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Form **990**

Department of the Treasury

Return of Organization Exempt From Income Tax

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

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

2009

OMB No 1545-0047

Open to Public

B Cheo ・ Addr Nam	ck ıf ap	pplicable Please	r, or tax year beginning 09-01-200 C Name of organization	9 and ending 08-31-20	.0	D Employer ide	ntification number
Addr Nam		pplicable please					ntilication number
— Nam			The Young Men's Christian Association				
		label or	of Greater Tulsa Doing Business As			73-057926 E Telephone nu	
		type. See				(018) 747 (1622
Initia	al retur	n Specific Instruc-	Number and street (or P O box if ma	I is not delivered to street addr	ess) Room/suite	(918) 747-9 G Gross receipts 9	
Tem	nınated		420 South Main ste 200			G Gloss lecelpts :	\$ 9,000,333
– Ame	nded r	return	City or town, state or country, and ZII	P + 4			
– _{Appl}	ıcatıon	pending	Tulsa, OK 74103				
			<u> </u>		11/-> 7		•
			I PLANK			ıs a group return ates?	TYes ▼ No
		I	outh Main ste 200				
		Tuisa,	OK 74103		1	ll affiliates include	•
Tax	-exem	pt status 🔽 501(c) (3) 4 (insert no)	. Г ₅₂₇		o," attach a list ip exemption nui	(see instructions)
		www.ymcatuls		,] H(c) GIOC	ip exemption nui	iliber 🟲
		·	tion Trust Association Other			rmation 1000 M	State of logal democile. Ok
Par		Summary	tion Trust Association Other		L Year of to	rmation 1909 M	State of legal domicile Ok
			e organization's mission or most s	significant activities			
		,	rıncıples ınto practıce through pro	5	pirit, mind and	d body for all	
Governance							
<u> </u>							
.	_	0				250/ 61 1	
〔 [,	if the organization discontinued				
		_	nembers of the governing body (P				2
Acuviues &	4	Number of indeper	ndent voting members of the gover	rning body (Part VI, line 1	b)	. 4	2
	5	Total number of er	nployees (Part V , line 2a)			5	71
₹	6	Total number of vo	olunteers (estimate if necessary)			6	2,07
•	7a	Total gross unrela	ted business revenue from Part V	III, column (C), line 12		7a	
	b	Net unrelated bus	iness taxable income from Form 9		7b	1	
				Pric	or Year	Current Year	
	8 Contributions and grants (Part VIII, line 1h)					7,483,358	7,365,011
를	9	Program service	revenue (Part VIII, line 2g) .		2,168,315	1,724,766	
Reveni	10	Investment inco	me (Part VIII, column (A), lines 3	, 4, and 7d)		266,034	-147,933
"	11	Other revenue (P	art VIII, column (A), lines 5, 6d,	8c, 9c, 10c, and 11e)		25,481	23,392
	12	Total revenue—a	dd lines 8 through 11 (must equal	Part VIII, column (A), lir	e		
			<u> </u>			9,943,188	8,965,236
	13		ar amounts paid (Part IX, column (• • •			0
	14		or for members (Part IX, column (A				0
ø	15	•	ompensation, employee benefits (I	Part IX, column (A), lines	5 –	4,728,299	4,583,311
<u> 1</u> 26	16a	10)	lraising fees (Part IX, column (A),		4,728,299	4,303,311	
Бхрепзез	b		enses (Part IX, column (D), line 25) \blacktriangleright 87				
_	17		(Part IX, column (A), lines 11a-1			5,342,775	5,141,877
	18		Add lines 13–17 (must equal Part			10,071,074	9,725,188
	19		penses Subtract line 18 from line			-127,886	-759,952
		Mayonue less ex	Sanda Sabriact fine 10 from fine		Beginnin	g of Current	·
Net Assets of Fund Bafances					_	'ear	End of Year
3 45 H	20	Total assets (Pa	rt X, line 16)			28,361,439	27,239,518
도를	21	Total liabilities (I	Part X, line 26)			15,674,307	15,282,826
ž¤	22	Net assets or fur	nd balances Subtract line 21 from	line 20		12,687,132	11,956,692
Par	t II	Signature Bl	ock				
			erjury, I declare that I have examined this				
		and belief, it is true,	correct, and complete Declaration of prep	parer (other than officer) is bas	ed on all informat	ion of which prepare	er has any knowledge
Sign		*****			2011	04.25	
lere		Signature of office	er		Date	04-25	
		L CHEAN DIANK CE	0				
		SUSAN PLANK CE Type or print nam					
		1 <i>t</i>		Date	Check If	Preparer's identif	ving number
.		Preparer's Signature Alan R	Schmitz	Date	self-	(see instructions)	
Paid					empolyed 🕨 🦵		
Prepa		Firm's name (or your if self-employed),	HoganTaylor LLP			EIN Þ	
Jse O	nly	address, and ZIP + 4	2200 S Utica Pl Suite 400				
			Tulsa, OK 741147000			Phone no 🕨 (9:	18) 745-2333
						i	

Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

See Schedule O

4e	Total program serv	rice expenses►\$	8,254,84	1							
	(Expenses \$	•	luding grants o) (Revenue \$	330,605)					
	Other program ser	vices (Describe in Sch	edule O) See a	also Additional Data fo	or Description						
	YMCA Childcare										
4c	(Code) (Expenses \$	1,422,553	including grants of \$) (Revenue \$	346,100)					
	YMCA Camping										
4b	(Code) (Expenses \$	1,039,593	including grants of \$) (Revenue \$	668,671)					
	YMCA Membership and	Health Enhancement									
4a	(Code) (Expenses \$	5,021,693	ıncludıng grants of \$) (Revenue \$	379,390)					
4	Section 501(c)(3) a		ions and section	on 4947(a)(1) trusts a	largest program services by re required to report the am service reported	•					
	If "Yes," describe th	nese changes on Sched	ule O								
3	Did the organization services?	n cease conducting, or r	nake sıgnıfıcar • • • •	nt changes in how it co	nducts, any program	✓ Yes │ No					
	If "Yes," describe th	nese new services on So	hedule O								
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?										

