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	
SPLIT INTEREST AGREEMENTS	479,542
Total. *(Column (b) should equal Form 990, Part X, col (B) line 25)* ▶	479,542

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	63,092,247
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	57,962,390
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	5,129,857
4	Net unrealized gains (losses) on investments	4	7,211,084
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	116,099
9	Total adjustments (net) Add lines 4 - 8	9	7,327,183
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	12,457,040

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	70,468,868
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	7,211,084		
b	Donated services and use of facilities	2b	30,508		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d	101,735		
e	Add lines **2a** through **2d**			2e	7,343,327
3	Subtract line **2e** from line **1**			3	63,125,541
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	-33,294		
c	Add lines **4a** and **4b**			4c	-33,294
5	Total Revenue Add lines **3** and **4c.** (This should equal Form 990, Part I, line 12)			5	63,092,247

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

1	Total expenses and losses per audited financial statements			1	58,011,828
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a	30,508		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIV)	2d	33,294		
e	Add lines **2a** through **2d**			2e	63,802
3	Subtract line **2e** from line **1**			3	57,948,026
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	14,364		
b	Other (Describe in Part XIV)	4b			
c	Add lines **4a** and **4b**			4c	14,364
5	Total expenses Add lines **3** and **4c.** (This should equal Form 990, Part I, line 18)			5	57,962,390

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 IV, Line 2b		THERE ARE THREE CUSTODY ACCOUNTS FOR ACTIVITIES OF THREE NORTHWEST YMCA GROUPS NORTHWEST YMCA ASSOCIATION OF PROFESSIONAL DIRECTORS, WASHINGTON YMCA STATE ALLIANCE, AND DISTRICT 2 YMCA YOUTH AND GOVERNMENT FUNDS ARE RECEIVED FROM AREA-WIDE YMCAS TO FACILITATE COORDINATION OF AREA-WIDE PROGRAMS
Part V, Line 4	Description of Intended Use of Endowment Funds	YMCA OF GREATER SEATTLE ENDOWMENT FUNDS ARE INVESTED TO RETAIN 'PURCHASING POWER' OF FUNDS OVER TIME INVESTMENT OF FUNDS AND DISTRIBUTIONS ARE GUIDED BY DONOR WISHES, BOARD DIRECTION AND BOARD POLICY MOST ENDOWMENT FUNDS ARE CREATED TO SUPPORT SPECIFIC PROGRAMS, POPULATIONS OR COMMUNITIES SOME ENDOWMENT FUNDS ARE CREATED TO MAINTAIN OR ENHANCE FIXED ASSETS
Part XI, Line 8 - Other Adjustments		CHANGE IN VALUE OF SPLIT INTEREST AGREEMENT 116099
Part XII, Line 2d - Other Adjustments		CHANGE IN VALUE OF SPLIT INTEREST AGREEMENT 116099 INVESTMENT EXPENSES -14364
Part XII, Line 4b - Other Adjustments		SPECIAL EVENT EXPENSES -33294
Part XIII, Line 2d - Other Adjustments		SPECIAL EVENT EXPENSES 33294

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SCHEDULE F (Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.
▶ 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 SEATTLE

Employer identification number
91-0482710

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1 **For grantmakers.** 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 **For grantmakers.** Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States

3 Activites per Region (Use Schedule F-1 (Form 990) if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SOUTH AMERICA	0	0	GRANTS TO RECIPIENTS LOCATED IN THE REGION		5,000
Sub-Saharan Africa	0	0	GRANTS TO RECIPIENTS LOCATED IN THE REGION		8,565
Totals . . . . . ▶	0	0			13,565

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than $5,000. Check this box if no one recipient received more than $5,000 . . . . . ▶ ☐
Use Schedule F-1 (Form 990) if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	IMPACT POVERTY AND DISADVANTAGED IN NIGERIA	8,565	WIRE TRANSFER			

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . ▶ 1

3 Enter total number of other organizations or entities . . . . . ▶ 0

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Part IV Supplemental Information

Complete this part to provide the information required in Part I, line 2, and any additional information.

