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Return of Organization Exempt From Income Tax

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

OMB No 1545-0047 2009

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

	For th	ne 2009 calen	dar year,	or tax year beginnin	g Apr 1	, 2009	<u>, and endi</u>	ng Mar	31		, 2010		
В	Check i	f applicable.	.	C Name of organization	1				D Employ	er Iden	tification Nui	nber	
	Ad	ldress change	Please use IRS label		ISTIAN ASSOCIATION	OF FORT WORT	TH & TARRA	NT COUNTY	75-	0829	389		
	Na	ime change	or print or type.	Number and street (o	rPO box if mail is not deli	vered to street a	ddr) Room/	suite	E Telepho	one nun	nber		
	In	tial return	See specific	512 W. 4TH S	TREET				(81	7) 3	32-619	1	
	∏ _{Те}	rmination	Instruc- tions.	City, town or country		State	ZIP code +	4	,				
	\vdash	nended return		FORT WORTH		TX	76102		G Gross r	eceints	\$ 3,508	. 912	
	=	plication pending	F Name a	and address of principal off	ıcer			H(a) Is this	a group retur				X No
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<u> </u>				FORTWORTH.OR		/(a)(1) 01	327	-					
			_		-	1.			exemption ni				
K		of organization	X Corpora	ation Trust A	ssociation Other	<u> Ir.</u>	Year of Forma	ation 190	/ MT S	State of	legal domicile	e TX	
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					ng body (Part VI, line			ore than 2	.5 /0 01 113		34		
%					the governing body		e 1b)			4	34		
₩	5	Total number	of emplo	yees (Part V, line 2	a)		•			5	112		
	6	Total number	of volunt	eers (estimate if ned	cessary)					6	265		
DELCHILL		-			m Part VIII, Icolumn					7 a			0.
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M)								P	rior Year		Curr	ent Yea	ır
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(III)					5, 6d, 8c, 9c, 10c, a				169,1			79,5	
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ø	15	Salaries, other	er comper	isation, employee be	enefits (Part IX, colui	mn (A), lınes	5-10)	2	,485,2	50.	2,	472,9	68.
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Œ				IX, column (A), lines				-	990,2	80.		941,1	82.
		•			ıal Part IX, column (A	1) line 25)	•	3	,475,5			436,1	
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Net Assets or Fund Balances	20	Total assats	(Dort V. Iv	no 16)					nning of Y			of Year	
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	rt II			nces. Subtract line 2	21 from line 20			3	,152,1	74.	3,	000,0	35.
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May	the II	RS discuss th	is return v	with the preparer sh	own above? (see ins	tructions)		<u>.</u>			Yes	5	No
BA	A For	Privacy Act a	and Paper	work Reduction Ac	Notice, see the sep	arate instruc	tions.	Ca	TEEA0101	07/20	//09 Foi	rm 990 ((2009)

Form	990 (20	009)	YOUNG WOMEN	S CHRISTIAN AS	SOCIATIO	N OF FOR	RT WORTH	i & TARR	ANT COUNTY	t		_	75-0	8293	89		Page 2
Par	t III	Sta	tement of P	rogram Sei	vice A	ccomp	lishm	ents									
1	Briefly	descri	be the organiz	ation's mission	1'							_					
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Form 990 (2009) YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF FORT WORTH & TARRANT COUNTY

Part IV

	•		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	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4	х	
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		_x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		_x_
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		x
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	х	
11	Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VII, IX, or X as applicable	11	х	
•	Did the organization report an amount for land, buildings and equipment in Part X, line 10? 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			Ø-1
	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		\$ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	
	Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12		x
12 <i>F</i>	AWas the organization included in consolidated, independent audited financial statement for the tax year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional Yes No 12 A X		. Sec. 2	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States? .	14a		<u> </u>
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	_	<u>x</u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II	15		<u>x</u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III	16		<u>x</u> _
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	х	
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	x	
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		x
20	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		<u>x</u>

Form 990 (2009) YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF FORT WORTH & TARRANT COUNTY

Partition Checklist of Required Schedules (continued)

. 80.	Control of the date of the dat			
	•		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		х
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		_x
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete			
	Schedule J	23		X
24	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25	24a		x
ı	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
1	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25	a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		х
ı	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		x
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transation 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		<u> </u>
١	b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV.	28b		х
•	c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV			<u>x</u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
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		_x_
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		<u>x</u>
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	х	
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	х	
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		<u>x</u>
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		<u>x</u>
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	x	

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Form 990 (2009)

Form 990 (2009) YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF FORT WORTH & TARRANT COUNTY

Part V Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No
1:	a 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 10	*,		
i	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		* ***	Ì
•	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	X	ļ
2	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		Šar	
21	o If at least one is reported on line 2a, did the organization file all required federal employment tax returns?.	2b	Х	ĺ
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	∢,		.9
3	a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		x
ı	If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule Q	3 b		
4	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		х
ı	b If 'Yes,' enter the name of the foreign country: ▶	ï	,	
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts	أشد	» 、 »	٠
5	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		х
ı	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		x
•	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5с		
6	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		х
1	o If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?	6Ь		
7	Organizations that may receive deductible contributions under section 170(c).	49	No.	<i>\$</i> .
á	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	x	
ı	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b	х	
•	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7с		х
	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		х
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
ı	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	<u>.</u>	Ĺ	
9	Sponsoring organizations maintaining donor advised funds.	- 2	-	
	a Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make any distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter:		y , w)	14 m
	a Initiation fees and capital contributions included on Part VIII, line 12	ł	<i>*</i>	
	Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		١, ١	ı İ
	Section 501(c)(12) organizations. Enter:	- 3,		,
	a Gross income from other members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	**		
12:	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	o If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b	5		

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Form **990** (2009)

Form 990 (2009) YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF FORT WORTH & TARRANT COUNTY 75-0829389 Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to līne 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 1Ы34 **b** Enter the number of voting members that are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 X officer, director, trustee or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 3 X 4 Did the organization make any significant changes to its organizational documents 4 X since the prior Form 990 was filed? Did the organization become aware during the year of a material diversion of the organization's assets? 5 6 6 Does the organization have members or stockholders? X 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 7 a **b** Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b X Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 8a X b Each committee with authority to act on behalf of the governing body? 86 X Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O 9 X Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Νo 10a 10a Does the organization have local chapters, branches, or affiliates? Х 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? 10 b 11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? 11 Х 11 A Describe in Schedule O the process, if any, used by the organization to review this Form 990.

12a Does the organization have a written conflict of interest policy? If 'No,' go to line 13 X 12a b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise 12b to conflicts? X c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes.' describe in Schedule O how this is done 12c Х 13 Does the organization have a written whistleblower policy? 13 X 14 Does the organization have a written document retention and destruction policy? 14 Х 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 X b Other officers of key employees of the organization 15b X If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable X 16a entity during the year?... b If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosures NONE List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available Check all that apply. Another's website X Upon request 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 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: 512 W. 4TH STREET FORT WORTH TX 76102

Form 990 (2009)

75-0829389

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YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF FORT WORTH & TARRANT COUNTY Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated

Employees, and Independent Contractors

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

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organizations's tax year. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees.
 See instructions for definition of 'key employees.'
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if the organization did no	т	sate a	any (_	officer	, dır	1			
(A)	(B)	(c) Position (check all that apply)						(D)	(E)	(F)	
Name and Title	Average hours		т—		Τ.	· · ·	,	Reportable compensation from	Reportable compensation from	Estimated amount of other	
	per week	adividual trustee or director	anstitutional foistee	Officer	key employee	Higl est avingensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
LYNDA TIEDTKE									-		
PRESIDENT	2.00	X		X				0.	0.	0.	
WILLA LISTER	ļ										
PAST PRESIDENT	1.00	х		X				0.	0.	0.	
MARIAN ROSS											
1ST VICE PRESIDENT	1.00	X		х				0.	0.	0.	
KATHY SPICER											
2ND VICE PRESIDENT	2.00	Х		X				0.	0.	0.	
PAULA HUNTER-PERKINS											
3RD VICE PRESIDENT	1.00	X		X				0.	0.	0.	
MARY JO COOK											
TREASURER	1.00	х		Х				0.	0.	0.	
BARBARA NEELY				İ							
SECRETARY	1.00	х		Х				0.	0.	0.	
DIANN BROWN											
DIRECTOR	1.00	x						0.	0.	0.	
SHAWN CURTIS											
DIRECTOR	1.00	X	L		L			0.	0.	0.	
NIKKI DAVIS						٠					
DIRECTOR	1.00	Х						0.	0.	0.	
DANNA DIAZ											
DIRECTOR	1.00	х						0.	0.	0.	
SHERRIE DOMINGUEZ											
DIRECTOR	1.00	х			L			0.	0.	0.	
KATHY DORCHESTER											
DIRECTOR	1.00	х	_					0.	0.	0.	
SHELBY DOUGHERTY											
DIRECTOR	1.00	х						0.	0.	0.	
MARY EVERITT					l						
DIRECTOR	1.00	Х					L.	0.	0.	0.	
BARBARA FAGGART	1								j		
DIRECTOR	1.00	х						0.	0.	0.	
CAROLYN GRUENSFELDER											
DIRECTOR	2.00	х		<u> </u>	<u> </u>			0.	0.	0.	