Dart TV	Chackli	ct of Do	auirad	Schedules
2 II T 1 A	CHECKII	SL UI KE	:uuii eu	ociieuuie:

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

-orm	990 (2009)			Page 4
Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Νo
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		Νο
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		Νο
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No.
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νo
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		Νο
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

1 01111 2 2 0 (2	om 550 (2005)							
Part V	Statements Regarding Other IRS Filings and Tax Compliance							

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
	1a 4			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		Νο
h	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
la	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
ā	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νο
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νο
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
ā	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
,	Organizations that may receive deductible contributions under section 170(c).			
а	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		N o
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Νο
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νο
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
3	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
•	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
LO	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
L1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
L2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			

420 S Main Ste 200 Tulsa, OK 74103 (918) 728-3915

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

Sa	ction A. Governing Body and Management				
	ction A. Governing body and Planagement			Yes	No
				163	140
1a	Enter the number of voting members of the governing body 1a	26			
ь	Enter the number of voting members that are independent 1b	26			
2	Did any officer, director, trustee, or key employee have a family relationship or a business other officer, director, trustee, or key employee?	relationship with any	2		No
3	Did the organization delegate control over management duties customarily performed by of supervision of officers, directors or trustees, or key employees to a management company		3		No
4	Did the organization make any significant changes to its organizational documents since t	•			
_	filed?		4		No
5	Did the organization become aware during the year of a material diversion of the organizat		5		No
6	Does the organization have members or stockholders?		6		Νo
7a	Does the organization have members, stockholders, or other persons who may elect one of governing body?		7a	Yes	
b	A re any decisions of the governing body subject to approval by members, stockholders, other approval app	r other persons?	7b		Νo
8	Did the organization contemporaneously document the meetings held or written actions up year by the following	ndertaken during the			
а	The governing body?		8a	Yes	
ь	Each committee with authority to act on behalf of the governing body?		8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who c				
-	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		Νo
Se	ction B. Policies (This Section B requests information about policies not requ	red by the Internal			
Re	venue Code.)				
				Yes	No
10a	Does the organization have local chapters, branches, or affiliates?		10a	Yes	
b	If "Yes," does the organization have written policies and procedures governing the activiti affiliates, and branches to ensure their operations are consistent with those of the organization		10b	Yes	
11	Has the organization provided a copy of this Form 990 to all members of its governing boo	ly before filing the form?	11	Yes	
444	December in Cabadula O the number of any used by the average term to revise the Farm O	00	11	res	
IIA	Describe in Schedule O the process, if any, used by the organization to review the Form 9	90			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13 $$. $$.		12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interest to conflicts?	sts that could give rise	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the describe in Schedule O how this is done	policy? If "Yes,"	12c	Yes	
13	Does the organization have a written whistleblower policy?		13	Yes	
14	Does the organization have a written document retention and destruction policy?		14	Yes	
15	Did the process for determining compensation of the following persons include a review ar independent persons, comparability data, and contemporaneous substantiation of the deli	d approval by			
_	The organization's CEO, Executive Director, or top management official	peration and decision?	15a	Yes	
	Other officers or key employees of the organization		15a 15b	Yes	
D	· · · · · · · · · · · · · · · · · · ·		120	res	
	If "Yes" to line a or b, describe the process in Schedule O (See instructions)				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or sim taxable entity during the year?		16a		No
ь	If "Yes," has the organization adopted a written policy or procedure requiring the organization	ion to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and taken ste organization's exempt status with respect to such arrangements?		16b		
Se	ction C. Disclosure		_		I
17	List the States with which a copy of this Form 990 is required to be filed ▶OK				
	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 99	D, and 990-T (501(c)			
	(3)s only) available for public inspection Indicate how you make these available Check a Own website Another's website Upon request				
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documenterest policy, and financial statements available to the public See Additional Data Table	•			
20	State the name, physical address, and telephone number of the person who possesses the		ie orda	ınızatıor	ո 🕨
	Ronda C Jenkins-Thompson		9 -		-

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

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

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees. See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if the organization did i	not compen	sate any	y curi	rent	or fo	rmer	ffice	r, dırector, trustee	or key employee	
(A) Name and Title	(B) Average hours	(C) Position (check all that apply)						(D) Reportable compensation	(E) Reportable compensation from related	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See add'l data										

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization 1

			Yes	No		
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If</i> " <i>Yes,"</i> complete Schedule <i>J</i> for such individual	3		No		
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual					
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person	5	,	No		

Section B. Independent Contractors

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

(A)	(B)	(C)
Name and business address	Description of services	Compensation
Wiggins Property 502 S Main Street Tulsa, OK 741034433	Construction	514,394
Final touch Cleaning 10404 E 55th place Tulsa, OK 74146	cleaning Services	220,455
Redwoods Group 2801 Slanter Road Ste 110 Morrisville, NC 27560	Insurance	195,361
CFR INC 5314 S Yale Ave ste 900 Tulsa, OK 74135	ınsurance	120,721
Anago of Tulsa 5800 East Skelly Drive Tulsa, OK 741356444	Cleaning Services	116,651
2 Total number of independent contractors (including but not limited to those listed above) \$100,000 in compensation from the organization ►5	who received more than	

Form 99								Page 9
Part	/1111	Statement of	of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
Contributions, gifts, grants and other similar amounts	1a	Federated cam	paigns 1a					
	ь	Membership du	es 1b	5,113,332				
S, G	c	Fundraising eve	ents 1c					
<u>#</u>	d	Related organiz	rations 1d					
E, E	e	Government grant	s (contributions) 1e	871,729				
ntion er s	f	All other contribute	ons, gifts, grants, and 1f	1,379,950				
ē.	g	similar amounts not included above g Noncash contributions include						
Program Service Revenue			<u> </u>	.	7 205 011			
	h	Total. Add lines	s 1a-1f	•	7,365,011			
- Revenue				Business Code				
	2a	Program Dues		713,940	1,298,592	1,298,592		
	Ь .	Other Related Tree		713,940	357,780	357,780		
Š	C	Other Related Inco	ome	713,940	68,394	68,394		
À	d							-
E E	e f	All other progra	am service revenue					
Eg	'							
<u>~</u>	g		s 2a-2f	+	1,724,766			
	3		ome (including dividend	. F	41,091			41,091
	4		ar amounts) stment of tax-exempt bond ;	· · · · .	41,031			41,031
	5							
		•	(ı) Real	(11) Personal				
	6a	Gross Rents						
	ь	Less rental expenses						
	c	Rental income or (loss)						
	d		me or (loss)					
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of	705,015					
		assets other than inventory						
	b	Less cost or other basis and	894,039					
		sales expenses Gain or (loss)	-189,024					
	d	• •	s)		-189,024			-189,024
	8a	Gross income f			·			, , , , , , , , , , , , , , , , , , ,
E E		events (not inc	luding					
Other Revenue		\$ of contributions	 s reported on line 1c)					
Бе		See Part IV, lır	ne 18					
<u> </u>	h	lass dimast sv	a					
듇	b c		penses b (loss) from fundraising e	Levents 🟲				
_	9a		rom gaming activities					
		See Part IV, lır						
	ь	less direction	penses b					
	"		(loss) from gaming activ					
		Gross sales of						
		returns and allo						
	ь	less cost of -	a oods sold b	52,670				
	c		oogs soid b (loss) from sales of inve	29,278 entory ►	23,392			23,392
		Miscellaneou		Business Code				
	11a							
	ь	<u> </u>						
	С							
	d	All other reven	ue					
	е	Total. Add lines	s 11a-11d	🛌				
	12	Total revenue	See Instructions					+
		. otar revenue.	Sectional Colons	•	8,965,236	1,724,766	(-124,541