Identifier	ReturnReference	Explanation
Procedure for Monitoring Grants Outside the U S		Schedule F, Part I, Line 2 METHODS FOR MONITORING USE OF GRANT FUNDS INCLUDE DIRECT CONVERSATIONS WITH GRANTEE LEADERSHIP, DIRECT OBSERVATION (VISITS) AND REVIEW OF ANNUAL FINANCIAL MATERIAL

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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 SEATTLE

Employer identification number
91-0482710

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
Total . . . . . ▶						

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

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 GOLF TOURNAMENTS (event type)	(b) Event #2 OTHER EVENTS (event type)	(c) Other Events (total number)	(d) Total Events (Add col (a) through col (c))
Revenue	1 Gross receipts	55,743	5,683		61,426
	2 Less Charitable contributions	22,703	2,183		24,886
	3 Gross income (line 1 minus line 2)	33,040	3,500		36,540
Direct Expenses	4 Cash prizes				
	5 Non-cash prizes	9,179			9,179
	6 Rent/facility costs				
	7 Food and beverages	7,349			7,349
	8 Entertainment	13,680			13,680
	9 Other direct expenses	1,014	2,072		3,086
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				33,294
	11 Net income summary Combine lines 3, column d, and line 10 ▶				3,246

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 ▶			
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			
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 ▶ $			

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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 SEATTLE

Employer identification number
91-0482710

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 THE USA101 NORTH WACKER DRIVE CHICAGO,IL 60606	363259696	501(C)(3)	17,000				SUPPORT FOR STAFF DEVELOPMENT AND YMCA USA GLOBAL WORK
YOUTH MEDIA DIRECT 4408 DELRIDGE WAY SEATTLE,WA 98106	680669319	501(C)(3)	7,000				SUPPORT FOR YOUTH DEVELOPMENT WORK

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

3 Enter total number of other organizations . . . . . ▶ 0

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
CASH FOR LOW INCOME YOUNG ADULTS	108	7,823			
CLOTHING FOR LOW INCOME YOUNG ADULTS	112		20,294	FMV	WORK CLOTHING
EDUCATION FOR LOW INCOME YOUNG ADULTS	109		50,820	FMV	TUITION ASSISTANCE, BOOKS, ETC
FOOD FOR LOW INCOME YOUNG ADULTS	77		13,802	FMV	GROCERIES
HOUSING FOR LOW INCOME YOUNG ADULTS	153		187,976	FMV	HOUSING ASSISTANCE
SCHOLARSHIPS	26		35,800	FMV	SCHOLARSHIPS FOR COLLEGE OR JUNIOR COLLEGE
TRANSPORTATION FOR LOW INCOME YOUNG ADULTS	430		103,160	FMV	BUS PASSES, BUS TICKETS, ETC

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
Procedure for Monitoring Grants in the U S	Part I, Line 2	Schedule I, Part I, Line 2 SELECTED ENDOWMENT FUNDS PROVIDE FOR EDUCATION SCHOLARSHIPS FOR QUALIFYING INDIVIDUALS A COMMITTEE OF VOLUNTEERS AND STAFF MEET AND REVIEW APPLICATIONS AND MEET WITH CANDIDATES TO DETERMINE ELIGIBILITY AS DEFINED BY EACH FUND

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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 SEATTLE

Employer identification number
91-0482710

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**	Yes	
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**	Yes	
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?	**4c**		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	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?	**5b**		No
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	**6a**		No
b	Any related organization?	**6b**		No
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**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				
ROBERT B GILBERTSON JR	(i)	265,237	0	0	31,828	10,516	307,581	0
	(ii)	0	0	0	0	0	0	0
SUE CAMOU ARRANT	(i)	174,501	0	0	20,940	5,703	201,144	0
	(ii)	0	0	0	0	0	0	0
GLENN H TSUGAWA	(i)	159,571	0	0	19,149	16,674	195,394	0
	(ii)	0	0	0	0	0	0	0
PETER MORRIS	(i)	152,741	0	0	18,329	11,322	182,392	0
	(ii)	0	0	0	0	0	0	0
JANE BRENNEMAN	(i)	139,899	0	0	16,788	10,667	167,354	0
	(ii)	0	0	0	0	0	0	0
ALICE KADERLAN	(i)	136,783	0	0	16,414	9,908	163,105	0
	(ii)	0	0	0	0	0	0	0
TERRANCE POLLARD	(i)	101,722	0	35,000	16,407	4,589	157,718	0
	(ii)	0	0	0	0	0	0	0
GARRY WYCKOFF	(i)	134,900	0	0	16,188	14,187	165,275	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
	Part I, Line 1a	SPECIFIED AND LIMITED SPOUSE TRAVEL FOR THE CEO IS TREATED AS TAXABLE COMPENSATION PARTICIPATION IN BUSINESS ORIENTED SOCIAL AND SERVICE CLUBS IS ENCOURAGED TO DEVELOP IMPORTANT COMMUNITY RELATIONSHIPS SOCIAL CLUB USE IS PRIMARILY FOR BUSINESS MEETINGS
	Part I, Line 4a	TERRANCE POLLARD RECEIVED $35,000 SEVERANCE PER POLICY