TEEA0107 11/10/09

Part VIII Section A. Officers, Directors, Trus							an	d Highest Con	npensated Emp	loyees (cont.)
(A)	(B)				c)			(D)	(E)	(F)
Name and Title	Average hours per week		_	Officer		a Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
ESTERLENE GRIFFIN DIRECTOR	1.00	x						0.	0.	0.
FRANCYNE HUCKABY										
DIRECTOR	1.00	x						0.	0.	0.
LINDA HURT										
DIRECTOR	1.00	x		ł				0.	0.	0.
PATTI JOHNSON										
DIRECTOR	1.00	x						0.	0.	0.
NATEASIE KENDRICK										
DIRECTOR	1.00	x						0.	0.	0.
MARY ANN KLEUSER										
DIRECTOR	1.00	x						0.	0.	0.
PEGGY LUCHT-RIXIE	_									
DIRECTOR	1.00	X	ļ		<u> </u>	<u> </u>	_	0.	0.	0.
GINNY MARKLEY	_		ļ	İ	ŀ					
DIRECTOR	1.00	X		ļ	<u> </u>	ļ		0,	0.	
JOAN MASON					}					
DIRECTOR	1.00	X			_	_		0.	0.	0.
MELANIE NIESWIADOMY	_									
DIRECTOR	1.00	X	-	ļ	₩	₩		0.	0.	0.
KATHRYN ROTTER			İ							_
DIRECTOR	1.00	X			-			0.	0.	0.
DIRECTOR	1.00	x						0.	0.	0.
TRACEY WOOD-SANFORD	_									
DIRECTOR	1.00	X						0.	0.	0.
1 b Total							>	219,643.	0.	10,768.
2 Total number of individuals (including but not limite	d to tho	se li	stec	d ab	ove;) wh	o re	ceived more than	\$100,000 in reporta	able compensation

from the organization 0

3	Did the organization list any former officer, director or trustee, key employee, or	highest	compensated	employee
	on line 1a ⁵ If 'Yes,' complete Schedule J for such individual.			

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

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

	Yes	No
MI.		***
3		X
4		Х
	Life	14.5
5		X

Section B. Independent Contractors

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
NONE		
		2 Alexander Company Company Company Company Company

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 ▶ 0



Pai	t 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
SE REVENUE AND OTHER SIMILAR AMOUNTS	1a Federated campaigns b Membership dues c Fundraising events d Related organizations e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above g Noncash contribns included in lns 1a-1f: h Total. Add lines 1a-1f Business Code 624410 b RESIDENTIAL PROGRAMS 721310	2,378,956. 776,285. 37,297.	776,285. 37,297.	7.6	
PROGRAM SERVICE REVENUE	c RACIAL JUSTICE PROGRAMS 900099 d e f All other program service revenue g Total. Add lines 2a-2f	11,902. 825,484.	11,902.		
4	3 Investment income (including dividends, interest and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 6a Gross Rents 248,485. b Less: rental expenses 158,525.				
	c Rental Income or (loss) d Net rental Income or (loss) 7a Gross amount from sales of assets other than Inventory	89,960.	0.	0.	89,960.
	b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss)				**
OTHER REVENUE	8a Gross income from fundraising events (not including \$\frac{162,710.}{162,710.}\] of contributions reported on line 1c). See Part IV, line 18		,	***************************************	*
ОТ	c Net income or (loss) from fundraising events . 9a Gross income from gaming activities.	-17,560.	0.	0.	-17,560.
	See Part IV, line 19. b Less: direct expenses c Net income or (loss) from gaming activities	***		, <	
	10a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold . b c Net income or (loss) from sales of inventory		b-		
	Miscellaneous Revenue Business Code 11 a MISCELLANEOUS 9000099 b	7,171.	7,171.	0.	0.
	d All other revenue e Total. Add lines 11a-11d	7,171. 3.284.011.	832.655.	0.	72.400.

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Part IX | Statement of Functional Expenses

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

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

	All other organizations must comp		(B)	(C)	(D)
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22 .				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				*
4	Benefits paid to or for members				\$
5	Compensation of current officers, directors, trustees, and key employees	230,411.	0.	230,411.	0.
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	1,719,416.	1,517,686.	70,805.	130,925.
8	Pension plan contributions (include section 401(k) and section 403(b) employer	71 200	56,396.	0.470	F 422
_	contributions)	71,288.		9,470.	5,422.
	Other employee benefits	281,755.	259,275.	14,030.	8,450.
10	Payroll taxes	170,098.	134,126.	25,903.	10,069.
	Fees for services (non-employees)	-			
	Management .	-			
	Degal Caracteristics Accounting Caracteristi	25,268.	24,587.	613.	68.
	Accounting	25,200.	24,307.	013.	
	e Prof fundraising svcs. See Part IV, In 17	22,000.		* .	22,000.
	Investment management fees	22,000.			22,000.
	1 Other	111,982.	101,951.	7,447.	2,584.
•	Advertising and promotion	19,586.	404.	0.	19,182.
13	Office expenses .	86,608.	66,198.	9,353.	11,057.
14	Information technology .	30,000.	00,130.	<u> </u>	11,037.
15	Royalties				
16	Occupancy	246,477.	223,768.	18,202.	4,507.
	Travel	19,500.	12,532.	6,732.	236.
	Payments of travel or entertainment expenses for any federal, state, or local public officials	25,000		3,7327	
19	Conferences, conventions, and meetings	7,213.	5,641.	788.	784.
20	Interest .				
21	Payments to affiliates .	26,986.	26,986.	0.	0.
22	Depreciation, depletion, and amortization	231,530.	209,347.	11,147.	11,036.
23	Insurance	2,434.	2,130.	228.	76.
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.)	*			
á	FOOD	121,406.	108,957.	8,066.	4,383.
ŧ	EDUCATION/RECREATION	14,324.	14,294.	15.	15.
(CLIENT ASSISTANCE	9,343.	9,343.	0.	0.
(BANK & CREDIT CARD FEES	8,688.	0.	8,688.	0.
•	DUES	3,333.	576.	1,487.	1,270.
	All other expenses	6,504.	494.	5,243.	767.
	Total functional expenses. Add lines 1 through 24f	3,436,150.	2,774,691.	428,628.	232,831.
26	Joint costs. Check here ► X 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				
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Part >	⟨ Balance Sheet					
				(A) Beginning of year		(B) End of year
, 1	Cash — non-interest-bearing			209,699.	1	379,066
2	, , , , , , , , , , , , , , , , , , , ,				2	
3	Pledges and grants receivable, net.			113,720.	3	60,296
4	Accounts receivable, net	· ·· <u>L</u>			4	25,317
5	Receivables from current and former officers, director and highest compensated employees. Complete Part	oles from current and former officers, directors, trustees, key employees, lest compensated employees. Complete Part II of Schedule L				
6	Receivables from other disqualified persons (as defin					
	and persons described in section 4958(c)(3)(B). Com		6			
ဋိ 7	Notes and loans receivable, net				7	
S 7 S 8 T 9	Inventories for sale or use				8	
s 9	Prepaid expenses and deferred charges			3,200.	9	7,871
10	a Land, buildings, and equipment: cost or other basis.	10a	7,075,516.			
	Complete Part VI of Schedule D			· · · · · · · · · · · · · · · · · · ·		
	b Less: accumulated depreciation.	10Ь	4,262,529.	3,014,475.	10 c	2,812,987
11	Investments — publicly-traded securities				11	
12	Investments - other securities See Part IV, line 11				12	
13	Investments - program-related See Part IV, line 11		. [13	
14	Intangible assets .		. [·	14	
15	Other assets. See Part IV, line 11			117,147.	15	
16	Total assets. Add lines 1 through 15 (must equal line	34)	Γ	3,493,156.	16	3,285,537
17	Accounts payable and accrued expenses			261,502.	17	221,237
18	Grants payable				18	
19	Deferred revenue .			79,480.	19	64,265
¦ 20	Tax-exempt bond liabilities				20	
A 21	Escrow or custodial account liability Complete Part	V of Sc	hedule D		21	
22 -	Payables to current and former officers, directors, tru highest compensated employees, and disqualified per	stees, k rsons C	ey employees, Complete Part II			. %
1	of Schedule L				22	
E 23	Secured mortgages and notes payable to unrelated the	nird part	ties		23	
24	Unsecured notes and loans payable to unrelated third	parties	:		24	
25	Other liabilities. Complete Part X of Schedule D				25	
26	Total liabilities. Add lines 17 through 25			340,982.	26	285,502
P	Organizations that follow SFAS 117, check here ▶	X and	d complete lines			
	27 through 29 and lines 33 and 34.		_			
§ 27	Unrestricted net assets			578,172.	27	620,465
28	Temporarily restricted net assets			2,574,002.	28	2,379,570
	Permanently restricted net assets	Permanently restricted net assets				
}	Organizations that do not follow SFAS 117, check he	ere 🟲	and complete			
30	lines 30 through 34.			·		
30	Capital stock or trust principal, or current funds				30	
	Paid-in or capital surplus, or land, building, and equip	ment fu	ınd		31	
32	Retained earnings, endowment, accumulated income,	or othe	er funds		32	
31 32 33 34	Total net assets or fund balances.		. [3,152,174.	33	3,000,035.
34	Total liabilities and net assets/fund balances		<u>.</u>	3,493,156.	34	3,285,537.

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rari XI Financial Statements and Reporting			
		Yes	No
1 Accounting method used to prepare the Form 990: Cash X Accrual Other		4 . 4	.43
`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		X
b Were the organization's financial statements audited by an independent accountant?	2b	X	
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	х	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		^ , *	
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both:			
Separate basis X Consolidated basis Both consolidated and separate basis			
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	х	
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.	3 b	x	

Form **990** (2009)

SCHEDULE A (Form 990 or 990-EZ)

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.

