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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)

OMB No 1545-0047

Internal	Revenue	e Service The	e organization may have to use	a copy of this return	n to satisfy st	ate reporting	requirements	Inspection
A Fo	r the	2009 calendar y	ear, or tax year beginning 09-	01-2009 and endin	g 08-31-2010		D Formlesses id	
		applicable Please	C Name of organization YOUNG MENS CHRISTIAN ASS	OCIATION OF				lentification number
☐ Add	dress cl	hange use IRS label or	MIDLAND TEXAS				75-08717 <b>E Telephone</b> n	
Na	me cha	ange <b>print or</b> type. Se	r   -				•	
Init	tıal retu	ırn Specific	_   Nullibel and street (of P O bo	x ıf maıl ıs not delivered	to street address	s) Room/suite	(432) 682- <b>G</b> Gross receipts	
Tei	mınate	ed tions.	P O BOX 954				G Gloss receipt	
☐ Am	ended	return	City or town, state or country, MIDLAND, TX 79702	and ZIP + 4				
Г Арі	plication	n pending	11100 WD, 1X 73702					
			lame and address of principal	officer		<b>H(a)</b> Is thi	s a group retui	rn for
			RGE FIERRO N BIG SPRING ST			affilia	tes?	⊤Yes ▼ No
		MID	LAND,TX 79701			H(b) Are all	l affiliates inclu	ded?
				=		If "No	o," attach a lis	t (see instructions)
<u>I</u> 1a	x-exen	npt status   50:	1(c) ( 3 ) ◀ (insert no )	a)(1) or   527		H(c) Grou	p exemption n	umber 🟲
J W	ebsite	e: F midlandymo	ca org					
		ganization 🔽 Corpo	oration Trust Association O	her ►		<b>L</b> Year of for	mation 1953	M State of legal domicile TX
Pa	rt I	Summary						
	1	Briefly describe SEE SCHEDULI	the organization's mission or E O	most significant acti	vities			
ပို								
Governance	2	Check this box	► if the organization discon	inued its operations	or disposed o	of more than 2	25% of its net	assets
	3		ig members of the governing b					<b>3</b> 17
<b>න්</b> ග්	4		pendent voting members of the				. 4	17
₽	5	Total number of	employees (Part V , line 2a)					5191
Activities &	6	Total number of	volunteers (estimate if neces	sary)			(	<b>5</b> 400
⋖	7a	Total gross unre	elated business revenue from	Part VIII, column (C	), line 12 .	•	7	<b>'a</b> 0
	Ь	Net unrelated b	usiness taxable income from f	orm 990-T, line 34		1		'b
						Prio	r Year	Current Year
ā	8		and grants (Part VIII, line 1h)				1,044,549	658,721
Rayenue	9	_	ce revenue (Part VIII, line 2g		2,455,300	2,768,773		
产	10 11		come (Part VIII, column (A), lunes				26,534	23,700
	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)  Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)							-33,000
	ļ <u> </u>	12)	<u> </u>	<u></u>			3,526,383	3,416,194
	13		nılar amounts paıd (Part IX, co					0
	14		o or for members (Part IX, col			0		
8	15	Salaries, other	r compensation, employee ben	etits (Part IX, colum	n (A), lines 5		1,600,194	1,624,055
Expenses	16a	Professional fu	undraising fees (Part IX, colun	ın (A), lıne 11e) .			7,482	2,909
ੜੇ	ь	Total fundraising e	expenses (Part IX, column (D), line 2	5) <b>•</b> 7,615				
	17	Other expense	es (Part IX, column (A), lines :			1,422,411	1,662,050	
	18	•	s Add lines 13–17 (must equ			3,030,087	3,289,014	
	19	Revenue less	expenses Subtract line 18 fro	m line 12		496,296	127,180	
Not Assets or Fund Balances							of Current ear	End of Year
teger Teger	20	Total assets (I	Part X, line 16)		10,339,005	10,158,771		
A B	21		s (Part X, line 26)				617,837	300,636
žĒ	22	Net assets or	fund balances Subtract line 2	1 from line 20			9,721,168	9,858,135
Pai	rt II	Signature	Block					
			f perjury, I declare that I have exam ie, correct, and complete Declaration					
		-						
Sign		*****					04-01	
Here	е	Signature of of	fficer			Date		
		George Fierro Type or print n	Executive Director name and title					
		<b>       </b>		Date		heck If	Preparer's ident	tifving number
Paid		Preparer's signature C M	Marc Martin CPA	Date	S€	elf	(see instruction	
	arer's	Firm's name (or in	ours L CMarc Martin CPA	mpolyed 🕨 🔽				
Use		ıf self-employed),						
- <b>-</b>		address, and ZIP +		Phone no (432) 685-0094				
	4L - T	<u> </u>	Midland, TX 797021775	-hava2 /			1 '	
ıvı ay	rue IR	to discuss this re	eturn with the preparer shown	above ⁄ (see instruct	ions)			┌Yes ┌No

#### Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

2	Did the organization u the prior Form 990 or		nt program servi	ces during the year v	which were not listed on	┌ Yes ┌ No
	If "Yes," describe thes	se new services on Sc	hedule O			
3	Did the organization c	ease conducting, or m	ake significant c	hanges in how it con	ducts, any program	┌ Yes ┌ No
	If "Yes," describe thes	se changes on Schedu	le O			
4	Section 501(c)(3) and		ons and section 4	4947(a)(1) trusts ar	argest program services by e required to report the amo ervice reported	
4a	(Code	) (Expenses \$	2,038,873 in	cluding grants of \$	) (Revenue \$	)
	this unity through medica offer a lifelong progressio continues to increase as t abilities, incomes, races a improve their health Thes	Ily-based programs that str in of health and fitness active the renovation of the facility and religions by providing a se membership programs a	ress proper exercise, vities, experiences a y nears completion I welcoming atmosph re offered at fees aff	nutrition, stress manage nd education, including p Membership is up over 8° ere, where new exercise ordable to the communit	rograms for children, teens, famil % YMCA programs are designed rs can feel comfortable and receiv	thol abuse and education YMCA's less and seniors YMCA membership to attract people of all ages, we the support they need to be for those who cannot afford the
4b	(Code	) (Expenses \$	667,773 ın	cluding grants of \$	) (Revenue \$	)
	and bodies for all. The puprograms help youth devinclude infant care, pressitiness programs and you employed, knowing that below cost on an ability technol campuses and the	irpose of the YMCA child ca elop moral and ethical beha chool and school age care, th in government programs their children are thriving in o pay basis During the scho	re programs is to fos avior, self-esteem ar summer day camp a s In many instances, i a safe and develop bol year, over 275 sc summer, over 200 cl	ster growth and developm nd leadership Child care ind holiday camps Teen YMCA programs make it mentally sound environm hool-aged children partic nildren enrolled in the all	nent, not only in children, but in to programs for children between 6 aged youth may participate in sp possible for the parents of childre ent For parents who cannot affo pated in after-school programs lo day child care program at Centra	weeks and 13 years of age orts, day camps, teen center and en in our programs to remain rd the full fee, care is provided ocated on eight MISD elementary
4c	(Code	) (Expenses \$	189 298 ın	cluding grants of \$	) (Revenue \$	
-T&	YOUTH & FAMILY PROGRAY-Guides/Y-Princesses proto learn from each other individual skills is a key concents are volunteer coaprograms are part of the good health through regu	AMS - The YMCA offers pro- ograms which provide child and from their children in a omponent as is the full and iches and often siblings wa' Y's overall goal of building	grams that encourag ren and their familie: n enjoyable way Yoi l equal participation o tch each others gam a healthy spirit, mind es teamwork, self-co	e the development of str s with activities that foste uth sports activities promo of all children in every ga es Participants in youth s d and body In addition to	ong family ties and parent/child r ir understanding and companions ote an appreciation of one's own me Youth sports programs also b sports build a foundation for life k o providing specific swimming and	
	Other program servi	ces (Describe in Sche	dule O )			
	(Expenses \$		ıdıng grants of \$		) (Revenue \$	)
4e	Total program servic	e expenses <b>⊳</b> \$	2,895,944			

Part TV	Chec	klist of	Require	d Sche	dules
	CIICC	NIISL UI	Require:	u Schie	Juuics

			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		N o
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes	
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? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V	10	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	ļ	ļ	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Νο
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		Νο
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</i> " <i>Yes," complete Schedule F, Part II</i>	15		Νο
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		Νο
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νο
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νο

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		No
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		No
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		No
ь	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		Νo
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		Νο
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? <i>If "Yes," complete Schedule L, Part III </i>	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			
		28a		Νo
	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes,"</i> complete Schedule L, Part IV	28b		No
С	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? <i>If</i> " <i>Yes,"</i> complete Schedule L, Part <i>IV</i>	28c		Νο
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	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? <i>If "Yes," complete Schedule N, Part II</i>	32		Νο
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? <i>If</i> "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		Νο
36	<b>Section 501(c)(3) organizations.</b> 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?	38	Yes	

	Part V	Statements	Regarding	Other IRS	Filings and	l Tax	Compliance
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			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			· -
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax  Statements filed for the calendar year ending with or within the year covered by this return			
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
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		Νο
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Νο
Ь	If "Yes," enter the name of the foreign country ▶			
5a	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		Νo
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		Νo
5a	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
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		Νo
7	Organizations that may receive deductible contributions under section 170(c).			
	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
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		Νο
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νο
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7e		Νo
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		Νo
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		Νo
8	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			NI -
9	Sponsoring organizations maintaining donor advised funds.	8		Νο
	Did the organization make any taxable distributions under section 4966?	9a		Νo
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		No
10	Section 501(c)(7) organizations. Enter	-		
	Initiation fees and capital contributions included on Part VIII, line 12   10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	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 )			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		Νο
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			

800 N BIG SPRING ST Midland, TX 79701 (432) 682-2551

**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.

Se	ction A. Governing Body and Management			
			Yes	No
_				
1a b	Enter the number of voting members of the governing body 1a 17  Enter the number of voting members that are independent 1b 17			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any			
_	other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		Νο
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Νo
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νο
6	Does the organization have members or stockholders?	6		Νo
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		Νo
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νο
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
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 cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal			
	venue Code.)			
			Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a		Νo
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		Νo
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b		Νo
	If "Yes" to line a or b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		Νο
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		Νo
	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed.			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website.  Another's website.  Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	ne orga	ınızatıor	n 🕨
	YMCA-George Fierro			

## 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	ffice	r, dırector, trustee	or key employee							
<b>(A)</b> Name and Title	(B) Average hours	<b>(C)</b> Position (check all that apply)						<b>(D)</b> Reportable compensation	<b>(E)</b> Reportable compensation	<b>(F)</b> 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
See add'l data										

Fori	π 990 (2009)			Page <b>{</b>
1b	Total			
2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization 1			
			Yes	No
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employen on line 1a? <i>If</i> "Yes," complete Schedule J for such individual	ee <b>3</b>		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	. 4		No
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
s	ection B. Independent Contractors			
1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization			
	(A) (B) Name and business address Description of service	es	(C Compe	•
241	PBELL CONSTRUCTION COMPANY A SPRING PARK DR CONSTRUCTION LAND, TX 79705			388,084

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 🗗

Form **990** (2009)

Form 99						Page <b>9</b>
Part \	<del>/111</del> 1	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
\$ \$	1a	Federated campaigns 1a				
graf	ь	Membership dues 1b				
ું. કું.	С	Fundraising events 1c 35,000				
<u>#</u> _ <del>_</del>	d	Related organizations 1d				
± Ω,δ	e	Government grants (contributions) <b>1e</b> 126,624				
e Eio	f	All other contributions, gifts, grants, and similar amounts not included above				
き	g	Noncash contributions included in				
Contributions, gifts, grants and other similar amounts	h	Innes 1a-1f \$  Total. Add lines 1a-1f	658,721			
		Business Code				
Program Serwce Revenue	2a	Membership Dues & Assessments	1,965,894			1,965,894
₽e. ×	ь	GROUP ACTIVITIES	481,015	481,015		
<u> 5</u>	С	DAYCARE AND CHILD CARE	321,864	321,864		
Serv	d					
Ē	e					
Š	f	All other program service revenue				
	g	<b>Total.</b> Add lines 2a-2f	2,768,773			
	3	Investment income (including dividends, interest	23,700			23,700
	4	and other similar amounts)  Income from investment of tax-exempt bond proceeds	0			23,700
	5	Royalties	0			
		(ı) Real (ıı) Personal				
	6a	Gross Rents				
	Ь	Less rental expenses				
	С	Rental income or (loss)				
	d	Net rental income or (loss)	0			
	7a b	(I) Securities (II) Other  Gross amount from sales of assets other than inventory Less cost or	-			
		other basis and sales expenses				
	С	Gain or (loss)				
	d 8a	Net gain or (loss)	0			
Other Revenue	ou .	Gross income from fundraising events (not including  \$ 35,000 of contributions reported on line 1c) See Part IV, line 18  a 63,057				
Ā.	ь	Less direct expenses <b>b</b> 98,057				
ŏ	С	Net income or (loss) from fundraising events	-35,000			-35,000
	9a	Gross income from gaming activities See Part IV, line 19 a				
	b c	Net income or (loss) from gaming activities	0			
	10a	Gross sales of inventory, less returns and allowances .				
	Ь	Less cost of goods sold b	_			
	С	Net income or (loss) from sales of inventory	, o			
	11a	Pusitional Revenue Business code	-			
	ь					
	С					
	d	All other revenue				
	e	Total. Add lines 11a-11d	0			
	12	Total revenue. See Instructions	3,416,194	802,879		1,954,594