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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 SEATTLE

Employer identification number
91-0482710

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	WA STATE HOUSING FINANCE COMMISSION	91-1874730	93978LES1	09-01-2007	30,000,000	CONSTRUCTION, RENOVATION, EXPANSION		X		X

Part II Proceeds

		A	B	C	D	E
1	Total proceeds of issue	30,000,000				
2	Gross proceeds in reserve funds					
3	Proceeds in refunding or defeasance escrows					
4	Other unspent proceeds					
5	Issuance costs from proceeds	342,056				
6	Working capital expenditures from proceeds					
7	Capital expenditures from proceeds	29,657,944				
8	Year of substantial completion	2009				

		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		B		C		D		E	
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	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 ▶										
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 ▶										
6	Total of lines 4 and 5										
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		B		C		D		E	
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	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	10 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									

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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 SEATTLE

Employer identification number
91-0482710

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	X	1	2,800	MARKET COMPARISON
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				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ▶ (SUPPLIES)	X	25	24,702	COST/SELLING PRICE
26	Other ▶( )				
27	Other ▶( )				
28	Other ▶ ( )				

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

			Yes	No
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	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	Yes	
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
Method for Determining Number of Contributors	Part I, Column (b)	MOST CONTRIBUTIONS ARE GOODS OR SERVICES PROVIDED BY REGULAR VENDORS CONTRIBUTIONS APPEAR AS REDUCTION OF AMOUNT DUE ON VENDOR INVOICES

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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 SEATTLE

Employer identification number
91-0482710

Identifier	Return Reference	Explanation
Form 990, Part III, line 3	Changes in Program Services	DURING FALL OF 2009 THE HIGHLINE YMCA MOVED INTO THE NEW MATT GRIFFIN YMCA DURING THE FALL OF 2009, THE LAKE HEIGHTS YMCA MOVED INTO THE NEW COAL CREEK FAMILY YMCA AS A RESULT THE YMCA OF GREATER SEATTLE HAS BEEN ABLE TO GREATLY EXPAND SQUARE FOOTAGE AND COMMUNITY SERVICE CAPACITY IN SOUTH AND EAST KING COUNTY, RESPECTIVELY
Form 990, Part VI, Section A, line 2		MATT GRIFFIN AND JANE L LEWIS - BUSINESS RELATIONSHIP
Form 990, Part VI, Section A, line 6		YMCA OF GREATER SEATTLE HAS CORPORATE MEMBERS WHO SERVE AS THE BOARD OF DIRECTORS THE CORPORATE MEMBERS HAVE VOTING RIGHTS
Form 990, Part VI, Section A, line 7a		THE CORPORATE MEMBERS SERVE AS THE BOARD OF DIRECTORS AND PARTICIPATE IN THE ELECTION OF THE MEMBERS OF THE GOVERNING BODY
Form 990, Part VI, Section B, line 11		THE AUDIT COMMITTEE OF THE GOVERNING BODY REVIEWED THE FORM 990 AND A COPY OF THE FORM 990 WAS MADE AVAILABLE TO EACH MEMBER OF THE GOVERNING BODY PRIOR TO IT BEING FILED
Form 990, Part VI, Section B, line 12c		IDENTIFIED SIGNIFICANT PARTIES ARE REQUIRED TO ANNUALLY COMPLETE A CONFLICT OF INTEREST QUESTIONNAIRE THAT IS SUBMITTED TO AND REVIEWED BY THE AUDIT COMMITTEE WHERE A CONFLICT OF INTEREST IS DETERMINED TO EXIST, THE YMCA SHALL NOT ENTER INTO THE PROPOSED CONTRACT, TRANSACTION OR ARRANGEMENT UNLESS THE BOARD HAS COMPLIED WITH THE FOLLOWING A THE CHAIRPERSON OF THE BOARD SHALL, IF APPROPRIATE, APPOINT A DISINTERESTED PERSON OR COMMITTEE TO INVESTIGATE ALTERNATIVES TO THE PROPOSED CONTRACT, TRANSACTION OR ARRANGEMENT B AFTER EXERCISING DUE DILIGENCE, THE BOARD SHALL DETERMINE WHETHER THE YMCA CAN, WITH REASONABLE EFFORTS, GET A MORE ADVANTAGEOUS CONTRACT, TRANSACTION OR ARRANGEMENT FROM A PERSON OR ENTITY WITHOUT A CONFLICT OF INTEREST C IF A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT IS NOT REASONABLY POSSIBLE, THE BOARD SHALL DETERMINE BY A MAJORITY VOTE OF THE DISINTERESTED DIRECTORS WHETHER THE TRANSACTION OR ARRANGEMENT IS IN THE YMCA'S BEST INTEREST, FOR ITS OWN BENEFIT, AND WHETHER IT IS FAIR AND REASONABLE IN CONFORMITY WITH THE ABOVE DETERMINATION, THE BOARD SHALL MAKE ITS DECISION AS TO WHETHER TO ENTER INTO THE CONTRACT, TRANSACTION OR ARRANGEMENT
Form 990, Part VI, Section B, line 15		YMCA OF THE USA, USING AN INDEPENDENT CONSULTANT, STUDIES YMCA CEO SALARIES AND COMPARES THEM TO OTHER COMPARABLE INDUSTRIES YMCA OF GREATER SEATTLE ACQUIRES SEATTLE MARKET AND COMPARABLE INDUSTRY COMPENSATION DATA THE HR COMMITTEE OF THE BOARD OF DIRECTORS ENGAGES A CONSULTANT ANNUALLY TO PERFORM AN 'EXCESS COMPENSATION' SURVEY THIS PROCESS WAS LAST PERFORMED IN THE SPRING OF 2008 AND SPRING OF 2009 AT THE HIRE OF A CEO, THE COMPENSATION PACKAGE GOES TO THE BOARD FOR APPROVAL,
Form 990, Part VI, Section C, line 19		GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE ON REQUEST FORM 990 IS POSTED ON GUIDESTAR