Part IX Statement of Functional Expenses

	Section 501(c)(3) and 501(c)(4) organizations m				
	ll other organizations must complete column (A) but are not required to	complete column	ns (B), (C), and (B)	(D).	(D)
	ot include amounts reported on lines 6b, o, 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	384,632		384,632	
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	3,445,728	3,092,701	353,027	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	328,030	264,206	63,824	
10	Payroll taxes	424,921	359,177	65,744	
11	Fees for services (non-employees)				
а	Management				
b	Legal	11,231		11,231	
c	Accounting	20,000		20,000	
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion	181,233	180,485	748	
13	Office expenses	910,222	798,072	28,294	83,856
14	Information technology				
15	Royalties				
16	Occupancy	1,432,786	1,432,523	263	
17	Travel	86,782	57,094	29,688	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	55,236	38,276	 	
20	Interest	537,975	338,132	199,843	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,140,548	1,095,724	· -	
23	Insurance	235,235	203,054	32,181	
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)				
а	Miscellaneous	211,404	137,868	73,270	266
b	Contract Fees	200,901	147,096	50,869	2,936
c	Dues	118,324	110,433	7,891	
d					
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	9,725,188	8,254,841	1,383,289	87,058
26	Joint costs. Check here ► ☐ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet (A) (B) Beginning of year End of year 485.199 229.393 1 1 Cash—non-interest-bearing 540.075 2 500.248 2 403,022 391,120 3 3 4 133,627 4 137.288 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 6 Notes and loans receivable, net 7 8 291,669 9 224,395 Land, buildings, and equipment cost or other basis Complete 39.945.161 10a 10a Part VI of Schedule D 10b 16.526.717 24,151,932 **10c** 23.418.444 b Less accumulated depreciation 1,722,649 11 1.705.592 11 422.919 12 434,885 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . . 14 14 210.347 15 15 198.153 16 28,361,439 16 27,239,518 Total assets. Add lines 1 through 15 (must equal line 34) . . . 588.002 17 393.568 17 Accounts payable and accrued expenses . 18 18 484,713 19 453,231 19 20 20 Liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D . . . 21 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 14,305,000 13,925,000 23 23 Secured mortgages and notes payable to unrelated third parties . . 24 Unsecured notes and loans payable to unrelated third parties 24 511.027 25 Other liabilities Complete Part X of Schedule D 296.592 25 26 **Total liabilities.** Add lines 17 through 25 15,674,307 15,282,826 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 11.744.326 11.013.886 27 Unrestricted net assets 27 28 825.941 28 825.941 Temporarily restricted net assets Fund 116.865 116.865 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34. ö 30 30 Capital stock or trust principal, or current funds . . . Assets 31 Paid-in or capital surplus, or land, building or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 12,687,132 33 Total net assets or fund balances 33 11,956,692 34 Total liabilities and net assets/fund balances 28.361.439 27,239,518 34

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νo
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			
	Separate basis Consolidated basis Both consolidated and separated basis			
3а	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		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

Form **990** (2009)

OMB No 1545-0047

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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

Public Charity Status and Public Support

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

Inspection

Employer identification number

	oung Me eater Tu		an Association				73-0579269					
Pa	rt I	Reas	on for Pul	olic Charity State	us (All organizations	must complete this pa		ions				
The	organiz					gh 11, check only one box						
1	Γ	A churc	h, conventio	on of churches, or as:	sociation of churches s	section 170(b)(1)(A)(i).						
2	Г	A schoo	school described in section 170(b)(1)(A)(ii). (Attach Schedule E)									
3	Г	A hospi	tal or a coop	perative hospital serv	/ice organization descri	bed in section 170(b)(1)(A)(iii).					
4	Γ		a medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the iospital's name, city, and state									
5	Γ	-	•		-	y owned or operated by a	governmental unit	describe	_ ed in			
_	_			A)(iv). (Complete Pa	•							
6	<u> </u>		•	=	=	ribed in section 170(b)(1)						
7	ı	describ	ed ın	t normally receives a A)(vi) (Complete Pa	·	support from a governmen	tal unit or from the	general	public			
8	Γ	A comm	nunity trust	described in section	170(b)(1)(A)(vi) (Con	nplete Part II)						
9	굣	An orga	nızatıon tha	t normally receives	(1) more than 331/3% (of its support from contrib	utıons, membershı	p fees, aı	nd gros	5 S		
		receipts	from activi	ties related to its exe	empt functions—subjec	t to certain exceptions, an	d (2) no more thar	n 331/3%	of			
		ıts supp	ort from gro	ss investment incom	ne and unrelated busine	ss taxable income (less s	ection 511 tax) fro	rom businesses				
		acquire	d by the orga	anızatıon after June 3	30, 1975 See section 5	509(a)(2). (Complete Part	III)					
10	Γ	An orga	nızatıon org	anızed and operated	exclusively to test for p	oublic safety See section 5	509(a)(4).					
11	Γ	one or r	nore publicly	supported organiza	tions described in secti rting organization and c	efit of, to perform the funct on 509(a)(1) or section 5 complete lines 11e throug - Functionally integrated	09(a)(2) See sect h 11h		a)(3).	Check		
е	Γ	other th section	an foundation 509(a)(2)	on managers and othe	er than one or more pub	olled directly or indirectly licly supported organization	ons described in s	ection 50	9 (a)(1	1) or		
f			-	eceived a written det	termination from the IR	S that it is a Type I, Type	II or Type III sup	porting o	rganız	ation,		
g		check t Since A		006, has the organiz	ation accepted any gift	or contribution from any o	fthe			,		
9			g persons?									
		(i) a pe	rson who dır	ectly or indirectly co	ntrols, either alone or t	ogether with persons desc	rıbed ın (ıı)		Yes	No		
		and (III)	below, the g	joverning body of the	the supported organiza	ation?		11g(i)				
		(ii) a fa	mıly membe	r of a person describ	ed ın (ı) above?			11g(ii)				
		(iii) a 3	5% controll	ed entity of a person	described in (i) or (ii) a	bove?		11g(iii)				
h 		Provide	the followin	g information about t	he supported organizat	ion(s)						
	(i) Name suppoi rganiz	e of rted	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section	(iv) Is the organization in col (i) listed in your governing document?	(v) Did you notify the organization in col (i) of your support?	(vi) Is the organization ii col (i) organize in the US?		A mo	vii) ount of oport?		