OMB No 1545-0047 2009

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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

You			TION OF FORT WO									
			· · · · · · · · · · · · · · · · · · ·					See i	istruct	10115		
ine c	Č .		ise it is: (For lines 1 thro	•		-	•					
١	-		ociation of churches des		section	170(0)	UXAXII) .				
2			A)(ii). (Attach Schedule		170/	L\M\/A\/						
3			e organization described					0/15/15/	F			
4	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's											
5	name, city, and standard An organization op 170(b)(1)(A)(iv).	erated for the benefit	of a college or university	y owned	or oper	ated by	a gove	rnmenta	unit de	scribed in	section	
6			novernmental unit descri	ihed in s	ection 1	70/hV1	γαγνι					
7										ıbed		
8	A community trust	described in section	170(b)(1)(A)(vi). (Comple	te Part I	1)							
9	from activities relat	ted to its exempt func	(1) more than 33-1/3 % of tions — subject to certain ss taxable income (less complete Part III.)	n except	ions, an	ıd (2) no	more 1	than 33-	1/3 % of	its suppor	t from	gross
10	An organization org	ganized and operated	exclusively to test for pr	ublic safe	ety See	section	1 509(a)	(4).				
11	more publicly supp	orted organizations o	exclusively for the bene lescribed in section 509(zation and complete line	(a)(1) or	section	509(a)(2	ctions o 2). See	of, or ca section	rry out th 509(a)(3	ne purpose). Check t	s of or he box	ne or that
	a Type I	b Type II	c Type II	II – Fund	ctionally	ıntegrat	ted		d 🗌	Type III-	Other	
е	By checking this both than foundation ma 509(a)(2).	ox, I certify that the or anagers and other tha	ganization is not control n one or more publicly s	lled direction	tly or in d organi	directly zations	by one describ	or more ed in se	disquali ction 509	fied perso (a)(1) or s	ns oth ection	er
f		received a written det	ermination from the IRS	that is a	a Type I	, Type II	or Typ	e III sup	porting (organizatio	n,	
g	Since August 17, 2	006, has the organiza	tion accepted any gift of	or contrib	ution fro	om any	of the f	ollowing	persons	?		
											Yes	No
	(i) a person who below, the go	directly or indirectly overning body of the s	controls, either alone or upported organization?	together	with pe	rsons d	escribe	d in (ii) i	and (III)	11 g (i)		
	(ii) a famıly mem	ber of a person desc	ribed in (i) above?							11 g (ii)		
	(iii) a 35% contro	lled entity of a persor	described in (i) or (ii) a	bove?						11 g (iii)	ot	
h	Provide the following	ng information about t	he supported organization	ons.								
	(i) Name of Supported Organization	(ii) EIN	(III) Type of organization (described on lines 1 9 above or IRC section (see instructions))	organiza (i) listed gove	Is the tion in cold in your trning ment?	the organ	(v) Did you notify the organization in col (i) of your support? (i) organization in U.S.			(vii) Amour	it of Sup	port
				Yes	No	Yes	No	Yes	No			
				+						· -		
						}						
			1									
				ļ	<u></u>			<u> </u>	<u> </u>			
Total							` \ [%] ,					

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

Schedule A (Form 990 or 990-EZ) 2009

Schedule A (Form 990 or 990-EZ) 2009 YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF FORT WORTH & TARRANT COUNTY 75-0829389 Part II | Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I) Section A. Public Support Calendar year (or fiscal year (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total beginning in) 🟲 Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.') 2,284,195. 2,724,836. 2,378,956. 11,652,522. 2,188,978. 2,075,557. Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge Total. Add lines 1-through 3 2,188,978. 2,075,557. 2,284,195. 2,724,836. 2,378,956. 11,652,522. 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) 8,685. Public support. Subtract line 5 from line 4 11,643,837. Section B. Total Support Calendar year (or fiscal year (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total beginning in) ► Amounts from line 4 2,188,978. 2,075,557. 2,284,195. 2,724,836. 2,378,956. 11,652,522. Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form sımılar sources 222,749. 204,596. 207,235. 215,992. 248,485. 1,099,057. Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) 3,906. 15,202. -24,24212,148. 7,171. 14,185. Total support. Add lines 7 through 10 12,765,764. 12 Gross receipts from related activities, etc (see instructions) 12 3,530,288. First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. Section C. Computation of Public Support Percentage Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f) 14 91.21% Public support percentage from 2008 Schedule A, Part II, line 14 15 90.56 % 16a 33-1/3 support test — 2009. If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box

- b 33-1/3 support test 2008. If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.
- 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
- Private foundation. If the organization did not check a box on line, 13, 16a, 16b, 17a, or 17b, check this box and see instructions. 18

Sec	ction A. Public Support						- · ·
	endar year (or fiscal yr beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants')	(4) 2003	(3) 2000	(6) 2007	(u) 2000	(e) 2009	(I) Total
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
	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						
	Total. Add lines 1 through 5 a Amounts included on lines 1, 2, 3 received from disqualified persons						
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b	ļ	ļ				
8	Public support (Subtract line	28%	超速	77.4			
	7c from line 6)	A. Zan ya Xaian	To the state of	C. Tribata Side	this the second	HORSE PLANTS	
Sec	tion B. Total Support						
	ndar year (or fiscal yr beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,	, , , , , , , , , , , , , , , , , , , ,	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(-)
-	a Gross income from interest, dividends, payments received on securities loans, rents,						
	royalties and income form similar sources					1	
	royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses						
11 12	royalties and income form similar sources Description of the provided HTML rooms (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 12 13 14	royalties and income form similar sources Defunction Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and	is for the organization stop here.	ation's first, secoi				(3)
11 12 13 14	royalties and income form similar sources Definition Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990	is for the organization stop here.	ation's first, secoi				(3)
11 12 13 14 Sec	royalties and income form similar sources Defunction Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and	is for the organiza stop here. blic Support P	ation's first, secoi	nd, third, fourth,	or fifth tax year a		(3) ► ∏ %
11 12 13 14 Sec 15	royalties and income form similar sources Durrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul	is for the organiza stop here. blic Support P 09 (line 8, columi	ation's first, secondercentage n (f) divided by lir	nd, third, fourth,	or fifth tax year a	s a section 501(c)(<u> </u>
11 12 13 14 Sec 15 16	royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage for 20	is for the organization here. blic Support P 109 (line 8, column 2008 Schedule A,	ation's first, secon Percentage n (f) divided by lir Part III, line 15	nd, third, fourth, one 13, column (f))	or fifth tax year a	s a section 501(c)(` <u>`</u>
11 12 13 14 Sec 15 16 Sec	royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage from 20	is for the organize stop here. blic Support P 109 (line 8, column 2008 Schedule A, estment Incon	ation's first, secon Percentage n (f) divided by lir Part III, line 15 ne Percentage	nd, third, fourth, one 13, column (f))	or fifth tax year a	s a section 501(c)(<u> </u>
11 12 13 14 Sec 15 16 Sec 17	royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage from 20 public support percentage from 21 tion D. Computation of Inv	is for the organization here. blic Support P 109 (line 8, column 2008 Schedule A, estment Incom or 2009 (line 10c,	etion's first, second Percentage In (f) divided by lin Part III, line 15 Ine Percentage column (f) divide	nd, third, fourth, one 13, column (f)) e d by line 13, column	or fifth tax year a	s a section 501(c)(% %
11 12 13 14 Sec 15 16 Sec 17 18 19a	royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pull Public support percentage for 20 Public support percentage from 2 tion D. Computation of Investment income percentage finvestment income percentage find 33-1/3 support tests — 2009. If the more than 33-1/3%, check this best	is for the organization here. blic Support P 109 (line 8, column 2008 Schedule A, estment Incom or 2009 (line 10c, from 2008 Schedul ne organization di ox and stop here.	Percentage In (f) divided by ling Part III, line 15 IN Percentage column (f) divided le A, Part III, line d not check the barten attention of the organization of the column (f) divided le A, Part III, line d not check the barten organization of the column (f) divided le A, Part III, line d not check the barten organization of the column (f) divided le A, Part III, line d not check the barten organization of the column (f) divided le A, Part III, line d not check the barten organization of the column (f) divided le A, Part III, line d not check the barten organization organization of the column (f) divided le A, Part III, line d not check the barten organizatio	ne 13, column (f)) e d by line 13, column 17 fox on line 14, and qualifies as a pu	or fifth tax year a mn (f)) nd line 15 is more	15 16 17 18 than 33-1/3%, and organization	% % % % d line 17 is not
11 12 13 14 Sec 15 16 Sec 17 18 19a	royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pullic support percentage for 20 Public support percentage from 3 tion D. Computation of Investment income percentage filivestment income percentage filive	is for the organizatop here. blic Support P 109 (line 8, column 2008 Schedule A, restment Incom or 2009 (line 10c, rom 2008 Schedul ne organization di ox and stop here. The organization di this box and stop	ercentage n (f) divided by ling Part III, line 15 ne Percentage column (f) divided le A, Part III, line do not check the both the column of the column do not check a both phere. The organization of the column o	nd, third, fourth, one 13, column (f)) d by line 13, column 17 fox on line 14, and qualifies as a purious on line 14 or 19 and a lization qualifies as	or fifth tax year a	15 16 17 18 than 33-1/3%, and organization more than 33-1/3% orted organization	% % % % d line 17 is not

Schedule	A (Form 990	or 990-EZ)	2009 YOUN	G WOMEN'S C	HRISTIAN AS	SOCIATION OF	FORT WORTH	& TARRANT COU	NTY 75-0829	389Pa	ge 4
Part IV	Supplem Part II, li	nental Info ne 17a or	rmation. 17b; and	Complete Part III,	e this par line 12. F	t to provid Provide an	te the exp y other a	planations idditional ir	required by Pa formation. Se	art II, line 10; e instructions.	
Other	income P	art II,	Line 10		 _						- - .
Descri	ption:	WISCETT	NEOUS I	NCOME_	(ALL YE	ARS)	 _			·	- - ·
2005:_	3906	_		 -		-					-
2006:_	15202		. .		- -		- - -				- - ·
2007:	-24242.						_ 			 _	-
2008:_	12148									. 	- -
2009:_	7171	-	-			-					
		-	· 						· 	. – – – – – –	
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SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

► Complete if the organization is described below.