	990 (2009)				Page <b>10</b>
Par	IX Statement of Functional Expenses				
	Section 501(c)(3) and 501(c)(4) organizations m			(D)	
	Il other organizations must complete column (A) but are not required to		(B)	(D).	(D)
	ot include amounts reported on lines 6b, b, 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 $$ See Part IV , line 21 $$	0			
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	0			
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	147,006	62,292	84,714	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	1,182,496	1,144,217	38,279	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	0			
9	Other employee benefits	190,892	162,335	28,557	
10	Payroll taxes	103,661	88,838	14,823	
11	Fees for services (non-employees)			· ·	
а	Management	0			
Ь	Legal	0			
С	Accounting	0			
d	Lobbying	0			
e	Professional fundraising See Part IV, line 17	2,909			2,909
f	Investment management fees	0			
g g	Other	0			
12	Advertising and promotion	60,144	56,537		3,607
13	Office expenses	30,443	,		150
14	Information technology	0	30,233		130
15	Royalties	0			
16	Occupancy	463,848	452,593	11,255	
17	Travel	16,839	16,839	11,233	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	10,839	10,039		
19	Conferences, conventions, and meetings	0			
20	Interest	1,191		1,191	
21	Payments to affiliates	60,239		60,239	
22	Depreciation, depletion, and amortization	405,088	368,533	<del>'  </del>	949
23	Insurance	0	300,333	33,000	
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	UNCOLLECTIBLE PLEDGES	39,605		39,605	
b	TRAINING	22,281	22,256	25	
c	SCHOLARSHIPS	180,306	•		
d	GROUP ACTIVITIES AND SUPPLIES	192,617	192,617		
e		187,552	•	69,834	
f	All other expenses	1,897	570	1,327	
25	Total functional expenses. Add lines 1 through 24f	3,289,014		385,455	7,615
26	Joint costs. Check here F 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	5,203,014	2,000,011	333,133	,,,,,,

Pa	rt X	Balance Sheet					
					(A) Beginning of year		<b>(B)</b> End of year
	1	Cash—non-interest-bearing			156,197	1	206,423
	2	Savings and temporary cash investments			1,263,104	2	1,131,341
	3	Pledges and grants receivable, net			148,428	3	9,963
	4	Accounts receivable, net				4	0
	5	Receivables from current and former officers, directors, trustees highest compensated employees. Complete Part II of	s, key	employees, and			
		Schedule L				5	0
	6	Receivables from other disqualified persons (as defined under s persons described in section 4958(c)(3)(B) Complete Part II of		1 4958(f)(1)) and			
		Schedule L				6	0
Assets	7	Notes and loans receivable, net				7	0
SS	8	Inventories for sale or use				8	0
⋖	9	Prepaid expenses and deferred charges			41,560	9	42,813
	10a	Land, buildings, and equipment cost or other basis <i>Complete</i> Part VI of Schedule D	10a	12,503,923			
	ь	Less accumulated depreciation	10b	3,984,617	8,497,568	10c	8,519,306
	11	Investments—publicly traded securities	232,148	11	248,925		
	12	Investments—other securities See Part IV, line 11		12	0		
	13	Investments—program-related See Part IV, line 11		13	0		
	14	Intangible assets				14	0
	15	Other assets See Part IV, line 11		15	0		
	16	Total assets. Add lines 1 through 15 (must equal line 34)			10,339,005	16	10,158,771
	17	Accounts payable and accrued expenses .			286,828	17	202,139
	18	Grants payable		18			
	19	Deferred revenue			318,869	19	88,682
	20	Tax-exempt bond liabilities		20			
<u> 6</u>	21	Escrow or custodial account liability Complete Part IV of Schedul	eD.	•		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
Lia		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities Complete Part X of Schedule D			12,140	25	9,815
	26	Total liabilities. Add lines 17 through 25			617,837	26	300,636
Fund Balances		Organizations that follow SFAS 117, check here ▶ ↓ and comp through 29, and lines 33 and 34.	lete l	ines 27			
an	27	Unrestricted net assets			9,314,556	27	9,609,200
B3	28	Temporarily restricted net assets			213,565	28	55,888
F	29	Permanently restricted net assets			193,047	29	193,047
큔		Organizations that do not follow SFAS 117, check here ▶ ┌ an	d com	ıplet e			
0r		lines 30 through 34.					
	30	Capital stock or trust principal, or current funds	•			30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other fu	ınds			32	
Net	33	Total net assets or fund balances			9,721,168		9,858,135
-	34	Total liabilities and net assets/fund balances			10,339,005	34	10,158,771

#### 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		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			
	Separate basis Consolidated basis Both consolidated and separated basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		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		No

Form **990** (2009)