Total

(see instructions))

Yes

No

Yes

Yes

ınstructions

P	Support Schedule (Complete only if yo					and 170(b)	(1)(A)(vi)
S	ection A. Public Support	a checked tile	DOX OII IIIC 3,	,, or o or rare.	÷·/		
	endar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	(b) 2006	(6) 2007	(d) 2008	(e) 2009	(I) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual						
_	grants ") Tax revenues levied for the						
2	organization's benefit and either						
	paid to or expended on its						
	behalf						
3	The value of services or facilities						
_	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the						
	amount shown on line 11, column						
_	(f) Dublic Support Subtract line F from						
6	Public Support. Subtract line 5 from line 4						
S	ection B. Total Support	1		-			
	endar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	(b) 2000	(6) 2007	(d) 2008	(e) 2009	(1) Total
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
9	sources Net income from unrelated						
9	business activities, whether or						
	not the business is regularly						
	carried on						
10	Other income (Explain in Part						
	IV) Do not include gain or loss						
	from the sale of capital assets						
11	Total support (Add lines 7						
4.5	through 10)	/5					
12	Gross receipts from related activities	,	•			12	
13	First Five Years If the Form 990 is f	or the organizati	on's first, second	, third, fourth, or	fifth tax year as a	501(c)(3) orga	inization, ▶□
	check this box and stop here						-1
S	ection C. Computation of Pub	lic Support P	ercentage				
14	Public Support Percentage for 2009			11 column (f))		14	
15	Public Support Percentage for 2008	Schedule A . Pa	rt II. line 14			15	
	33 1/3% support test—2009. If the	•	,	v on line 13 and	line 14 is 33 1/30		k this hox
	and stop here. The organization qua	-		·	IIIIC 14 13 33 1/3/	o or more, ence	▶ □
ь	33 1/3% support test—2008. If the				5a, and line 15 is	33 1/3% or moi	
	box and stop here. The organization				,		▶
17a	10%-facts-and-circumstances test-	-2009. If the org	anızatıon dıd not	check a box on lı	ne 13, 16a, or 16	b and line 14	
	ıs 10% or more, and ıf the organizat						
	in Part IV how the organization mee	ts the "facts and	l cırcumstances"	test The organiz	ration qualifies as	a publicly supp	
L	organization	_2009 Ifthe c==	onization did net	chack a bay as li	no 12 165 164	or 17a and line	▶□
D	10%-facts-and-circumstances test- 15 is 10% or more, and if the organ	_					
	Explain in Part IV how the organizat						clv
	supported organization						▶ ┌
10	Deiveta Farmdation Ifthe averages	on did not obselv	a hay an line 12	16- 16- 17-	17	hay and cas	•

▶□

Part III Support Schedule for Organizations Described in IRC 509(a)(2)

(Complete	only if you	checked the	box on line	9 of Part I.

Se	ction A. Public Support			,			
Cale	ndar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	in) Gifts, grants, contributions, and membership fees received (Do noi include any "unusual grants")	8,066,090	6,253,302	6,673,077	8,444,633	8,663,603	38,100,70
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	1,912,317	2,049,514	1,982,534	1,232,521	478,844	7,655,73
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6 7a	Total. Add lines 1 through 5 A mounts included on lines 1, 2, and 3 received from disqualified	9,978,407	8,302,816	8,655,611	9,677,154	9,142,447	45,756,43
b	persons A mounts included on lines 2 and 3 received from other than	r -					
	disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
8	Add lines 7a and 7b Public Support (Subtract line 7c from line 6)						45,756,43.
	ction B. Total Support		T	<u> </u>			
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	A mounts from line 6	9,978,407	8,302,816	8,655,611	9,677,154	9,142,447	45,756,43.
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	77,142	483,507	191,302	43,452	41,091	836,49 [,]
Ь	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b	77,142	483,507	191,302	43,452	41,091	836,49
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support (Add lines 9, 10c, 11 and 12)	10,055,549	8,786,323	8,846,913	9,720,606	9,183,538	46,592,92
14	First Five Years If the Form 990 is check this box and stop here	for the organization	on's first, second,	thırd, fourth, or f	ifth tax year as a	501(c)(3) organ	ization, ▶┌
Se	ction C. Computation of Pub						
15	Public Support Percentage for 200	9 (line 8 column (f	divided by line	13 column (f))		15	98 200 %
16	Public support percentage from 20	08 Schedule A, Pa	art III, line 15			16	98 240 %
Se	ction D. Computation of Inv	estment Inco	me Percentac	je			
17	Investment income percentage for				(f))	17	1 800 %

18 Investment income percentage from 2008 Schedule A, Part III, line 17

17 1 800 % 18 1 760 %

19a 33 1/3% support tests—2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

33 1/3% support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

Part IV

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

Schedule A (Form 990 or 990-EZ) 2009

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DLN: 93493130014631

OMB No 1545-0047

Open to Public Inspection

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

	me of the organization		Emp	loyer identifica	tion numbe	er
	e Young Men's Christian Association Greater Tulsa		73-0	579269		
Pa	organizations Maintaining Donor Acorganization answered "Yes" to Form 99				. Comple	te if the
		(a) Donor advised funds	(b) Funds and of	ther accou	nts
1	Total number at end of year					
2	Aggregate contributions to (during year)					
3	Aggregate grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advi- funds are the organization's property, subject to the	-	ıor advı	sed	☐ Yes	┌ No
6	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben conferring impermissible private benefit				☐ Yes	┌ No
Рa	rt III Conservation Easements. Complete	ıf the organızatıon answered "Yes" t	o Forn	າ 990, Part IV	, line 7.	
1 2	Purpose(s) of conservation easements held by the oil Preservation of land for public use (e.g., recreating Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualiceasement on the last day of the tax year	on or pleasure) Preservation of an Preservation of a G	certifie	d historic struct		a
	easement on the last day of the tax year			Held at the	End of the	Voca
а	Total number of conservation easements		2a	neid at the	ena or the	теаі
a b	Total acreage restricted by conservation easements		2b			
c	Number of conservation easements on a certified his		2c			
d	Number of conservation easements included in (c) ac	` '	2d			
3	Number of conservation easements modified, transfe	· · · · · · · · · · · · · · · · · · ·		e organization (durina	
	the taxable year -	rred, released, extiligationed, or terminate	a by th	e organization t	adinig	
4	Number of states where property subject to conserva	ation easement is located ►				
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds?		dling of	violations, and	┌ Yes	┌ No
5	Staff and volunteer hours devoted to monitoring, insp	ecting and enforcing conservation easem	nents d	uring the year 🕨	-	
7	A mount of expenses incurred in monitoring, inspecti	ng, and enforcing conservation easements	s during	; the year ► \$ _		
8	Does each conservation easement reported on line 2 $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)$?	(d) above satisfy the requirements of sec	tion		☐ Yes	┌ No
9	In Part XIV, describe how the organization reports contained balance sheet, and include, if applicable, the text of the organization's accounting for conservation easen	he footnote to the organization's financial				
Par	t III Organizations Maintaining Collectio Complete if the organization answered '		or Otl	ner Similar <i>I</i>	Assets.	
1a	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fin	116, not to report in its revenue stateme for public exhibition, education or research	ch ın fu			е,
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	oublic exhibition, education, or research i			•	
	(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