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

2009

OMB No 1545-0047



Department of the Treasury Internal Revenue Service

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

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

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

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

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

• 5	section 501(c)(4), (5), or (6) o	rganizations. Complete Part III.			
Name	of organization			Employer identific	cation number
YOU	NG WOMEN'S CHRISTI	AN ASSOCIATION OF FORT WORT	H & TARRANT C	OUNTY 75-082938	39
Par	t I-A: Complete if the o	rganization is exempt under section	on 501(c) or is a :	section 527 organi	ization.
1	Provide a description of the	organization's direct and indirect political of	campaign activities in	Part IV.	
2	Political expenditures .			► \$	\$
3	Volunteer hours				
Par	t I-Ba Complete if the o	rganization is exempt under section	on 501(c)(3).		
1	Enter the amount of any exc	ise tax incurred by the organization under	section 4955	▶ \$	3
2	Enter the amount of any exc	ise tax incurred by organization managers	under section 4955	► \$	3
3	If the organization incurred a	a section 4955 tax, did it file Form 4720 for	this year?		Yes No
4a	Was a correction made?				Yes No
b	If 'Yes,' describe in Part IV.				
Par	tːl-C Complete if the o	rganization is exempt under section	on 501(c), excep	t section 501(c)(3)	
		pended by the filing organization for section			
2	Enter the amount of the filing function activities	g organization's funds contributed to other	organizations for sec	tion 527 exempt . ► \$	3
3	Total of exempt function exp line 17b	enditures Add lines 1 and 2. Enter here a	nd on Form 1120-PO		\$
4	Did the filing organization file	e Form 1120-POL for this year?			Yes No
5	Enter the names, addresses made. For each organization contributions received that w or a political action committee	and employer identification number (EIN) listed, enter the amount paid from the filing ere promptly and directly delivered to a se ee (PAC). If additional space is needed, pro-	of all section 527 poling organization's fund parate political organ ovide information in F	tical organizations to v ls. Also enter the amou ization, such as a sepa Part IV.	which payments were unt of political arate segregated fund
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds if none, enter-0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
			_		
	•				

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Schedule C (Form 990 or 990-EZ) 2009

Schedule C (Form 990 or 990-EZ) 200					
Part II-A Complete if section 501(is exempt under se	ction 501(c)(3) and	i filed Form 5768 (6	election under
`	· · · ·	ngs to an affiliated group			
B ,Check ► I if the filii	ng organization chec	ked box A and 'limited co	ontrol' provisions apply.		
(The term	Limits on Lobbyir 'expenditures' mea	ng Expenditures — ns amounts paid or incur	rred.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expendit	ures to influence pul	olic opinion (grass roots lo	obbying)	300.	
b Total lobbying expendition	ures to influence a le	egislative body (direct lobl	bying)	5,123.	
c Total lobbying expendit	ures (add lines 1a a	nd 1b)		5,423.	
d Other exempt purpose	expenditures			3,430,727.	
e Total exempt purpose e	expenditures (add lin	es 1c and 1d)		3,436,150.	
f Lobbying nontaxable an both columns.	nount. Enter the am	ount from the following ta	ble ın	321,808.	
If the amount on line 1e, col	umn (a) or (b) is T	he lobbying nontaxable a	amount is:	-	(.5)
Not over \$500,000		20% of the amount on line 1e.		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Over \$500,000 but not over \$1	,000,000	\$100,000 plus 15% of the excess	s over \$500,000.		
Over \$1,000,000 but not over \$	\$1,500,000	\$175,000 plus 10% of the excess	s over \$1,000,000.		
Over \$1,500,000 but not over \$	17,000,000	\$225,000 plus 5% of the excess	over \$1,500,000.		
Over \$17,000,000		\$1,000,000.			<u> </u>
g Grassroots nontaxable	•	•		80,452.	
h Subtract line 1g from lir	ne 1a. If zero or less	, enter -0-		0.	
i Subtract line 1f from lin	e 1c If zero or less,	enter -0-		0.	
j If there is an amount of section 4911 tax for this	her than zero on eit s year?	her line 1h or line 1i, did t	the organization file For	m 4720 reporting	Yes No
(Son	ne organizations tha	4-Year Averaging Period of the made a section 501(h) is below. See the instruct	election do not have to	complete all of the five jh 2f.)	•
	Lobb	ying Expenditures During	g 4-Year Averaging Per	iod	,
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying non-taxable amount				321,808.	321,808.
b Lobbying ceiling amount (150% of line 2a, column (e))					482,712.
c Total lobbying expenditures				5,423.	5,423.

f Grassroots lobbying expenditures BAA

d Grassroots nontaxable amount

e Grassroots ceiling amount (150% of line 2d, column (e))

300. Schedule C (Form 990 or 990-EZ) 2009

80,452.

120,678.

80,452

300.

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

•	(a)		(b)	
	Yes	No	An	nount	
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of.					
a Volunteers?				×	·v
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
c Media advertisements?					
d Mailings to members, legislators, or the public?					_
e Publications, or published or broadcast statements?					
f Grants to other organizations for lobbying purposes?					
g Direct contact with legislators, their staffs, government officials, or a legislative body?					
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i Other activities? If 'Yes,' describe in Part IV				_	
j Total. Add lines 1c through 1i					
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				23	3
b If 'Yes,' enter the amount of any tax incurred under section 4912.					
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912					
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				, {	<u>.</u>
art III-A Complete if the organization is exempt under section 501(c)(4), section 50	01(c)(5)	, or sec	tion 5	01(c)	((
			 -	Yes	Ι
Were substantially all (90% or more) dues received nondeductible by members?			1		r
				-	H

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

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

1 Dues, assessments and similar amounts from members	1
2 Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	
a Current year	2a
b Carryover from last year	2b
c Total .	2c
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political	
expenditure next year?	4
5 Taxable amount of lobbying and political expenditures (see instructions)	5
Part IV Supplemental Information	-
Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5; and Pa Also, complete this part for any additional information.	art II-B, line 1i.
	

Schedule C (Form 990 or 990-EZ) 2009 YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF FORT WORTH & TARRANT COUNTY 75-0829389	Page 4
Schedule C (Form 990 or 990-EZ) 2009 YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF FORT WORTH & TARRANT COUNTY 75-0829389 [Parkiv Supplemental Information (continued)	
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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, lines 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions

► Attach to Form 990.

OMB No 1545-0047

Name of the organization Employer Identification number YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF FORT WORTH & TARRANT COUNTY 75-0829389 Parcelling 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 Total number at end of year 1 2 Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year 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? No Yes 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?? Partill Conservation Easements Complete if the organization answered 'Yes' to Form 990 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. AT. Held at the End of the Year 2a a Total number of conservation easements b Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2<u>c</u> 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 tax Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easement it holds? Yes No Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)? Yes No 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 Partills 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. **>**\$ 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 . >\$

Schedule D (Form 990) 2009 YOUNG W	OMEN'S CHRIST	CIAN ASS	CIATION OF FORT	WORTH	& TARRANT COUNTY	75-0	829389		Page 2
Part III Organizations Mainta	ining Colle	ections	s of Art, Hist	orical	Treasures, o	r Other Similar A	ssets (c	ontini	ıed)
3 Using the organization's acquisititems (check all that apply):	ion accession	and ot				that are a significant	use of its	collect	ion
a. Public exhibition			_		nange programs				
b Scholarly research	_		e [] Other	·					
c Preservation for future gener		11 4			£				
4 Provide a description of the organization of the organiz			•	-	•		pose in	_	_
5 During the year, did the organiza assets to be sold to raise funds r							Yes		No
Part IV Escrow and Custodia 9, or reported an amo	I Arranger unt on For	nents m 990	Complete if on Part X, line	organı 21.	zatıon answei	red 'Yes' to Form	990, Pa 	rt IV,	line
1 a ls the organization an agent, trus included on Form 990, Part X?						ner assets not	Yes	[No
b If 'Yes,' explain the arrangement	in Part XIV	and com	nplete the follow	ing tab	le	<u> </u>			
							Amoun	<u>t</u>	
c Beginning balance						1c			
d Additions during the year				•		1d			
e Distributions during the year						1e	<u>_</u>		
f Ending balance		000	Dark V. Ivaa 211			1f			-
2a Did the organization include an a		orm 990,	Part X, line 21	•			∐ Yes	L	No
b if 'Yes,' explain the arrangement Part V Endowment Funds Co		raaniz	ation answer	rad 'V	es' to Form 90	0 Part IV line 1	<u></u>		
Fait VI Lindowine It I dinds Co	(a) Curren		(b) Prior yea		(c) Two years back			Four year	re hack
1 a Beginning of year balance	(a) ourien	t your	(b) Thor yea	4"	(c) Two years buch	(u) Three years bu	<u> </u>	our your	is back
b Contributions								,*	
c Net Investment earnings, gains, and losses									
d Grants or scholarships				Ì		, ²	3 %		
e Other expenditures for facilities and programs					* * **	* >	ì		, À h,
f Administrative expenses									\
g End of year balance			<u> </u>	*			9 822	<u>}</u>	·23,},
2 Provide the estimated percentage	•	end bal	lance held as:						
a Board designated or quasi-endov	vment ►		%						
b Permanent endowment	9 .	5							
c Term endowment ►	%								
3a Are there endowment funds not a organization by:	n the posses	ssion of	the organization	that a	re held and admi	nistered for the		Yes	No
(i) unrelated organizations							3a(i)		x
(ii) related organizations							3a(ii)	Х	
b If 'Yes' to 3a(II), are the related of	organizations	listed a	is required on S	chedule	e R?		3b	X	
4 Describe in Part XIV the intended									
Part VI Investments-Land, B	uildings, a	and Eq	uipment. Se	<u>e Forr</u>	<u>n 990, Part X</u>	, line 10.			
Description of investment	t 		st or other basis nvestment)		Cost or other asıs (other)	(c) Accumulated Depreciation	(d) E	Book V	
1 a Land	•				45,000.				<u>,000.</u>
b Buildings				<u> </u>	6,092,324.	3,486,199			<u>,125.</u>
c Leasehold improvements					353,941.	317,642			<u>,299.</u>
d Equipment	•	-		<u> </u>	584,251.	458,688	•	125	<u>,563.</u>
e Other	- 7-10	<u> </u>	000 5 1 1	<u> </u>	(D) / 101):		1 -		
Total. Add lines 1a through 1e (Colum	n (a) must e	quai For	m 990, Part X, e	column	(B), line 10(c).)				<u>,987.</u>
BAA						Sci	hedule D (F	orm 9	2009 COUS

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

^{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.