#### OMB No 1545-0047

Inspection

#### **SCHEDULE A**

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

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

**Public Charity Status and Public Support** 

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

YOUN			ration N ASSOCIATIOI				. r See sepai		Employer ic	dentification i	number
	rt I		on for Bul	olic Charity Stat	ue (All oro	anizatione	must comp	lete this na	75-08717		
				foundation because						sti uctions	
1				on of churches, or as:					. ,		
2	į.			ın <b>section 170(b)(1)</b>				/(-/(-/			
3	, H			perative hospital serv			•	n 170(b)(1)(	A )(iii).		
4	,  -			organization operate						)( <b>A</b> )(iii). Ent	erthe
-	,			y, and state					=(=)((=	-/(/(/-	
5	Γ	_	•	rated for the benefit  A)(iv). (Complete Pa	=	or universi	ty owned or o	perated by a	governmenta	al unit describ	ed in
6	г					al unit desc	rihed in <b>secti</b> o	on 170(b)(1)	(A)(v).		
7	r	A federal, state, or local government or governmental unit described in <b>section 170(b)(1)(A)(v).</b> An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in <b>section 170(b)(1)(A)(vi)</b> (Complete Part II)					l public				
8	Γ	A comr	nunity trust	described in <b>section</b>	170(b)(1)(	<b>A)(vi)</b> (Cor	nplete Part II	)			
9	~	Anorga	ınızatıon tha	t normally receives	(1) more th	an 331/3%	of its support	from contribi	utions, meml	pership fees, a	and gross
		receipt	s from activi	ties related to its ex	empt functio	ons—subjec	t to certain ex	cceptions, an	ıd (2) no mor	e than 331/3%	% of
		ıts sup <sub>l</sub>	ort from gro	ss investment incom	ne and unrel	ated busine	ss taxable in	come (less s	ection 511 t	ax) from busır	nesses
		acquire	d by the org	anızatıon after June 3	30,1975 S	ee <b>section</b> !	5 <b>09(a)(2).</b> (C	omplete Part	III )		
10	Г	An orga	ınızatıon org	anızed and operated	exclusively	to test for p	oublic safety	See <b>section 5</b>	509(a)(4).		
11	Г _	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Che the box that describes the type of supporting organization and complete lines 11e through 11h  a Type I  b Type III c Type III - Functionally integrated d Type III - Other					(a)(3). Check				
e f	ı	other th section	an foundation 509(a)(2)	x, I certify that the o on managers and oth received a written de	er than one	or more pub	olicly supporte	ed organization	ons describe	d in section 5	09(a)(1) or
g		check t Since A	hıs box	006, has the organiz						ir supporting	F
				ectly or indirectly co	ntrols, eithe	eralone ort	ogether with p	ersons desc	rıbed ın (ıı)		Yes No
		and (III)	below, the g	overning body of the	the suppor	ted organiza	ation?			11g(i)	
		(ii) a fa	mily membe	r of a person describ	ed in (i) abo	ve?				11g(ii)	
		(iii) a 3	5% controll	ed entity of a person	described i	n (ı) or (ıı) a	ibove?			11g(iii	5
h		Provide	the followin	g information about t	he supporte	ed organizat	ion(s)				
(i) Name suppo organiz		me of (ii) (described on col (i) listed ported EIN lines 1- 9 above your govern document		Is the panization in (i) listed in col (i) of your support?		otify the tion in f your	(vi)  Is the  organization in  col (i) organized  in the US?		(vii) A mount of support?		
				(see instructions))	Yes	No	Yes	No	Yes	No	7
											1
Tota	Ī										1

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.	֥ <i>)</i>		
	endar year (or fiscal year beginning	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	( <b>b)</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) <b>Dublic Support</b> Subtract line F from						
6	<b>Public Support.</b> Subtract line 5 from line 4						
S	ection B. Total Support	1		-			
	endar year (or fiscal year beginning	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	( <b>b</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 <b>stop here</b>						-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
<b></b>	and <b>stop here.</b> The organization qua	-		·	IIIIC 14 13 33 1/3/	o or more, ence	<b>▶</b> □
ь	33 1/3% support test—2008. If the				5a, and line 15 is	33 1/3% or moi	
	box and <b>stop here.</b> The organization				,		▶
17a	10%-facts-and-circumstances test-	<b>-2009.</b> 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	ation 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				gaao., quu		<b>▶</b> ┌
10	Deiveta Farmdation Ifthe averagest	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	<b>ndar year</b> (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	( <b>d)</b> 2008	<b>(e)</b> 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do no include any "unusual grants")	t 1,181,780	1,270,852	2,048,551	2,611,981	2,589,615	9,702,779
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	488,805	681,250	851,473	887,868	802,879	3,712,27
3	Gross receipts from activities that are not an unrelated trade or business under section 513	t					(
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	<b>Total.</b> Add lines 1 through 5	1,670,585	1,952,102	2,900,024	3,499,849	3,392,494	13,415,054
7a	A mounts included on lines 1, 2, and 3 received from disqualified persons						(
	A mounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						(
С	Add lines 7a and 7b						
8	<b>Public Support</b> (Subtract line 7c from line 6)						13,415,054
Se	ction B. Total Support						
	<b>ndar year</b> (or fiscal year beginning	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
Cale	ın)	(a) 2005	<b>(b)</b> 2006	(c) 2007	( <b>d)</b> 2008	(e) 2009	(f) Total
Cale 9	ın) A mounts from line 6	(a) 2005 1,670,585	<b>(b)</b> 2006	(c) 2007 2,900,024	( <b>d)</b> 2008	(e) 2009 3,392,494	( <b>f</b> ) Total
Cale	ın)						
Cale 9	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar	1,670,585	1,952,102	2,900,024	3,499,849	3,392,494	13,415,054
Cale 9 10a	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after	1,670,585	1,952,102	2,900,024	3,499,849	3,392,494	13,415,054
Cale 9 10a b	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	1,670,585 178,192	1,952,102	2,900,024 64,116	3,499,849 26,534	3,392,494 23,700	13,415,054 434,479 (
Cale 9 10a b	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from 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 in line 10b, whether or not the	1,670,585 178,192	1,952,102	2,900,024 64,116	3,499,849 26,534	3,392,494 23,700	13,415,054 434,479 (
Cale 9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from 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 in line 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 lines 9, 10c, 11 and 12)	1,670,585 178,192 178,192	1,952,102	2,900,024 64,116 64,116	3,499,849 26,534 26,534	3,392,494 23,700 23,700	13,415,054 434,479 ( 434,479 ( 2,250 13,851,783
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from 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 in line 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 lines 9, 10c,	1,670,585 178,192 178,192	1,952,102	2,900,024 64,116 64,116	3,499,849 26,534 26,534	3,392,494 23,700 23,700	13,415,054 434,479 ( 434,479 ( 2,250 13,851,783
Cale 9 10a b c 11 12	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from 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 in line 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 lines 9, 10c, 11 and 12 ) First Five Years If the Form 990 is	1,670,585  178,192  178,192  for the organization	1,952,102 141,937 141,937	2,900,024 64,116 64,116	3,499,849 26,534 26,534	3,392,494 23,700 23,700	13,415,054 434,479 (434,479 (2,250 13,851,783
Cale 9 10a b c 11 12	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from 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 in line 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 lines 9, 10c, 11 and 12 ) First Five Years If the Form 990 is check this box and stop here	1,670,585  178,192  178,192  for the organization	1,952,102 141,937 141,937 on's first, second,	2,900,024 64,116 64,116 2,250 third, fourth, or f	3,499,849 26,534 26,534	3,392,494 23,700 23,700	13,415,054 434,479 (434,479 (2,250 13,851,783
Cale: 9 10a  b  c 11  12  13 14  See 15	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from 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 in line 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 lines 9, 10c, 11 and 12 ) First Five Years If the Form 990 is check this box and stop here	1,670,585  178,192  178,192  for the organization of the organization of the scolumn (1)	1,952,102  141,937  141,937  on's first, second,	2,900,024 64,116 64,116 2,250 third, fourth, or f	3,499,849 26,534 26,534	3,392,494 23,700 23,700 501(c)(3) organ	13,415,054 434,479 ( 434,479 ( 2,250 13,851,783
Cale 9 10a  b  c 11  12  13 14  See 15 16	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from 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 in line 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 lines 9, 10c, 11 and 12 ) First Five Years If the Form 990 is check this box and stop here  ction C. Computation of Pul Public Support Percentage from 20	1,670,585  178,192  178,192  for the organization  olic Support Performance of the second of the sec	1,952,102  141,937  141,937  on's first, second, ercentage divided by line art III, line 15	2,900,024 64,116 64,116 2,250 third, fourth, or f	3,499,849 26,534 26,534	3,392,494 23,700 23,700 501(c)(3) organ	13,415,054 434,479 ( 434,479 ( 2,250 13,851,783
Cale 9 10a  b  c 11  12  13 14  See 15 16	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from 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 in line 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 lines 9, 10c, 11 and 12) First Five Years If the Form 990 is check this box and stop here  ction C. Computation of Pul Public Support Percentage for 200	1,670,585  178,192  178,192  for the organization  olic Support Performance of the column (1)  9 (line 8 column (1)  08 Schedule A, Paragraphy (2)  vestment Inco	1,952,102  141,937  141,937  on's first, second, ercentage f) divided by line art III, line 15  me Percentage	2,900,024 64,116 64,116 2,250 third, fourth, or f	3,499,849 26,534 26,534	3,392,494 23,700 23,700 501(c)(3) organ	13,415,054 434,479  434,479  2,250  13,851,783  11zation,  96 850 % 96 550 %
Cale 9 10a  b  c 11  12  13 14  See 15 16  See 17	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from 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 in line 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 lines 9, 10c, 11 and 12 ) First Five Years If the Form 990 is check this box and stop here  ction C. Computation of Pul Public Support Percentage from 20  ction D. Computation of Inv	1,670,585  178,192  178,192  for the organization  plic Support Performance of the second of the sec	1,952,102  141,937  141,937  141,937  on's first, second, ercentage f) divided by line : art III, line 15  me Percentage lumn (f) divided b	2,900,024 64,116 2,250 third, fourth, or f	3,499,849 26,534 26,534	3,392,494 23,700 23,700 501(c)(3) organ	13,415,054 434,479 ( 434,479 ( 2,250 13,851,783