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

following amounts required to be reported under SFAS 116 relating to these items

ar	Organizations Maintaining Co	<u>llections of Art</u>	, His	toric	cal Tre	eası	ires, or (<u> Othe</u>	r Simila	r Asse	ets (co	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	y of th	e foll	owing th	at aı	re a sıgnıfıc	ant ι	use of its co	ollection	n	
а	Public exhibition		d	Γ	Loan o	rexc	hange prog	rams	5			
b	Scholarly research		e	Γ	Other							
c	Preservation for future generations											
1	Provide a description of the organization's co	ollections and expla	ın how	they	further	the	organızatıo	n's e	xempt purp	ose in		
5	During the year, did the organization solicity assets to be sold to raise funds rather than t			,					nılar	Г	Yes	┌ No
Pai	tt IV Escrow and Custodial Arrang						n answere	ed "Y	es" to Fo	rm 990),	
	Part IV, line 9, or reported an ar		•									
.a	Is the organization an agent, trustee, custoo included on Form 990, Part X?	ian or other interme	diary	for c	ontributi	ons	or other as	sets	not	Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	/ and complete the	follow	ıng ta	ble							
										A mou	ınt	
с	Beginning balance							1c				
d	Additions during the year							1d				
e	Distributions during the year							1e				
f	Ending balance							1f				
la	Did the organization include an amount on Fo	orm 990, Part X, line	e 21?							Γ	Yes	Г No
	If "Yes," explain the arrangement in Part XI\											
Pa	rt V Endowment Funds. Complete	If the organization (a)Current Year		were)Prior			Form 990 wo Years Bad		rt IV, line Three Years		NEQUE V	ears Back
a	Beginning of year balance	1,116,460	(D		,238,215	(6)1	wo rears bac	.k (u	Tillee reals	Dack (e	e) Four Te	ears back
b	Contributions	, ,			500							
c	Investment earnings or losses	34,256			-68,308							
d	Grants or scholarships	·										
e	Other expenditures for facilities	53,947			53,947							
	and programs											
f	Administrative expenses											
g	End of year balance	1,096,769		1	,116,460							
	Provide the estimated percentage of the year	r end balance held a	as									
а	Board designated or quasi-endowment 🕨	87.600 %										
Ь	Permanent endowment 12.400 %											
c	Term endowment ▶											
a	Are there endowment funds not in the posse	ssion of the organiza	ation t	hat a	re held	and a	administere	d for	the			
	organization by (i) unrelated organizations					_				3a(i)	Yes	No No
	(ii) related organizations				·					3a(ii)		No
b	If "Yes" to 3a(II), are the related organization									3b		
ļ	Describe in Part XIV the intended uses of th	e organization's end	dowme	nt fu	nds						•	
aı	tt VI Investments—Land, Building:	s, and Equipme	nt. S	ee F	orm 99	0, P	art X, line	10.				
	Description of investment				Cost or of (investm		(b) Cost or o		(c) Accumu depreciat		(d) Boo	ok value
a	Land		•				2,20	0,289			-	2,200,289
b	Buildings						25,64	5,580	10,4	50,440	1!	5,195,140
c	Leasehold improvements						6,17	2,821	1,0	35,090	ļ	5,137,731
d	Equipment						5,92	6,471	5,0	41,187		885,284
e	Other											

23,418,444

Part VIII Investments—Other Securities. See	Torin 990, Part X, line 1.	
(a) Description of security or category (including name of security)	(b)Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives		·
Closely-held equity interests		
Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)		
Part VIII Investments—Program Related. See		13.
		(c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
Total. (Column (b) should equal Form 990. Part X. col (B) line 13)		
IOTAL (COUMD CD) SDOUIG EQUAL FORM 990. PART X. COLUB LIDE 13)		
Part IX Other Assets. See Form 990, Part X, III	ne 15.	(b) Book value
	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, III	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, III	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, III	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, III	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, III	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, III	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, III	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, III	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, III	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, III	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, III	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, III	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, III	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, III	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, III	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, III (a) Descrip	ne 15. Otion	
Part IX Other Assets. See Form 990, Part X, lin (a) Descrip	ne 15. Otion	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	ne 15. Otion	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes Capital Lease Obligations	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes Capital Lease Obligations	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes Capital Lease Obligations	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes Capital Lease Obligations	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes Capital Lease Obligations	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes Capital Lease Obligations	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes Capital Lease Obligations	5.)	
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Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes Capital Lease Obligations	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes Capital Lease Obligations	5.)	
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Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes Capital Lease Obligations	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes Capital Lease Obligations	5.)	

Total revenue (Form 990, Part VIII, column (A), line 12) Total expenses (Form 990, Part IX, column (A), line 25) Excess or (deficit) for the year Subtract line 2 from line 1 Net unrealized gains (losses) on investments Donated services and use of facilities	9,725,188 -759,952 -40,796
3 Excess or (deficit) for the year Subtract line 2 from line 1 4 Net unrealized gains (losses) on investments	-759,952
4 Net unrealized gains (losses) on investments	-40,796
The amended game (1999), on missioning	<u>'</u>
5 Donated services and use of facilities	
	70,308
6 Investment expenses 6	
7 Prior period adjustments	,
8 Other (Describe in Part XIV)	1
9 Total adjustments (net) Add lines 4 - 8	29,512
10 Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	730,440
Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return
1 Total revenue, gains, and other support per audited financial statements	9,024,026
2 A mounts included on line 1 but not on Form 990, Part VIII, line 12	
a Net unrealized gains on investments	
b Donated services and use of facilities	
c Recoveries of prior year grants	
d Other (Describe in Part XIV)	
e Add lines 2a through 2d	58,790
3 Subtract line 2e from line 1	8,965,236
4 A mounts included on Form 990, Part VIII, line 12, but not on line 1	
a Investment expenses not included on Form 990, Part VIII, line 7b . 4a	
b Other (Describe in Part XIV)	
c Add lines 4a and 4b	0
Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	- / /
Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per	
Total expenses and losses per audited financial statements	9,754,466
2 A mounts included on line 1 but not on Form 990, Part IX, line 25	
a Donated services and use of facilities	
b Prior year adjustments	
c Other losses	
d Other (Describe in Part XIV)	
e Add lines 2a through 2d	29,278
3 Subtract line 2e from line 1	9,725,188
4 A mounts included on Form 990, Part IX, line 25, but not on line 1:	
a Investment expenses not included on Form 990, Part VIII, line 7b 4a	
b Other (Describe in Part XIV)	
c Add lines 4a and 4b	: 0
5 Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	9,725,188
Part XIV Supplemental Information Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV	