Schedule D (Form 990) 2009 Young women's Christian association of Fort worth & tarrant county	75-0829389	Page 4
PartXIII Reconciliation of Change in Net Assets from Form 990 to Financial Statement	s	
1 Total revenue (Form 990, Part VIII, column (A), line 12)		
2 Total expenses (Form 990, Part IX, column (A), line 25)		
3 Excess or (deficit) for the year. Subtract line 2 from line 1		
4 Net unrealized gains (losses) on investments		
5 Donated services and use of facilities		
6 Investment expenses		
7 Prior period adjustments		
8 Other (Describe in Part XIV)		
9 Total adjustments (net). Add lines 4 through 8		
10 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9.		
Particular Reconciliation of Revenue per Audited Financial Statements With Revenue pe	r Return	
1 Total revenue, gains, and other support per audited financial statements	1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	5:20	
a Net unrealized gains on investments		
b Donated services and use of facilities 2b		
c Recoveries of prior year grants		
d Other (Describe in Part XIV)	1 1	
e Add lines 2a through 2d	2e	
3 Subtract line 2e from line 1	3	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a Investments expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIV)		
c Add lines 4a and 4b	4c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	
Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	per Return	
1 Total expenses and losses per audited financial statements	1	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities	*′,	
b Prior year adjustments 2b		
c Other losses 2c		
d Other (Describe in Part XIV)		
e Add lines 2a through 2d	2e	
3 Subtract line 2e from line 1	3	
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	žko.	
a Investments expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIV) .		
c Add lines 4a and 4b	4c	
5 Total expenses Add lines 3 and 4c (This must equal Form 990, Part I, line 18.)	5	
Part XIV Supplemental Information	1 9 1	
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Par line 4; Part X, line 2, Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete thinformation.	rt IV, lines 1b and 2b; is part to provide any	Part V, additional
Pt V Line 4 THE INTENDED USE OF THE ENDOWMENT FUNDS HELD BY THE	<u> </u>	
YWCA FOUNDATION IS TO SUPPORT CHILD CARE AND RESIDE	NTIAL	
SERVICES FOR PROGRAMS OF THE YWCA FORT WORTH & TARR	ANT COUNTY.	
PART X, LINE 2 AS A NOT-FOR-PROFIT ORGANIZATION, THE YWCA IS NOT		
LIABLE FOR FEDERAL INCOME TAXES. ON APRIL 1, 2009	· 	
THE YWCA ADOPTED THE PROVISIONS OF FASB ASC 740, IN	COME	
TAXES, WHICH REQUIRES FINANCIAL STATEMENT RECOGNITI	ON	
AND DISCLOSURE FOR UNCERTAIN TAX POSITIONS TAKEN OR	EXPECTED	

	OUNG WOMEN'S CHRISTIAN ASSOCIATION OF FORT W	ORTH & TARRANT COUNTY	75-0829389	Page 5
Part XIV Supplemental	ntormation (continued)			
<u>`</u>	BE TAKEN IN A TAX RETURN.	FINANCIAL STATEMENT	RECOGNITION	· ·
ōı	A TAX POSITION IS DEPENDENT	ON AN ASSESSMENT OF	<u>A 50%</u>	- -
ōı	GREATER LIKELIHOOD THAT THE	TAX POSITION WILL B	E SUSTAINED	
<u>_</u>	ON EXAMINATION BASED ON THE	TECHNICAL MERITS OF	THE POSITION.	. – – – –
	TEREST AND PENALTIES, IF ANY	, RELATED TO UNCERTA	IN TAX	· -
PO	SITIONS WOULD BE RECORDED IN	THE STATEMENT OF AC	TIVITIES	
A s	GENERAL AND ADMINISTRATIVE	EXPENSE.		
	UPON ADOPTION AT APRIL 1, 2	009 AND AS OF MARCH	31, 2010	
<u>M</u> Z	NAGEMENT HAS DETERMINED THE	THE YWCA DOES NOT HA	VE ANY	
<u>_</u>	RECOGNIZED TAX BENEFITS. WI	TH A FEW EXCEPTIONS,	_FEDERAL	
<u>_</u>	COME TAX RETURNS ARE NO LONG	ER SUBJECT TO EXAMIN	IATION	
B;	TAX AUTHORITIES PRIOR TO 20	06		·
		·		· -
				
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		· 		
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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

2009

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 Form990 or Form 990-EZ. ► See separate instructions.

Open to Public Inspection

OMB No 1545-0047

Name of the	organization						Employer identifica	tion number	
YOUNG	WOMEN'S CHRISTIAN A	SSOCIATIO	N OF FO	ORT WOR	TH	& TARRANT CO	OUNTY 75-0829389	•	
	Fundraising Activities. Comp Form 990EZ filers are not req	lete if the organ	nization ar	nswered 'Y	es'	to Form 990, Part I	V, line 17.		_
1 Indi	cate whether the organization	raised funds thi	rough any	of the foll	owir	ng activities. Check	all that apply.		
x	Mail solicitations				\mathbf{x}	Solicitation of non-	government grants		
=	Internet and email solicitations	5			x	Solicitation of gove	rnment grants		
	Phone solicitations					Special fundraising	events		
=	In-person solicitations					opeoid: tarraraioning			
2a Did	the organization have written obloyees listed in Form 990, Par	or oral agreeme t VII) or entity i	ent with an in connect	y individu ion with p	al (ı rofe	ncluding officers, di ssional fundraising	rectors, trustees or key services?	X Yes N	lo
b If 'Y	es,' list the ten highest paid in pensated at least \$5,000 by the	dividuals or ent le organization	tities (fund	łraisers) p	ursu	uant to agreements	under which the fundra	iser is to be	
							(v) Amount paid to		_
	(i) Name of individual	(ii) Activity		fundraiser	(i	v) Gross receipts	(or retained by)	(vi) Amount paid to)
	or entity (fundraiser)			dy or control ibutions?		from activity	fundraiser listed in col (i)	(or retained by) organization	
			1	No					_
			Yes	NO					
	>GGOGTAMEG	GONGIN MING		x		0.	22,000.	,).
M. GAI	LE & ASSOCIATES	CONSULTING		^		0.	22,000.		<u>, .</u>
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		1							
					<u>L</u>				
Tot	al .			•		0.	22,000.	(<u>.</u>
3 List	al all states in which the organiz	ation is register	red or lice	nsed to so	olicit	funds or has been	notified it is exempt fro	m registration	
or I	icensing.								
			_ _			_			
			- :			. 			
									_
	- -								
									- -
									

Schedule G (Form 990 or 990-EZ) 2009 YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF FORT WORTH & TARRANT COUNTY 75-0829389 Page 2 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 (b) Event #2 (c) Other Events (d) Total Events (Add col (a) through col. (c)) LUNCHEON PARTY/DANCE NONE REVESUE (event type) (total number) (event type) 1 Gross receipts 20,255. 191,271 211,526. 2 Less: Charitable contributions 162,710 162,710. 3 Gross income (line 1 minus line 2) 20,255. 28,561 48,816. 4 Cash prizes Noncash prizes Rent/facility costs 4,025. 4,025. 7 Food and beverages 2,164. 30,535 32,699. EXPENSES 8 Entertainment 3,450. 3,450. 9 Other direct expenses 20,544. 5,658. 26,202. 10 Direct expense summary. Add lines 4- through 9 in column (d) 66,376. Net income summary. Combine lines 3, column (d) and line 10. -17,560. 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. (d) Total gaming (Add col. (a) through col. (c)) (b) Pull tabs/Instant (c) Other gaming (a) Bingo REVENUE bingo/progressive bingo 1 Gross revenue 2 Cash prizes DIRECT 3 Non-cash prizes 4 Rent/facility costs 5 Other direct expenses Yes Yes Yes Volunteer labor No 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

	FERNISO CONSTRUCTOR CONTROL CO	^^ - ^	00 E3	n 0000
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		
11	Does the organization operate gaming activities with nonmembers?	11		
	olf 'Yes,' explain:	- 10a		
10-	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	10a		
t	o If 'No,' explain.	-		
•	Is the organization licensed to operate gaming activities in each of these states?	9a		
9	Enter the state(s) in which the organization operates gaming activities		l .	1 1