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

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

DLN: 93493091005011

#### OMB No 1545-0047

#### **SCHEDULE C**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### **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.

Open to Public Inspection

If the organization	n answered "Yes,'	' to Form 990, Part I\	/, Line 3, or Form $9$	990-EZ, Part VI, line 4	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

lf the	, , , ,	have NOT filed Form 5768 (election ur s," to Form 990, Part IV, Line 5 (Prozations Complete Part III	,	''		•	
YOU	ne of the organization NG MENS CHRISTIAN ASSOCIATION OF LAND TEXAS			Employer Id		tion number	r
		ganization is exempt under s	ection 501(c	75-087173 c) or is a section 52		anizatior	
1		ganization's direct and indirect politic				,	
2	Political expenditures	gamzation of an oct and mandet pointe	ar campaign acc	<b>•</b>	¢		
3	Volunteer hours			-	* <u> </u>		
Par	I-B Complete if the or	ganization is exempt under s	ection 501(c	:)(3).			
1		e tax incurred by the organization und		<b>*</b>	\$		
2	Enter the amount of any excise	tax incurred by organization manage	rs under section	4955	\$		
3	If the organization incurred a s	ection 4955 tax, did it file Form 4720	) for this year?			┌ Yes	✓ No
4a	Was a correction made?					Yes	✓ No
ь	If "Yes," describe in Part IV						
Par	TI-C Complete if the or	ganization is exempt under s	ection 501(c	e) except section 5	01(c)	(3).	
1	Enter the amount directly expe	ended by the filing organization for sec	tion 527 exemp	t function activities 🕨	\$		
2	Enter the amount of the filing o exempt funtion activities	rganızatıon's funds contributed to oth	er organizations	for section 527	\$		
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here a	nd on Form 1120	O-POL, line 17b	\$		
4	Did the filing organization file <b>F</b>	Form 1120-POL for this year?			Ψ_	┌ Yes	┌ No
5	were made For each organizate contributions received that we	nd employer identification number (EI ion listed, enter the amount paid from re promptly and directly delivered to a ittee (PAC) If additional space is nea	the filing organize separate polition	zation's funds Also ente cal organization, such as	r the ar	nount of pol	ıtıcal
	(a) Name	( <b>b)</b> Address	(c) EIN	(d) A mount paid from		A mount of ntributions r	