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

Ident if ier	Return Reference	Explanation
Part X		The YMCA adopted FASB new guidance on accounting for uncertainty in income taxes for year ended August 31, 2010 Management evaluated the YMCA's tax positions and concluded that the YMCA had taken no uncertain tax positions that require adjustment to the financial statements to comply with the provisions of this guidance Generally, the YMCA is no longer subject to income tax examinations by the US Federal, state or local authorities for years before 2007
Part XII, Line 2d - Other Adjustments		Cost of Goods Sold 29278 Net Unrealized loss on Investments -40796
Part XIII, Line 2d - Other Adjustments		Cost of Goods Sold 29278

DLN: 93493130014631

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest

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

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

	Young Men's Christian Association			. ,			
	Greater Tulsa		-	73-0579269			
Pa	rt I Questions Regarding Compensatio	<u>n</u>					
				Г		Yes	Νo
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part III						
	First-class or charter travel		Housing allowance or residence for p	ersonal use			
	Travel for companions	Γ	Payments for business use of persor	nal residence			
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation	n fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauff	eur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain						
2	Did the organization require substantiation prior to in officers, directors, trustees, and the CEO/Executive				2		
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all the		•				
	Compensation committee	<u> </u>	Written employment contract				
	Independent compensation consultant	∀	' '				
	Form 990 of other organizations	<u> - </u>	Approval by the board or compensat	ion committee			
4	During the year, did any person listed in Form 990, or a related organization	Part VII	, Section A , line 1a with respect to th	e filing organization			
а	Receive a severance payment or change-of-control	paymen	t?		4a		Νo
b	Participate in, or receive payment from, a suppleme	ntal non	qualified retirement plan?		4b		Νo
c	Participate in, or receive payment from, an equity-b	ased co	mpensation arrangement?		4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pr	ovide th	e applicable amounts for each item in	Part III			
	Only 501(c)(3) and 501(c)(4) organizations only mu	ust comp	plete lines 5-9.				
5	For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of	line 1a,	did the organization pay or accrue an	У			
а	The organization?				5a		Νo
b	Any related organization?				5b		Νo
_	If "Yes," to line 5a or 5b, describe in Part III						
6	For persons listed in form 990, Part VII, Section A, compensation contingent on the net earnings of	line 1a,	did the organization pay or accrue an	У			
а	The organization?				6a		Νo
Ь	Any related organization?				6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III						
7	For persons listed in Form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes," of			-fixed	7		No
8	Were any amounts reported in Form 990, Part VII, p subject to the initial contract exception described in in Part III				8		No
9	If "Yes" to line 8, did the organization also follow the	o robu++	able procumption procedure decamber	t in Bogulations	- 0		IN O
7	one tion F3 40 F9 6/6)2	e reputt	able presumption procedure described	i iii Kegulations			

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

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

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

(A) Name		(B) Breakdown of (i) Base compensation	W-2 and/or 1099-MI (ii) Bonus & incentive compensation	SC compensation (iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
Susan Plank	(I) (II)	162,738 0	0	0	20,528 0			0

Part III Supplemental Information

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

]	Ident if ier	Ret urn Ref erence	Explanation
]	Ident if ier	Reference	Explanation

Schedule J (Form 990) 2009

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493130014631

OMB No 1545-0047

2009

Open to Public

Inspection

Supplemental Information on Tax Exempt Bonds

Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O (Form 990).
 ★ Attach to Form 990.
 ★ See separate instructions.

Department of the Treasury Internal Revenue Service

Schedule K

(Form 990)

Name of the organization
The Young Men's Christian Association

Employer identification number

73-0579269

of Greater Tulsa

Part I Bond Issues

(h) On (g) Defeased Behalf of

(g) Defeased Behalf of (a) Issuer Name (b) Issuer EIN (c) CUSIP # (d) Date Issued (e) Issue Price (f) Description of Purpose Issuer Yes Yes No No Tulsa Industrial Authority 8996767KX 11-01-2006 17,000,000 | See Statement in Schedule O Χ Х

Part III Proceeds

		Α	В	C	D	E
1	Total proceeds of issue					
2	Gross proceeds in reserve funds					
3	Proceeds in refunding or defeasance escrows					
4	Other unspent proceeds					
5	Issuance costs from proceeds					
6	Working capital expenditures from proceeds					
7	Capital expenditures from proceeds					

8 Year of substantial completion

_	·										
		Yes	No								
9	Were the bonds issued as part of a current refunding issue?										
10	Were the bonds issued as part of an advance refunding issue?										
11	Has the final allocation of proceeds been made?										
12	Does the organization maintain adequate books and records to support the final allocation of proceeds?										
Do.	Duinate Business Has										

Part III Private Business Use

			4	E	3		С		D		Е
		Yes	No								
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?										
2	Are there any lease arrangements with respect to the financed property which may result in private business use?										

3 Cileudie r	(101111 990) 2009							
Part III	Private Business Use (Continued)							
			A	E	3	(С	
		Yes	No	Yes	No	Yes	No	Ye

			<i>F</i>	4	6	5	'	C		D		E
			Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
За	Are there any management or service contracts with respect to financed property which may result in private business use?	the										
3b	Are there any research agreements with respect to the financed which may result in private business use?	d property										
Зс	Does the organization routinely engage bond counsel or other o counsel to review any management or service contracts or reseason											
4	Enter the percentage of financed property used in a private bus by entities other than a section 501(c)(3) organization or a sta government											
5	Enter the percentage of financed property used in a private bus as a result of unrelated trade or business activity carried on by organization, another section 501(c)(3) organization, or a state government	your										
5	Total of lines 4 and 5											
7	Has the organization adopted management practices and proce ensure the post-issuance compliance of its tax-exempt bond li											
Par	t IV Arbitrage		•					•	•	'		•
			A		В		С		D		l	E
		Yes	No	Yes	No	Yes	s N	lo	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?											
2	Is the bond issue a variable rate issue?											
За	Has the organization or the governmental issuer identified a hedge with respect to the bond issue on its books and records?											
b	Name of provider						_		·			
С	Term of hedge											
1a	Were gross proceeds invested in a GIC?											
b	Name of provider											
С	Term of GIC											
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?											
5	Were any gross proceeds invested beyond an available temporary period?											
5	Did the bond issue qualify for an exception to rebate?											