Schedule G (Form 990 or 990-EZ) 2009 YOUNG WOMEN'S CHRIST	TIAN ASSOCIATION OF FORT WOR	THE TARRANT COUNTY 75-082938	9	F	² age 3
•				YES	NO
13 Indicate the percentage of gaming activity operated in:			, 3	, ,	,
a The organization's facility .		13a %	177		Δ.
b An outside facility .		13b %], '	& 2	- 1
14 Enter the name and address of the person who prepare	s the organization's gaming/sp	pecial events books and records:		. v	1
				2	35%
Name: •		- 			
•••				. 44	l^ a
Address: -					3.4
4F - Door the consense have a sense to the decided	forms the settle set to the	•			لتكلا
15a Does the organization have a contact with a third party f			15a	. & *W	- 12 1
b If 'Yes,' enter the amount of gaming revenue received by of gaming revenue retained by the third party \$	y the organization \$	and the amount	[]		
c If 'Yes,' enter name and address of the third party	· · · · · · · · · · · · · · · · · · ·			Υ΄.	
Cit res, enter hame and address of the third party					
Name. ▶					
Name. •					
Address: ►					
,					
16 Gaming manager information					, I
				~¥`	
Name: •				Ž,	
,	- 				
Gaming manager compensation \$], []		أها
			13	^ ~	
Description of services provided: ►		<u></u>		; ,	
	F1			1 77	
Director/officer Employee	Independent con	tractor	1 k		
			k	,]	
17 Mandatory distributions					
a Is the organization required under state law to make cha	aritable distributions from the o	jaming proceeds to retain the			· · · · · · · · · · · · · · · · · · ·
state gaming license?' b Enter the amount of distributions required under state la	aw to be distributed to other or	compt organizations or anont in the	17a	7	
organization's own exempt activities during the tax year		empt organizations or spent in the		. 'l'	
BAA	TEEA3703 02/05/10	Schedule G (Form 99	<u>ı ≦ ®</u> 10 or 99	<u>・・ </u> 10-Fア	2009
		20110 and a (1 01111 22	- 0. 23	,	, ====

SCHEDULE J-2 (Form 990)

Continuation Sheet for Form 990

OMB No. 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a. ► See instructions for Form 990.

Name of the Organization

YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF FORT WORTH & TARRANT COUNTY 75-0829389

Part | Continuation Officers Displayed Tarrant County 75-0829389

Part I Continuation: Officers Employees	, Directors,	Trust	tee	s, K	(ey	Emp	loy	ees, and Highest	Compensated	
(A)	(B)			((C)			(D)	(E)	(F)
Name and Title	Average hours	Posi	tion (hat appl	y)	Reportable		Estimated
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
LISA GUNTER DIRECTOR	1.00	х						0.	0.	0.
IRENE JASON		-							<u> </u>	
	1.00	x						٥.	0.	0
DIRECTOR		_				<u> </u>		0.	0.	<u> </u>
LORI RADKE DIRECTOR	1.00	x						0.	0.	0.
	1.00							0.	0.	<u> </u>
LINDA_WRIGHTDIRECTOR	1.00	х						0.	0.	0.
JUDI BISHOP]									
EXECUTIVE DIRECTOR	40.00			х				71,422.	0.	7,385.
PAMELA BREWER										
ASSIST. EX.DIR OPERATIONS	40.00			X				65,817.	0.	3,383.
CAROL KLOCEK				1						
EXECUTIVE DIRECTOR	40.00			x				77,404.	0.	0.
BRIAN EATON										
ASSOC.EX.DIR FINANCE	40.00			х				5,000.	0.	0.
	•									
										
	-									
				\vdash	<u> </u>		-			
	•									
	•									
	-									
	-									

SCHEDULE M (Form 990)

Noncash Contributions

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

OMB No 1545-0047

2009

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990.

YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF FORT WORTH & TARRANT COUNTY

Open To Public Inspection

Employer identification number

75-0829389

Pa	rt 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 .				1
2	Art-Historical treasures				
3	Art–Fractional interests .				-
4	Books and publications		*		
5	Clothing and household goods		3		
6	Cars and other vehicles		<u></u>		
7	Boats and planes				
8	Intellectual property			 -	
9	Securities-Publicly traded	Х	2	35,615.	PUBLICLY TRADED MARKET VALUE
10	Securities-Closely held stock				
11	Securities-Partnership, LLC, or trust interests				
12	Securities-Miscellaneous				
13	Qualified conservation contribution— Historic structures				
14	Qualified conservation contribution—Other				
15	Real estate-Residential				
16	Real estate-Commercial .				
17	Real estate—Other				
18	Collectibles			· •	
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts .				
25	Other ► ()			-	
26	Other ► ()				
27	Other ► ()				
28	Other ► (
29	Number of Forms 8283 received by the organization completed Form 8283, Part IV, Done	on during the ee Acknowled	e tax year for contributi dgement	ions for which the	29 Yes No
30 a	a During the year, did the organization receive by c hold for at least three years from the date of the purposes for the entire holding period?	ontribution a initial contrib	any property reported in oution, and which is not	Part I, lines 1-28 that required to be used fo	it must or exempt . 30a X
ŧ	of Yes,' describe the arrangement in Part II				
	Does the organization have a gift acceptance poli	-	-		ons? 31 X
	Does the organization hire or use third parties or noncash contributions?	related orga	nizations to solicit, proc	cess, or sell	. 32 a X
Ŀ	If 'Yes,' describe in Part II				

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,

Schedule	M (Form 990) 2009	YOUNG WOMEN'S CHR	RISTIAN ASSOCIATION	OF FORT WORTH & TARRA	NT COUNTY 75-0829389	Page 2
Part II	Supplemental In and 33. Also co	nformation. Comp	lete this part to pr or any additional in	ovide the information formation.	INT COUNTY 75-0829389 I required by Part I, lines	30b, 32b,
_	`					
			· 			
	- -					-
	_ 					
	_ .			<u> </u>		
						
	-					
			. 			
						
						
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	 .					
	- 					
						
						

SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

2009

Department of the Treasury Internal Revenue Service

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

► Attach to Form 990.

Open to Public Inspection

Name of the organization	Employer identification number
YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF FORT WORTH & TARRANT CO	UNTY 75-0829389
Pt III, Line 2 DURING FY 09-10, THE YWCA BEGAN THE READY FO	DR_SCHOOL
INITIATIVE PROGRAM. RFSI WORKS WITH OTHER C	CHILD CARE
CENTERS, PRIMARILY IN LOW INCOME NEIGHBORHOO	DDS, TO
OFFER MENTORING AND OTHER SUPPORT FOR THE CE	enters'
DIRECTORS AND STAFF.	
Pt_VI-A, Line 2 _ TWO MEMBERS OF THE BOARD OF DIRECTORS, MARY	JO_COOK
AND_SHAWN_CURTIS, HAVE A FAMILY RELATIONSHIP	MOTHER-
DAUGHTER).	
Pt_VI-A, Line 4 _ SINCE THE LAST FORM 990 WAS FILED, THE YWCA	AMENDED
ITS BYLAWS TO REFLECT THAT IT IS AN ORGANIZA	ATION
GOVERNED_BY_ITS_BOARD_OF_DIRECTORS_AND_IS_NO	OT_A
MEMBERSHIP ORGANIZATION.	
Pt VI-B, Line 11A MANAGEMENT PREPARES FORM 990 AND THEN IT IS	REVIEWED BY
AN INDEPENDENT ACCOUNTING FIRM. IT IS NEXT	REVIEWED
BY THE YWCA FINANCE COMMITTEE. FOLLOWING TH	E FINANCE
COMMITTEE'S APPROVAL, THE 990 IS PROVIDED TO) THE
FULL BOARD FOR ITS REVIEW AND APPROVAL BEFOR	E FILING.
Pt VI-B, Line 12c TO MONITOR AND ENFORCE COMPLIANCE WITH THE C	CONFLICT
OF INTEREST POLICY, MANAGEMENT REVIEWS TRANS	ACTIONS AND
ACTIVITY THROUGHOUT THE YEAR FOR POTENTIAL C	ONFLICTS
OF INTEREST. POTENTIAL CONFLICTS ARE ANALYZ	ED AND FINAL
DECISIONS AS TO WHETHER A CONFLICT DOES IN F	ACT EXIST
OR WHETHER THE TRANSACTION OR BUSINESS RELAT	IONSHIP IS
ACCEPTABLE ARE MADE BY THE BOARD'S EXECUTIVE	COMMITTEE,
EXCLUDING ANY MEMBER(S) WHO MAY BE INVOLVED	OR AFFECTED
BY THE POTENTIAL CONFLICT. DIRECTORS, OFFICE	RS, AND