(a) Name	<b>(b)</b> Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

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

**f** Grassroots lobbying expenditures

Pa	Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).							
	Check   If the filing organization belongs to a Check   If the filing organization checked box		d" provisions apply	,				
<u> </u>	Limits on Lobbying E  (The term "expenditures" means ar	Expenditures			(a) Filing Organization's Totals	(b) Affiliated Group Totals		
1a	Total lobbying expenditures to influence public o	ppinion (grass roots lob	bying)					
b	Total lobbying expenditures to influence a legisla	ative body (direct lobby	yıng)					
c	Total lobbying expenditures (add lines 1a and 18	b)						
d	Other exempt purpose expenditures							
e	Total exempt purpose expenditures (add lines 1							
f	f Lobbying nontaxable amount Enter the amount from the following table in both columns							
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000	The lobbying nontaxa 20% of the amount on lir						
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,00	0				
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000,0	000				
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,00	00				
	Over \$17,000,000	\$1,000,000						
		•						
g	Grassroots nontaxable amount (enter 25% of lin	ne 1 f)						
h	Subtract line 1g from line 1a If zero or less, enter	er -0-						
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -						
j	If there is an amount other than zero on either line section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file F	orm 4720 repoi	rtıng	┌ Yes ┌ No		
	(Some organizations that made a columns below. See the	he instructions fo	ection do not l r lines 2a thro	nave to com ugh 2f on pa		ne five		
	Lobbying Exp	enditures During	4-Year Averag	ing Period	I	ı		
	Calendar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	<b>(c)</b> 2008	( <b>d)</b> 2009	<b>(e)</b> Total		
2a	Lobbying non-taxable amount							
b	Lobbying ceiling amount (150% of line 2a, column(e))							
c	Total lobbying expenditures							
d	Grassroots non-taxable amount							

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

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

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

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

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

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
а	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	4	
	political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

#### Part IV Supplemental Information

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

Ident if ier	Return Reference	Explanation
Part II-B, Line 11	Part II-B, Line 11 - O ther Activities Description	The YMCA of Midland is a member of the Texas Alliance of YMCAs, which is comprised of all YMCAs in Texas. The primary focus is to develop a statewide legislative/advocacy agenda to prioritize issues and focus the alliances' efforts. The alliance retains a lobbyist to monitor legislation affecting YMCAs and proactively positions YMCAs as leaders in the development of children and youth, health and well being for all and family strengthening. An annual statewide public policy conference is held to educate local YMCA leadership on issues. During insession years, local YMCAs are encouraged to visit with their legislators to educate them of their YMCA work in the respective communities.

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DLN: 93493091005011

OMB No 1545-0047

**Supplemental Financial Statements** 

Department of the Treasury

**SCHEDULE D** (Form 990)

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

Open to Public

	Revenue Service F Attach to Fe	orm 990. ► See separate instructions.		Tilsbection
YOU	ne of the organization NG MENS CHRISTIAN ASSOCIATION OF		Empl	oyer identification number
	LAND TEXAS	d : d 5 - d Oth - O''l-		871732
Рa	rt I Organizations Maintaining Donor Adordary organization answered "Yes" to Form 99		Funds o	or Accounts. Complete if the
	organization answered Tes to Form 95	(a) Donor advised funds	(1	<b>b)</b> Funds and other accounts
L	Total number at end of year			•
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
1	Aggregate value at end of year			
5	Did the organization inform all donors and donor advi		lonor advis	ed Yes No
5	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben conferring impermissible private benefit		•	
Pai	t III Conservation Easements. Complete	ıf the organization answered "Yes	" to Form	990, Part IV, line 7.
L 2	Purpose(s) of conservation easements held by the o  Preservation of land for public use (e.g., recreating in the protection of natural habitat.  Preservation of open space.  Complete lines 2a-2d if the organization held a qual easement on the last day of the tax year.	ion or pleasure) Preservation of Preservation of	a certified	cally importantly land area historic structure
	automent on the last au, or the tax year			Held at the End of the Year
а	Total number of conservation easements		2a	
ь	Total acreage restricted by conservation easements	•	2b	
c	Number of conservation easements on a certified his	storic structure included in (a)	2c	
d	Number of conservation easements included in (c) a	cquired after 8/17/06	2d	
3	Number of conservation easements modified, transfethe taxable year ▶		ated by the	e organization during
1	Number of states where property subject to conserva			
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds?		andling of	violations, and Yes No
5	Staff and volunteer hours devoted to monitoring, insp	· · ·		
•	A mount of expenses incurred in monitoring, inspecti		_	the year ►\$
3	Does each conservation easement reported on line 2 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	2(d) above satisfy the requirements of s	section	┌ Yes
•	In Part XIV, describe how the organization reports of balance sheet, and include, if applicable, the text of the organization's accounting for conservation easer	the footnote to the organization's financ	•	•
ar	Complete if the organization answered '			er Similar Assets.
la	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 fir	for public exhibition, education or rese	arch ın fur	
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	public exhibition, education, or researc		· · · · · · · · · · · · · · · · · · ·
	(i) Revenues included in Form 990, Part VIII, line 1			<b>►</b> \$
	(ii) Assets included in Form 990, Part X			<b>►</b> \$
2	If the organization received or held works of art, histofollowing amounts required to be reported under SFA		s for financ	
а	Revenues included in Form 990, Part VIII, line 1	<b>3</b>		<b>▶</b> \$

Assets included in Form 990, Part X

Part	Organizations Maintaining Co	llections of Art	, His	tori	<u>cal Tr</u>	easui	res, or O	<u>the</u>	<u>r Simila</u>	r Asse	ets (co	ontinued)
3	Using the organization's accession and othe items (check all that apply)	records, check an	y of th	ne foll	lowing t	hat are	a significa	int u	se of its c	ollectio	n	
а	Public exhibition		d	Γ	Loan o	rexch	ange progr	ams				
b	Scholarly research		e	$\Gamma$	Other							
c	Preservation for future generations											
4	Provide a description of the organization's co Part XIV	llections and expla	ın hov	w the	y furthe	r the o	rganızatıon	's ex	empt purp	ose in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t			,					ıılar	Г	Yes	Г No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an an						answere	d "Y	es" to Fo	rm 990	),	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterme	ediary	for c	ontribut	tions o	r other ass	ets r	not	Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	and complete the	follow	/ıng ta	able		Г			A mou	ınt	
c	Beginning balance							1c		Aillot		
d	Additions during the year							1d				
e	Distributions during the year							1e				
f	Ending balance							1f				
2a	Did the organization include an amount on Fo	ırm 990 Part X Jını	e 212				L				Yes	□No
	If "Yes," explain the arrangement in Part XIV		1'							,		, 110
	rt V Endowment Funds. Complete		n ans	were	ed "Yes	s" to F	orm 990	Par	t IV. line	10.		
	Endownient i anabi complete i	(a)Current Year		)Prior			o Years Back		Three Years		Four Y	ears Back
1a	Beginning of year balance	232,158		-	253,810							
b	Contributions											
c	Investment earnings or losses	16,777			-21,652							
d	Grants or scholarships											
e	Other expenditures for facilities and programs											
f	Administrative expenses											
g	End of year balance	248,935			232,158							
2	Provide the estimated percentage of the yea	r end balance held a	as									
а	Board designated or quasi-endowment 🕨	%										
ь	Permanent endowment ► 77 550 % %											
с	Term endowment ► 22 450 % %											
3a	Are there endowment funds not in the posses	sion of the organiz	ation	that a	are held	and ac	dministered	d for	the			
	organization by										Yes	No
	(i) unrelated organizations			•				•		3a(i)		N o
L	(ii) related organizations				ula Do			•		3a(ii)	<u> </u>	No No
ь 4	Describe in Part XIV the intended uses of th	•						•		3b		N o
	t VI Investments—Land, Buildings					90 Pa	rt X line	10				
	<u> </u>	, and Equipme			Cost or o		(b)Cost or o		(c) Accum	nulated		
	Description of investment				s (investr		basis (othe		depreci		( <b>d)</b> Bo	ok value
1a	Land			1			909	,301				909,301
Ь	Buildings						10,204	,783	3,	057,896		7,146,887
c	Leasehold improvements						<u> </u>					
d I	Equipment						1,389	,839		926,721		463,118
	Other						,			•		
	I. Add lines 1a-1e <i>(Column (d) should equal Fo</i>	rm 990, Part X, colur	nn (B)	), line	10(c).)	<del></del>						8,519,306
	• • • • • • • • • • • • • • • • • • • •	·							Sched	dule D (I		90) 2009