Identifier	Return Reference	Explanation
FORM 990, PART I, LINE 6		VOLUNTEERS FOR THE YMCA OF GREATER SEATTLE SERVE IN MANY WAYS POLICY VOLUNTEERS SERVE ON COMMITTEES AND BOARDS FUNDRAISING VOLUNTEERS SUPPORT EFFORTS TO RAISE FUNDS TO FURTHER THE ORGANIZATION'S EXEMPT PURPOSE THE LARGEST NUMBER OF VOLUNTEERS DIRECTLY SUPPORT PROGRAMS AND EVENTS DELIVERED BY THE YMCA OF GREATER SEATTLE VOLUNTEER COUNT IS A COMPILATION OF DATA FROM ALL PROGRAMS AND ALL BRANCHES OF THE YMCA OF GREATER SEATTLE

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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 SEATTLE

Employer identification number
91-0482710

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

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
909 4TH YMCA LIMITED PARTNERSHIP 909 FOURTH AVENUE SEATTLE, WA98104 91-1899977	PROVIDE LOW-INCOME HOUSING	WA	N/A	RELATED	-7	9,109,177		No		Yes	

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**	**No**
b	Gift, grant, or capital contribution to other organization(s)	**1b**	**No**
c	Gift, grant, or capital contribution from other organization(s)	**1c**	**No**
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**	**Yes**
k	Performance of services or membership or fundraising solicitations for other organization(s)	**1k**	**Yes**
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**	**No**
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)			
(2)			
(3)			
(4)			
(5)			
(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? Yes	(d) No	(e) Share of end-of-year assets	(f) Disproprtionate allocations? Yes	(f) No	(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) General or managing partner? Yes	(h) No

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
PROGRAM SUPPLIES	4,076,797	3,738,803	218,906	119,088
PUBLIC RELATIONS	1,788,004	1,662,512	30,047	95,445
EQUIPMENT RENTAL	492,736	425,784	62,424	4,528
TRAINING	426,057	219,106	178,142	28,809
AGENCY DUES	70,570	65,920	3,833	817

Form 990, Part VIII - Statement of Revenue - 2a - 2g Program Service Revenue -

	Business Code	(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
MEMBERSHIPS	900,099	19,285,031	19,285,031		
DAY CARE, DAY CAMP	900,099	7,948,002	7,948,002		
RESIDENT CAMP	900,099	3,711,228	3,711,228		
HEALTH & WELLNESS	900,099	2,775,273	2,775,273		
COMMUNITY, SOCIAL	900,099	2,552,747	2,552,747		