Name of the organization		Employer identification number
YOUNG WOMEN'S CHR	ISTIAN ASSOCIATION OF FORT WORTH & TARRANT COUN	TY 75-0829389
	KEY EMPLOYEES ARE REQUIRED TO DISCLOSE POTENTI	AL
	CONFLICTS ANNUALLY AS WELL AS ANY TIME DURING	THE
	YEAR WHEN A NEW POTENTIAL CONFLICT MAY ARISE.	
Pt_VI-B, Line_15	THE HUMAN RESOURCE COMMITTEE OF THE YWCA REVIE	WS_THE
	COMPENSATION OF THE EXECUTIVE DIRECTOR AND OTH	ER KEY
	EMPLOYEES OF THE ORGANIZATION EACH YEAR. THE	PROCESS,
	UNDERTAKEN BY THIS INDEPENDENT COMMITTEE, INCI	UDES
	REVIEW OF COMPARABLE DATA, AND IN PARTICULAR,	COMPENSATION
	FOR OTHER SOCIAL SERVICE EXECUTIVES (BASED ON	THEIR
	SPECIFIC DUTIES) IN THE SAME GEOGRAPHIC AREA.	THE
	DELIBERATION AND DECISIONS ARE DOCUMENTED BY T	HE
	COMMITTEE IN A CONTEMPORANEOUS MANNER.	
Pt_VI-C, Line_19	THE YWCA'S ANNUAL REPORT, AS WELL AS ITS FORM	990,
	ARE AVAILABLE ON ITS WEBSITE. THE GOVERNING I	OCUMENTS,
	CONFLICT OF INTEREST STATEMENT, AND FINANCIAL	STATEMENTS
	ARE AVAILABLE TO THE PUBLIC UPON REQUEST.	·
PT. I, LINE 6	VOLUNTEERS - YWCA VOLUNTEERS CONTRIBUTE TO THE	ORGANIZATION
	IN MANY IMPORTANT WAYS. VOLUNTEERS WHO SERVE	ON THE
	BOARD OF DIRECTORS OVERSEE ALL POLICIES AND PR	ROGRAMS
	UNDERTAKEN BY THE YWCA. IN ADDITION TO BOARD	SERVICE,
	MANY OF THESE INDIVIDUALS, AS WELL AS OTHER VO	LUNTEERS
	FROM THE COMMUNITY WITH SPECIFIC SKILLS AND IN	TERESTS,
	SERVE ON ONE OR MORE OF THE MANY YWCA COMMITTE	ES WHICH
	HELP OVERSEE AND FUTHER THE RELATED PROGRAM OF	FUNCTION
	OF THE AGENCY. THE PRIMARY FUNDRAISING EVENT	FOR THE
	YWCA EACH YEAR IS ITS WOMEN WHO CARE, SHARE LU	лснеон.
	EACH YEAR, MORE THAN 100 VOLUNTEERS HELP LEAD	THIS

Name of the organization		Employer identification number
YOUNG WOMEN'S CHRI	STIAN ASSOCIATION OF FORT WORTH & TARRANT COUNTY	75-0829389
	EVENT THROUGH SPONSORING TABLES AND COORDINATING	
	ENTIRE EVENT. COMMUNITY GROUPS ARE ALSO AN IMPO	RTANT
	SOURCE OF VOLUNTEERS FOR THE YWCA, AND THEY ARE	INVOLVED
	IN A WIDE RANGE OF ACTIVITIES, INCLUDING PAINTIN	G,
	CLEAN-UP, AND REMODELING PROJECTS AT YWCA FACILI	TIES.
	SEVERAL VOLUNTEERS ASSIST WITH ADMINISTRATIVE DU	TIES
	AT THE YWCA. FINALLY, NUMEROUS INDIVIDUALS VOLU	NTEER
	DIRECTLY WITH YWCA CLIENTS IN PROGRAM ACTIVITIES	<u>.</u>
	THESE ACTIVITIES INCLUDE WORKING WITH CHILDREN I	N
	THE CHILD DEVELOPMENT CENTERS AND MENTORING, TEA	CHING
	LIFE SKILLS, AND PROVIDING OTHER TYPES OF SUPPOR	T_TO
	THE TRANSITIONALLY HOMELESS WOMEN IN OUR RESIDEN	TIAL
	PROGRAMS TO HELP THEM AS THEY STRIVE TO BECOME S	ELF-
	SUFFICIENT.	
	SUFFICIENT. AS SUPORTING ORGANIZATIONS FOR THE YWCA FORT WOR	TH_&
SCH. R, PART V, 1K,M,N		
SCH. R, PART V, 1K,M,N	AS SUPORTING ORGANIZATIONS FOR THE YWCA FORT WOR	ALE
SCH. R, PART V, 1K,M,N	AS SUPORTING ORGANIZATIONS FOR THE YWCA FORT WOR	&
SCH. R, PART V, 1K,M,N	AS SUPORTING ORGANIZATIONS FOR THE YWCA FORT WORTARRANT COUNTY, THE YWCA FOUNDATION AND YWCA RES	&
SCH. R, PART V, 1K,M,N	AS SUPORTING ORGANIZATIONS FOR THE YWCA FORT WORT TARRANT COUNTY, THE YWCA FOUNDATION AND YWCA RES SHOP SHARE SOME SERVICES OF THE YWCA FORT WORTH TARRANT COUNTY'S EXECUTIVE DIRECTOR AND OTHER ST	& AFF MEMBERS,
SCH. R, PART V, 1K,M,N	AS SUPORTING ORGANIZATIONS FOR THE YWCA FORT WORT TARRANT COUNTY, THE YWCA FOUNDATION AND YWCA RES SHOP SHARE SOME SERVICES OF THE YWCA FORT WORTH TARRANT COUNTY'S EXECUTIVE DIRECTOR AND OTHER ST AS WELL AS FACILITIES AND OTHER ASSETS, ON AN AS	ALE & AFF MEMBERS, NEEDED
SCH. R, PART V, 1K,M,N	AS SUPORTING ORGANIZATIONS FOR THE YWCA FORT WORTARRANT COUNTY, THE YWCA FOUNDATION AND YWCA RESERVED SHARE SOME SERVICES OF THE YWCA FORT WORTH TARRANT COUNTY'S EXECUTIVE DIRECTOR AND OTHER STAS WELL AS FACILITIES AND OTHER ASSETS, ON AN ASBASIS, WITHOUT REIMBURSEMENT OF COST.	& ALE AFF MEMBERS, NEEDED
SCH. R, PART V, 1K,M,N	AS SUPORTING ORGANIZATIONS FOR THE YWCA FORT WORT TARRANT COUNTY, THE YWCA FOUNDATION AND YWCA RES SHOP SHARE SOME SERVICES OF THE YWCA FORT WORTH TARRANT COUNTY'S EXECUTIVE DIRECTOR AND OTHER ST AS WELL AS FACILITIES AND OTHER ASSETS, ON AN AS BASIS, WITHOUT REIMBURSEMENT OF COST. DURING 2009, THE YWCA ENGAGED M. GALE & ASSOCIAT	ALE AFF MEMBERS, NEEDED
SCH. R, PART V, 1K,M,N	AS SUPORTING ORGANIZATIONS FOR THE YWCA FORT WORT TARRANT COUNTY, THE YWCA FOUNDATION AND YWCA RES SHOP SHARE SOME SERVICES OF THE YWCA FORT WORTH TARRANT COUNTY'S EXECUTIVE DIRECTOR AND OTHER ST AS WELL AS FACILITIES AND OTHER ASSETS, ON AN ASS BASIS, WITHOUT REIMBURSEMENT OF COST. DURING 2009, THE YWCA ENGAGED M. GALE & ASSOCIATE PERFORM AN ANALYSIS OF ITS FUNDRAISING ACTIVITIES	ALE AFF MEMBERS, NEEDED ES TO S AND
SCH. R, PART V, 1K,M,N	AS SUPORTING ORGANIZATIONS FOR THE YWCA FORT WORT TARRANT COUNTY, THE YWCA FOUNDATION AND YWCA RES SHOP SHARE SOME SERVICES OF THE YWCA FORT WORTH TARRANT COUNTY'S EXECUTIVE DIRECTOR AND OTHER ST AS WELL AS FACILITIES AND OTHER ASSETS, ON AN AS BASIS, WITHOUT REIMBURSEMENT OF COST. DURING 2009, THE YWCA ENGAGED M. GALE & ASSOCIAT PERFORM AN ANALYSIS OF ITS FUNDRAISING ACTIVITIES DEVELOPMENT DEPARTMENT, TRAIN STAFF AND BOARD ME	ALE AFF MEMBERS, NEEDED ES TO S AND MBERS,
SCH. R, PART V, 1K,M,N	AS SUPORTING ORGANIZATIONS FOR THE YWCA FORT WORT TARRANT COUNTY, THE YWCA FOUNDATION AND YWCA RES SHOP SHARE SOME SERVICES OF THE YWCA FORT WORTH TARRANT COUNTY'S EXECUTIVE DIRECTOR AND OTHER ST AS WELL AS FACILITIES AND OTHER ASSETS, ON AN AS BASIS, WITHOUT REIMBURSEMENT OF COST. DURING 2009, THE YWCA ENGAGED M. GALE & ASSOCIAT PERFORM AN ANALYSIS OF ITS FUNDRAISING ACTIVITIES DEVELOPMENT DEPARTMENT, TRAIN STAFF AND BOARD ME AND ASSIST WITH DEVELOPING LONG-TERM FUNDRAISING	ALE AFF MEMBERS, NEEDED ES TO S AND MBERS, AND

Schedule 0 (Form 990) 2009	Page 2
Name of the organization	Employer identification number
YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF FORT WORTH & TARRANT	COUNTY 75-0829389
RECEIPTS DIRECTLY TIED TO THEIR ACTIVITIES	s
PT. IV, QUESTION 10 THE YWCA FORT WORTH & TARRANT COUNTY DOES	NOT_HOLD_ASSETS
THROUGH AN ENDOWMENT. HOWEVER, THE YWCA	FOUNDATION OF
FORT WORTH & TARRANT COUNTY, A RELATED EN	TITY, DOES HOLD
ASSETS THROUGH AN ENDOWMENT THAT ULTIMATED	LY BENEFITS
THE YWCA FORT WORTH & TARRANT COUNTY. FOR	R COMPLETE DETAILS ON
THE FOUNDATION ENDOWMENT, SEE SCHEDULE D,	PART V OF ITS
FORM 990. THE EIN FOR THE YWCA FOUNDATION	N OF FORT WORTH
& TARRANT COUNTY IS 75-2920875.	
	-
	

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

Briefly describe the organization's mission:

AT THE CENTER OF THIS MISSION ARE OUR PROGRAMS FOR HOMELESS
AND LOW-INCOME WOMEN AND CHILDREN AND RACIAL JUSTICE PROGRAMMING.

Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 4d (continued)

4d Describe the exempt purpose achievements for each of the organization's other program services. Section 501(c)(3) and (4) organizations and 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.

Code:	Description:	READY FOR SCHOOL INITIATIVE - THIS PROGRAM IS DEDICATED
Expenses _	78,370.	TO THE DEVELOPMENT OF TARRANT COUNTY CHILDREN THROUGH
Grants Of	0.	IMPROVING EARLY CHILDHOOD LEARNING. IT TARGETS A SMALL
Revenue .	0.	NUMBER OF REGULATED CHILD CARE CENTERS, PRIMARILY IN
		LOW-INCOME NEIGHBORHOODS, TO ENHANCE THEIR STANDARDS OF
		CARE AND PREPARE CHILDREN TO SUCCEED IN SCHOOL. IT DOES
		THIS BY PROVIDING TRAINING, MENTORING, EQUIPMENT
Code:	Description:	AWARDS, AND ONE-ON-ONE TECHNICAL ASSISTANCE TO CENTER
Expenses _		DIRECTORS AND THEIR STAFFS. IN THE FIRST YEAR THE YWCA
Grants Of _	<u>.</u>	TOOK OVER THIS PROGRAM, APPROX. 70% OF THE CHILDREN
Revenue _		ASSESSED IMPROVED ONE OR MORE OVERALL LEVELS IN
		CRITERIA ASSESSING SOCIO-EMOTIONAL, PHYSICAL, COGNITIVE,
		AND LANGUAGE DEVELOPMENT.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered 'Yes' to Form 990, Part IV, lines 33, 34, 35, 36, or 37.
 Attach to Form 990. * See separate instructions.

OMB No 1545-0047

INCA OF FORT WORTH & TA YNCA OF FORT WORTH & IA (F)
Direct controlling entity (F)
Direct controlling
entity **Partill** Identification of Related Tax-Exempt Organizations (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) Employer identification number 75-0829389 (E)
Public charity status (if section 501(c)(3)) **(E)** End-of-year assets **Ratil** Identification of Disregarded Entities (Complete If the organization answered 'Yes' to Form 990, Part IV, line 33.) 509 (A) (3) TYPE I 11 509 (A) (3) TYPE I 11 (**D)** Exempt Code section (D) Total income (C)
Legal domicile (state or foreign country) (C)
Legal domicile (state or foreign country) YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF FORT WORTH & TARRANT COUNTY X X THE YMCA OF FORT WORTH & TARRANT COUNTY RESALE SHOP 20-0049601 RESALE SHOP - SUPPORT ORGANIZ THE YMCA FOUNDATION OF FORT WORTH & TARRANT COUNTY 75-2920875 SUPPORT ORGANIZATION - YMCA (B) Primary activity (B) Primary activity (A) Name, address, and EIN of related organization 512 W. 4TH STREET, FORT WORTH TX 76102 512 W. 4TH STREET, FORT WORTH TX 76102 (A) Name, address, and EIN of disregarded entity Department of the Treasury Internal Revenue Service Name of the organization

Schedule R (Form 990) (2009)

TEEA5001 02/05/10

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

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75-0829389

Schedule R (Form 990) 2009 YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF FORT WORTH & TARRANT COUNTY

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

(J) General or managing partner? ŝ Yes Code V-UBI amount in box 20 of Schedule (Form 1065) (H)
Disproportionate
allocations? ŝ Yes Share of total income Share of end-of-year assets (E)
Predominant
income (related,
unrelated, excluded
from tax under
sections 512-514) (D)
Direct
controlling entity Legal domicile (state or foreign country) (B) Primary Activity (A)
Name, address, and EIN of
related organization

Paraily Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	Faxable as a Coled organizations	rporation or Tr	ust (Complete or toporation or toporation)	if the organiz	ation answered 'Ye tax year.)	es' to Form 990, Pa	ıt IV,
(A) Name, address, and EIN of related organization	(B) Primary Activity	(C) Legal domicile (state or foreign country)	(b) Direct controlling entity	Type of entity (C corp, S corp, or trust)	Primary Activity Legal domicile Direct (State or foreign controlling entity) (B) (C corp. S corp.) (C corp. S corp.) (B) (C corp. S corp.) (C corp. S corp.) (C corp. S corp.) (C corp. S corp.) (C corp. S corp.) (C corp. S corp.) (D) (F) (G) (C corp. S corp.) (C corp. S corp.) (C corp. S corp.) (C corp. S corp.) (C corp. S corp.)	(G) Share of end-of-year assets	(H) Percentage ownership
			•				

Schedule R (Form 990) (2009)

02/05/10

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TARRANT COUNT	
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LION OF FORT WORTH &	-
FORT	
Q.	
ASSOCIATION	
CHRISTIAN	
WOMEN'S	
YOUNG	
2009	
Form 990	,
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75-0829389

Schedule R (Form 990) 2009 YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF FORT WORTH & TARRANT COUNTY

75-0829

Rativ: Transactions With Related Organizations (Complete of the organization answered 'Yes' to Form 990, Part IV, line 34, 35, or 36.)

Note Complete line 1 if any entity is listed in Parts II. III. or IV of this schedule.			Yes	ŝ
1 During the tax year did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV	∧!-!		ò	
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity		1a		×
b Gift, grant, or capital contribution to other organization(s)		1 b		×
c Gift, grant, or capital contribution from other organization(s)	•	1c	×	
d Loans or loan quarantees to or for other organization(s)		<u>م</u>		×
e Loans or loan quarantees by other organization(s)		٦		×
f Sale of assets to other organization(s)		11		×
g Purchase of assets from other organization(s) .		1g		×
h Exchange of assets		1		×
i Lease of facilities, equipment, or other assets to other organization(s)		=		×
j Lease of facilities, equipment, or other assets from other organization(s)		-		×
k Performance of services or membership or fundraising solicitations for other organization(s)	:	*	×	
I Performance of services or membership or fundraising solicitations by other organization(s)	:	=		×
m Sharing of facilities, equipment, mailing lists, or other assets		E	×	
n Sharing of paid employees		-u	×	
o Reimbursement paid to other organization for expenses		10		×
p Reimbursement paid by other organization for expenses		1p	×	
q Other transfer of cash or property to other organization(s)	-	19		×
r Other transfer of cash or property from other organization(s)		-		×
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	ips and transaction thresh	splot		
(A) Name of other organization	(B) Transactron type (a-r)	(C) Amount involved	(C) It involv	,ed
(1) THE YWCA FOUNDATION OF FORT WORTH & TARRANT COUNTY	υ	2	275,4	463.
(2) THE YWCA FOUNDATION OF FORT WORTH & TARRANT COUNTY	ρ _t		37,0	.060
(3) YWCA OF FORT WORTH & TARRANT COUNTY RESALE SHOP	บ	Т	110,000	.000
(4) YWCA OF FORT WORTH & TARRANT COUNTY RESALE SHOP	Ç4	7	261,074	74.
(5) THE YWCA FOUNDATION OF FORT WORTH & TARRANT COUNTY	K, M, N			o
(6) YWCA OF FORT WORTH & TARRANT COUNTY RESALE SHOP	K,M,N			0.
BAA TEEA5003 02/05/10	Schedul	Schedule R (Form 990) (2009)	(066	(2009)

Schedule R (Form 990) 2009 YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF FORT WORTH & TARRANT COUNTY

75-0829389

限范诉讼 Unrelated Organizations Taxable as a Partnership (Complete if the organization answered 'Yes' to Form 990, Part IV, line 37.)

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

Name, address, and EIN of entity Primary activity (C) (C) (C) (C) (C) (C) (C) (C	(B) Primary activity	Legal domicile (state or foreign country)	Are all partners section 501(c)(3) organizations?	Share of end-of-year assets	(F) Disproportionate allocations?	Code V-UBI amount in box 20 of Schedule K-1 Form (1065)	(H) General or managing partner?	al or ging ler?
		į	Yes No		Yes No	(200.)	Yes	٤
							-	
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	•						•	
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ВАА		TEEA5004 02/05/10				Schedule R (Form 990) (2009)) (066 u	(2009)

Form **886** (Rev April 2009

Application for Extension of Time To File an **Exempt Organization Return**

OMB No. 1545-1709

Department of the Treasury Internal Revenue Service File a separate application for each return. If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868. Partition: Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension — check this box and complete Part I only. All other corporations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits. Name of Exempt Organization Employer identification number Type or print YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF FORT WORTH & TARRANT COUNTY 75-0829389 File by the due date for filing your return See Number, street, and room or suite number. If a P O box, see instructions 512 W. 4TH STREET City, town or post office, state, and ZIP code. For a foreign address, see instructions instructions FORT WORTH ТX 76102 Check type of return to be filed (file a separate application for each return): Form 4720 X Form 990 Form 990-T (corporation) Form 990-BL Form 990-T (section 401(a) or 408(a) trust) Form 5227 Form 990-EZ Form 990-T (trust other than above) Form 6069 Form 990-PF Form 1041-A Form 8870 • The books are in the care of ► BRIAN EATON Telephone No.► (817) 332-6191 FAX No. ► (817) 332-6172___ If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box 🕨 . If it is for part of the group, check this box 🕨 and attach a list with the names and EINs of all members the extension will cover. 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time , 20 10 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: calendar year 20 _ _ _ or X tax year beginning Apr 1 , 20 09 , and ending Mar 31 , 20 10 . Initial return Final return Change in accounting period 2 If this tax year is for less than 12 months, check reason: 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions 3a \$ 0. b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit 3Ы\$ 0. c Balance Due. Subtract line 3b from line 3a Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). 0. See instructions Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for

BAA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

payment instructions.

Form 8868 (Rev. 4-2009)