Part VII Investments—Other Securities. See  (a) Description of security or category			d of valuation
(including name of security)	(b)Book value		-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.	
(a) Description of investment type	(b) Book value	(c) Metho	d of valuation
(a) Description of investment type	(b) Book value	Cost or end-of	year market value
Part IX Other Assets. See Form 990, Part X, col (B) line 13)			
(a) Descrip			( <b>b</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	, line 25.		
Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability		, , , , , <b>,</b>	
Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	, line 25. (b) A mount		
Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	, line 25. (b) A mount		
Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	, line 25. (b) A mount		
Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	, line 25. (b) A mount		
Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	, line 25. (b) A mount		
Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	, line 25. (b) A mount		
Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	, line 25. (b) A mount		
Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	, line 25. (b) A mount		
Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	, line 25. (b) A mount		
Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	, line 25. (b) A mount		
Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	, line 25. (b) A mount		
Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	, line 25. (b) A mount		
Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	, line 25. (b) A mount		
Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	, line 25. (b) A mount		

Pai	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	3,416,194
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	3,289,014
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	127,180
4	Net unrealized gains (losses) on investments	4	9,787
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	9,787
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	136,967
	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p		· · · · · · · · · · · · · · · · · · ·
1	Total revenue, gains, and other support per audited financial statements	1	3,425,981
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d		
e	Add lines <b>2a</b> through <b>2d</b>	2e	9,787
3	Subtract line <b>2e</b> from line <b>1</b>	3	3,416,194
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	
5	Total Revenue Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 12)	5	3,416,194
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per l	
1	Total expenses and losses per audited financial statements	1	3,289,014
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
ь	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	
3	Subtract line <b>2e</b> from line <b>1</b>	3	3,289,014
4	A mounts included on Form 990, Part IX, line 25, but not on line <b>1:</b>		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV) 4b		
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 18)	5	3,289,014
Pai	rt XIV Supplemental Information		

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

Ident if ier	Return Reference	Explanation
Part X		THE ASSOCIATION HAS ADOPTED THE PROVISIONS OF FASB ASC 740-10-25, WHICH REQUIRES THAT A TAX POSITION BE RECOGNIZED OR DERECOGNIZED BASED ON A 'MORE LIKELY THAN NOT' THRESHOLD THIS APPLIES TO POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN THE ASSOCIATION DOES NOT BELIEVE ITS FINANCIAL STATEMENTS INCLUDE ANY UNCERTAIN TAX POSITIONS
,	,	ENDOWMENT EARNINGS TO BE USED FOR OPERATIONS AT DISCRETION OF BOARD OF DIRECTORS

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DLN: 93493091005011

OMB No. 1545-0047

**SCHEDULE G** (Form 990 or 990-EZ)

Department of the Treasury

### **Supplemental Information Regarding Fundraising or Gaming Activities**

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

Internal Revenue Service Name of the organization

Employer identification number

OUNG MENS CHRISTIAN ASS IDLAND TEXAS	SOCIATION OF				75-0871732	
Part I Fundraising Act Form 990-EZ filer					to Form 990, Part IV	, line 17.
Indicate whether the organ    Indicate whether the organ   Image: Mail solicitations     Internet and e-mail solicitations     Phone solicitations     In-person solicitations     In-person solicitations     Did the organization have a or key employees listed in     If "Yes," list the ten highes to be compensated at lease.	licitations ; a written or oral agr Form 990, Part VI st paid individuals c	reement wi I) or entity or entities (	e f g th any ind r in conne (fundraise	Solicitation of no Solicitation of go Special fundraising dividual (including office ection with professional	n-government grants vernment grants ng events ers, directors, trustees fundraising activities? ients under which the fui	
(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) fundrais custo contri contribu Yes	er have dy or ol of	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
Total						
3 List all states in which th	e organization is re	gıstered o	r licensed	to solicit funds or has	been notified it is exem	pt from registration or