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			
MILDRED W OLLEE DIRECTOR	1 00	X						0	0	0
MARK A OWEN DIRECTOR	1 00	X						0	0	0
ELLIOTT PIERCE DIRECTOR	1 00	X						0	0	0
PATRICIA RYAN DIRECTOR	1 00	X						0	0	0
GREG SHAW DIRECTOR	1 00	X						0	0	0
PETER A SHIMER DIRECTOR	1 00	X						0	0	0
MOLLY STEARNS DIRECTOR	1 00	X						0	0	0
TREVOR STUART DIRECTOR	1 00	X						0	0	0
MARK N TABBUTT DIRECTOR	1 00	X						0	0	0
DAVID H WRIGHT DIRECTOR	1 00	X						0	0	0
ROBERT B GILBERTSON JR PRESIDENT & CEO	40 00			X				265,237	0	42,344
SUE CAMOU ARRANT SVP & COO	40 00			X				174,501	0	26,643
GLENN H TSUGAWA SVP & CFO	40 00			X				159,571	0	35,823
PETER MORRIS SVP PROPERTIES	40 00					X		152,741	0	29,651
JANE BRENNEMAN SVP HUMAN RESOURCES	40 00					X		139,899	0	27,455
ALICE KADERLAN SVP MARKETING	40 00					X		136,783	0	26,322
TERRANCE POLLARD BRANCH EXECUTIVE	40 00					X		136,722	0	20,996
GARRY WYCKOFF SVP FINANCIAL DVLP	40 00					X		134,900	0	30,375

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			
JANE L LEWIS CHAIR	3 00	X		X				0	0	0
BARBARA J DINGFIELD VICE CHAIR	3 00	X		X				0	0	0
CAROLYN S KELLY VICE CHAIR	3 00	X		X				0	0	0
STEPHEN V SUNDBORG S J VICE CHAIR	3 00	X		X				0	0	0
NORMAN B RICE PAST CHAIR	3 00	X		X				0	0	0
JOHN F VYNNE TREASURER	3 00	X		X				0	0	0
H STEWART PARKER ASSISTANT TREASURER	3 00	X		X				0	0	0
NANCY J CHO SECRETARY	3 00	X		X				0	0	0
MILLER ADAMS DIRECTOR	1 00	X						0	0	0
DOUGLAS T BOYDEN DIRECTOR	1 00	X						0	0	0
CHRIS CARR DIRECTOR	1 00	X						0	0	0
THOMAS W CASEY DIRECTOR	1 00	X						0	0	0
RICHARD J CONRAD DIRECTOR	1 00	X						0	0	0
DIANE DEWBREY DIRECTOR	1 00	X						0	0	0
DOROTHY V FULLER DIRECTOR	1 00	X						0	0	0
MATT GRIFFIN DIRECTOR	1 00	X						0	0	0
CATHI HATCH DIRECTOR	1 00	X						0	0	0
JAMES HEREFORD DIRECTOR	1 00	X						0	0	0
PETER JOERS DIRECTOR	1 00	X						0	0	0
HONORABLE RICHARD JONES DIRECTOR	1 00	X						0	0	0
TOD LEIWEKE DIRECTOR	1 00	X						0	0	0
SCOTT LUTTINEN DIRECTOR	1 00	X						0	0	0
CANDY S MARSHALL DIRECTOR	1 00	X						0	0	0
MICHAEL MCQUAID DIRECTOR	1 00	X						0	0	0
ALLIE R MYSLIWY DIRECTOR	1 00	X						0	0	0

Additional Data

Software ID:
Software Version:
EIN: 91-0482710
Name: YOUNG MEN'S CHRISTIAN ASSOCIATION OF SEATTLE

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

4d. Other program services

(Code) (Expenses $ 4,296,959 including grants of $) (Revenue $ 3,711,228)

RESIDENT CAMPS SINCE HOLDING OUR COMMUNITY'S FIRST ORGANIZED SUMMER CAMP FOR BOYS IN 1891, THE YMCA OF GREATER SEATTLE HAS BEEN PRACTICALLY SYNONYMOUS WITH CAMPING YMCA CAMP COLMAN AND CAMP ORKILA PROVIDE YEAR-ROUND OUTDOOR EDUCATION AND RECREATION FOR 21,500 CHILDREN, TEENS, ADULTS AND FAMILIES IN RESIDENTIAL CAMP SETTINGS PROGRAMS EMPHASIZE POSITIVE VALUES, MENTAL DEVELOPMENT, SPIRITUAL AWARENESS, PHYSICAL WELL-BEING, LEADERSHIP AND TEAMWORK SKILLS, INDEPENDENCE, SOCIAL SKILLS AND A RESPECT FOR THE NATURAL ENVIRONMENT ANNUALLY, NEARLY 1,850 DIFFERENT YOUNG PEOPLE RECEIVE FINANCIAL ASSISTANCE TO ENABLE THEIR PARTICIPATION IN SUMMER CAMP AND OUTDOOR ENVIRONMENTAL EDUCATION PROGRAMS FINANCIAL ASSISTANCE IS MADE POSSIBLE THROUGH CONTRIBUTIONS APPROXIMATE PARTICIPANTS 2009 21,500