Software ID: **Software Version:**

EIN: 73-0579269

Name: The Young Men's Christian Association

of Greater Tulsa

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

SCHEDULE 0 (Form 990) Department of the Treasury

Internal Revenue Service

Identifier

Form 990, Part

Form 990, Part VI,

Section C, line 19

Identifier

Identifier

Return

Return

Reference

Return

Reference

Supplemental Information to Form 990

 $\label{lem:complete} \textbf{Complete to provide information for responses to specific questions on } \\$ Form 990 or to provide any additional information. ► Attach to Form 990.

OMB No 1545-0047

DLN: 93493130014631

Employer identification number Name of the organization The Young Men's Christian Association of Greater Tulsa

	73-0579269	
anation	1	

ldentifier	Return Reference	Explanation
Form 990, Part III, line 3	Changes in Program Services	Ended residence program at the downtown YMCA location on 515 S. Denver, Tulsa, Ok effective January 1, 2010

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 7a		The Organization has members who annually elect the governing body

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		The Organization's Finance Committee is responsible for reviewing the Form 990 before it is finalized and signed

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 12c		The Organization's Board members and employees are required to sign the conflict of interest policy annually. Additionally, Board Members may recuse themselves or appoint another Board Member for recusal if a conflict of interest arises during a Board meeting. Ongoing Board education occurs throughout the year to remind Members of the Organization's conflict of interest policy.

Explanation

The Organization's conflict of interest policy is available upon request. The Organization is in the process

of making the conflict interest policy available through its wiebsite. The Organization's financial statements

Every 3 to 5 years, the finance committee reviews audit proposals and makes an independent auditor selection

Explanation

All of the Organization's compensation packages are determined through the use of the Hay Salary

VI, Section B, Inne 15 Administration System, a point and base pay system This process comes from YUSA to You determining compensation. The Organization also uses comparability data from other like when it comes to any compensation/benefit that is not salary based.					
ldentifier	Return Reference	Explanation			

		are available upon request and included with its Annual Report on the Organization's wiebsite
ldentifier	Return	Explanation
	Reference	
Form 990,		The organization's finance committee meets monthly and is responsible for reviewing and approving monthly
Part xı, line 2c		financial statements and reports It is responsible for review and approval of the organization's audit report

This process is consistent with prior years

ldentifier	Return Reference	Explanation
Form 990, Part III, Line 1		The YMCA of Greater Tulsa is a volunteer led public charity that includes men, women and children of all ages, abilities, incomes, races and religions. Our mission is to put Christian Principles into practice through programs that build strong kids, families and communities. The core YMCA values of honesty, caring, respect and responsibility are consciously incorporated into each YMCA activity, creating an environment where members, volunteers and staff can truly reach their full potential. While these core principles remain steadfastly the same, YMCA programs are constantly changing to meet the evolving needs of today's families and communities. The YMCA of today offers comprehensive community programming and wholesome activities for people of all ages. Last year, through the help of individual donors and a generous philanthropic community, the YMCA of Greater Tulsa provided over \$1.5 million in direct financial assistance. This support allows our YMCA to keep our mission driven promise of never turning a child or family away because they are unable to pay.

Form800. ForgramDescriptions Strategy plant goale of the year of greater tube. Three years ago, the metropolan board of discretories, soff, and bench acknowly board marrieds recreated the 2006-2013 years satisfage plan What follows is our beds year on three or tools are seven to record by the V. 1450-201 and it is included by the V. 1450-201 and it is a format or command a crime. An estimated 20% of charter in Tutus County don't greate the trong ormanizes. Challenge During the few hours after school challen are non-the key to participated in misy behavior and become a victim or command a crime. An estimated 20% of challenge in the V. 1460-200 and in the potential of the victim in Tutus County don't greate in the potential overlap so site and off or supportive electronic solution. The V. 1460-200 and the victim of the victim of the board of the V. 1460-200 and the victim of the victim of the board of the V. 1460-200 and the victim of the victim of the victim of the solution of the V. 1460-200 and victim of the victim of	Brit III directors, storf, and branch advisory board members consiste the 2008-2013 ymos strategic pish. What follows is our blood vision in three ordinal areas that are asses of focus. You'ld be present the window of the window of the following the properties of every? Promotine of the WIASA as part of its national plan to retriand the YIASA as part of its national plan to retriand the YIASA as part of its national plan to retriand the YIASA as part of its national plan to retriand the YIASA as part of the national plan to retriand the YIASA as part of the national progress in each area. You'ld Development Fact Strong kids and families translate to strong communes. Challenge During the few Notices after stord, children are note lakely to procreate in raisy between dame become in the national of qualty time families spend together year. The YIA will help you'ld succeed through programs that develop salls and offer supportive relationships will be strengthering the bonds of family. Response Provide a Graduale Calaborna (200) program in all relationships will be strengthering the bonds of family. Response Provide a Graduale Calaborna (200) program in all relationships will be strengthering the bonds of support from the program targeting madde- and right-school suderies. When the community partitions to mesure our Graduale Calaborna and Achieves participants have access to workplace readness skills and college access support frovide family-strengthering schedules, activities and programs. Provide camping experiences that will help children discover the workplace and programs and programs. Provide camping experiences that will help children discover the workplace and programs are provided to the college of the programs. Provide camping experiences that will help children discover the workplace and the provided programs and provided the provided programs and programs and programs. Provide camping experiences that will help children discover the workplace and programs and programs and programs and programs and progra	Part III,	directors, staff, and branch advisory board members created the 2008-2013 ymca strategic plan. What follows is our bold vision in three critical areas that are areas of focus. Youth Development Healthy Living Social Responsibility. These three areas were created by the Y-USA as part of its national plan to rebrand the YMCA as the Y and focus the efforts of every. Y branch toward meeting common goals. In this 990, we are pleased to announce significant progress in each area. Youth Development Fact. Strong kids and families translate to strong communities. Challenge During the few hours after school, children are more likely to participate in risky behavior and become a victim of or commit a crime. An estimated 20% of children in Tulsa County don't graduate from high school. Oklahoma's divorce rates are among the worst in the nation, and the average child spends six hours a day in front of a screen, impacting the amount of quality time families spend together Vision. The Y will help youth succeed through programs that develop skills and offer supportive relationships while strengthening the bonds of family. Response. Provide a Graduate Oklahoma (GO) program in all Y elementary and after-school sites. Establish a membership program targeting middle- and high-school students. Work with community partners to ensure our Graduate Oklahoma and
members that reflect the diversity of the community ACHIEVEMENTS 2009-2010 Raised \$548,611 from the Strong Kids campaign Engaged 136 board and committee volunteers and 1,943 program volunteers. Partnered with more	Kids campaign goal 100% of Y board and staff contribute Establish an improved plan to measure member giving Increase member giving above the current 3% rate. Increase the ratio of annual charitable support to operating revenue to 6%, with the intent to increase to 15% annually by 2013. Establish partnerships with organizations whose missions align to meet our Strategic Plan goals. Increase the number of active branch advisory board members that reflect the diversity of the community. ACHIEVEMENTS 2009-2010 Raised \$548,611 from the Strong Kids campaign. Engaged 136 board and committee volunteers and 1,943 program volunteers. Partnered with more		strengthening schedules, activities and programs. Provide camping experiences that will help children discover the winders of a natural world and reduce the amount of time children are plugged into a screen Success Measures 80% of Carduale Oklahorra participants mentain or reduce their BMI 85% of CQ participants enter high school 75% of Congrap participants enter high school 75% of Congrap participants are congraphed to the plugged of the program was purely and the plugged of the program was purely and increase in the amount of the they spend together ACHEVEMENTS 2009-2010 Tere Membership program was allunched to provide mentitives and support, and to attract and retain tens in our 7's. Craduales Oklahorna is conducted at 8 sites, reaching more than 500 children. Farmly events are taking place at every branch Family Literacy program was picted and continues to connect familes to their children's education. Over 500 familes were served through Y Camping programs this surmore. Success. Dylin Develops Character My son Dylin and I have been members of the Y for many years. When it was time for Dylan to go to kindergarten, we chose for him to attend the before- and after-school program provided by the Ovasso Family YIKCA. Oylan had a rough first year learning to adjust to the rules and character trads to sught at the Y. Nearly every dey jiget a call about his behavior in form mer with Leura Clary, director of youth and family programs. It work to work together with the Y staff. This surmod out to be a great decision if be became really involved with the counselors and they were amazingly patient working with him. He has also attended the Summar Camp programs enjoyer it has a surezed me seeing the change in my so nace he has been in these wonderful programs. In avent received a call from the Y about my son's behavior in along the him with the year and the surface of the year and the second of the summar and the programs. Though stream the work of the public was a reverse of the work of the public was a surface of the

	Reference	·
Form 990, Part III, Line 4 (continued)		Formed a special partnership with Building Tulsa Building Lives-including the Mental Health Association in Tulsa and The Zarrow Families Foundation-to successfully transition our downtown residents to their new and improved homes. Success Brian Maximizes His Membership When I moved to Tulsa to be a Teacher For America corps member, I was faced with many stressful decisions and transitions. One transition, however, was especially easy selecting a membership at the Y-I am so grateful that the YMCA of Greater Tulsa provided Teach for America corps members with complimentary memberships. My fellow corps members and I sustained long hours, working all day and usually most evenings and weekends. I realized that in order to remain committed to my students, I also had to ensure that I was able to maintain a sound mind and body. Fellow corps members and I made it a priority to maximize our Y-memberships so graciously provided, often making group outings to work out or take classes. My friends and I were regulars at the beautiful new downtown location. We took spin classes with Denai and kickboxing with Haley. These much-needed breaks were essential in re-energizing us and enabling us to maintain a healthy balance between our pressing work and our personal well-being. I speak for all the Teach For America corps members when I say that we simply cannot thank you enough for the complimentary Y-memberships.
ldentifier	Return	Explanation

Explanation

	Reference	
Form 990, Part VI, Line 19		The Form 990 Tax Return is available through Guide Star and it is available upon request. The conflict of interest policy and the financial statements are also available upon request. The annual report is accessible on our wiebsite. We are in the process of making the Form 990 and the conflict of interest policy available on our wiebsite.
ldentifier	Return	Explanation

ldentifier	Return Reference	Explanation
Schedule K, Part I, Line A, Column (F)		(A) The renovation of existing YMCA facility, including roof renovation and replacement, located at 5002 South Fulton, Tulsa, OK, and (B) The acquisition and construction of a new YMCA facility to be located at 1120 East Pine, Tulsa, OK, and (C) The construction and equipping of an addition to the refinancing of interim bank indebtedness incurred to finance the construction of a new YMCA facility located at 8300 Ow asso Expressway, Owasso, OK, and (D) The acquisition and construction of a new facility to be located at 8501 South Garnett Road, Broken Arrow, OK, and (E) The refunding and redemption of outstanding revenue bonds (YMCA of Greater Tulsa Project), series 1999 issued in the original aggregate principal amount of \$6,000,000 by the Tulsa Industrial Authority

Identifier	Return Reference	Explanation
		The following questions are not applicable to the Organization Part V Questions 3b, 5c, 6b, 7b, 7g, 7h, 8-12b Part VI, Section B Question 16b Part XI Question 3b

Additional Data

Software ID:

Software Version:

EIN: 73-0579269

Name: The Young Men's Christian Association

of Greater Tulsa

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

(Code) (Expenses \$	255,979	including grants of \$) (Revenue \$	236,259)
Sports and Recreat	ion				
(Code) (Expenses \$	260,530	including grants of \$) (Revenue \$	70,065)
YMCA Residence P	rogram				
(Code) (Expenses \$	254,493	including grants of \$) (Revenue \$	24,281)

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

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per	Posi t	tion (hat a	che)			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
Tıp Burch Board Member		×						0	0	0
Brian Carney Board Member		х						0	0	0
Manyles Gaines Board Member		х						0	0	0
Derek Gates Board Member		х						0	0	0
Bob Geweniger Board Member		х						0	0	0
Leigh Goodson Board Member		х						0	0	0
David Hays Board Member		х						0	0	0
Rıchard Hedgecock Board Member		х						0	0	0
John Hickey Board Member		х						0	0	0
Molly Jarvis Board Member		х						0	0	0
Jım Kneale Board Member		х						0	0	0
Steve Malcolm Board Member		х						0	0	0
Xavier Neira Board Member		х						0	0	0
Steven Nell Board Member		х						0	0	0
Elliot Nelson Board Member		Х						0	0	0
Paul Samuels Board Member		Х						0	0	0
Mary Smith Board Member		х						0	0	0
Will Smith Board Member		Х						0	0	0
Hetty Fore board Member		Х						0	0	0
Suzann Stewart Board Member		Х						0	0	0
Morris Strom Board Member		Х						0	0	0
Doug Walker Board Member		Х						0	0	0
Rene Witten Board Member		Х						0	0	0
Rex Woods Board Member		Х						0	0	0
Laurie Tilley Board Member		Х						0	0	0

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

(A) Name and Title	(B) A verage hours	(C) Position (check all that apply)						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
Kım Jackson board Member		х						0	0	0
Susan Plank Chief Executive Officer	40 00			х				162,738	0	20,927
SAM CARROLL Chief Operating Officer	40 00			х				88,838	0	24,356
Ronda Jenkins-Thompson Chief Financial Officer	40 00			x				83,062	0	10,431