Pa	rt II	Fundraising Events. Commore than \$15,000 on Form					report	ed
			(a) Event #1  BENEFIT CONCERT	<b>(b)</b> Event #2	(c) O ther Events	(Add col	tal Ever (a) thr l (c))	
			(event type)	(event type)	(total number)			
₹	1	Gross receipts	98,05	7			9 8	8,057
Revenue	2	Less Charitable contributions	35,00				35	5,000
	3	Gross income (line 1 minus line 2)	63,05	7			63	3,057
	4	Cash prizes						
မွာ	5	Non-cash prizes						
ense.	6	Rent/facility costs	2,00	0			2	2,000
Expenses	7	Food and beverages	6,85	5			$\epsilon$	5,855
Direct	8	Entertainment						
ā	9	Other direct expenses .	89,20	2			89	9,202
	10	Direct expense summary Add lir	nes 4 through 9 ın columr	ı(d)	🛌		98	8,057
	11	Net income summary Combine I	ines 3, column d, and line	10			-35	5,000
Par	t II	<b>Gaming.</b> Complete if the o \$15,000 on Form 990-EZ, li		"Yes" to Form 990, Pa	rt IV, line 19, or repo	orted mor	e than	ſ
<u>Ф</u>		,,,,,,,,,	(a) Bingo	(b) Pull tabs/Instant	(c) O ther gaming		al gamı	
Revenue				bingo/progressive bingo		(Add col	(a) thr   (c))	ough
	1	Gross revenue						
-Se	2	Cash prizes						
Expenses	3	Non-cash prizes						
	4	Rent/facility costs						
Direct	5	Other direct expenses						
	6	Volunteer labor	┌ Yes		Г Yes			
					_	<del>                                     </del>		
	7	Direct expense summary Add line						
	8	Net gaming income summary Con	nbine lines 1, column d, a	nd line 7	<u> </u>		Yes	No
9		ter the state(s) in which the organiz					les	
a b		the organization licensed to operate No," Explain	gaming activities in eac	n orthese states?		· 9a	$\vdash$	
	_							
10a	— We	re any of the organization's gaming	licenses revoked, suspe	nded or terminated during	the tax year?	10a		
b		Yes," Explain		·	·			
	_			_				
11 12		es the organization operate gaming the organization a grantor, beneficia				11		
	for	med to administer charitable gaming	g <sup>?</sup>	· · · · · · · · · · · ·	· · · · · · · · · · · ·	. 12		<u> </u>

		Yes	No
13	Indicate the percentage of gaming activity operated in		
а	The organization's facility		
b	An outside facility		
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records		
	Name 🟲		
	Address -		
15a	Does the organization have a contract with a third party from whom the organization receives gaming		
	revenue?	,	
b	If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the	+	
	amount of gaming revenue retained by the third party 🟲 \$		
c	If "Yes," enter name and address		
	Name 🟲		
	Address •		
16			
16	Gaming manager information		
	Name 🟲		
	Name F		
	Gaming manager compensation 🕨 \$		
	Description of services provided -		
	Director/officer Employee Independent contractor		
	I Director/officer I Employee I Independent contractor		
<b>.7</b>	Mandatory distributions		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	<u> </u>	
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent		
	in the organization's own exempt activities during the tax year ▶ \$	1	

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As Filed Data -

DLN: 93493091005011

**Employer identification number** 

75-0871732

OMB No 1545-0047

Open to Public Inspection

#### **SCHEDULE 0**

Name of the organization

YOUNG MENS CHRISTIAN ASSOCIATION OF

(Form 990)

Department of the Treasury Internal Revenue Service

MIDLAND TEXAS

**Supplemental Information to Form 990** 

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

► Attach to Form 990.

Identifier	Return Reference	Explanation
Form 990, Part VI, Line 19		GOVERNING DOCUMENTS, POLICIES AND FINANCIAL STATEMENTS ARE MADE AVAILABLE ON A REQUEST BY REQUEST BASIS

ldentifier	Return Reference	Explanation						
Form 990, Part VI, Line 12c	Form 990, Part VI, Line 12c Explanation of Monitoring and Enforcement of Conflicts	ANNUALLY, EACH DIRECTOR, OFFICER, KEY VOLUNTEER AND MANAGEMENT EMPLOYEE COMPLETES A CONFLICT OF INTEREST QUESTIONNAIRE AND RETURNS IT TO THE EXECUTIVE DIRECTOR WHO SUMMARIZES ANY POTENTIAL CONFLICTS AND REPORTS TO THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS TOGETHER THE EXECUTIVE DIRECTOR AND EXECUTIVE COMMITTEE DETERMINE WHAT ACTIONS IF ANY NEED TO BE TAKEN AND MONITOR THE POTENTIAL CONFLICTS AS CONSIDERED NECESSARY						

ldentifier	Return Reference	Explanation						
Form 990, Part VI, Line 11	Form 990, Part VI, Line 11 Form 990 Review Process	ONCE THE FORM 990 IS COMPLETE, IT WILL BE REVIEWED WITH THE FINANCE COMMITTEE THE BOARD WILL BE PROVIDED A COPY OF THE FORM 990 AND THE FINANCE COMMITTEE WILL REVIEW THE FORM 990 WITH THE BOARD OF DIRECTORS BEFORE IT IS FILED WITH THE IRS						

ldentifier	Return Reference	Explanation		
Form 990, Part VI, Line 2	Form 990, Part VI, Line 2 Description of Business or Family Relationship of Officers, Directors, Et	DIRECTOR LOUISA MUSSELMAN FIKES AND DIRECTOR BRENDAN FIKES ARE MARRIED		

Software ID: Software Version:

**EIN:** 75-0871732

Name: YOUNG MENS CHRISTIAN ASSOCIATION OF

MIDLAND TEXAS

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

Compensated Employees, and Independent Contractors										
<b>(A)</b> Name and Title	(B) Average hours	(C) Position (check all that apply)						( <b>D</b> ) 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
TONY VALADEZ Director	2 00	х						0	0	0
TOFFEE MCALISTER Director	2 00	Х						0	0	0
TO DD ROGERS Director	2 00	х						0	0	0
STEVE BERRONES Vice CHAIR -FIN	2 00	х		x				0	0	0
SHARON HALL-HUNT Director	2 00	Х						0	0	0
ROBERT GOTOVAC Director	2 00	Х						0	0	0
LOUISA MUSSLEMAN FIKES Director	2 00	х						0	0	0
KEVIN A FOX Director	2 00	х						0	0	0
KATIE WALLACE JOYNER Director	2 00	Х						0	0	0
KATHY WALLACE Director	2 00	х						0	0	0
JOHN D WILKINSON Secretary	2 00	х		х				0	0	0
JACK HARPER BOARD CHAIR	2 00	х		х				0	0	0
GEORGE FIERRO Executive Direc	40 00			х				102,160	0	0
ERIN VAN EVERA-WELCH Director	2 00	х						0	0	0
EDWIN JACKSON BUSINESS MGR	40 00			х				44,846	0	0
DAVID SUTTER Director	2 00	х						0	0	0
DAVID G ROGERS Director	2 00	х						0	0	0
BRENDAN FIKES Director	2 00	Х						0	0	0
ALVIN COLLINS Director	2 00	х						0	0	0

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

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
UNCOLLECTIBLE PLEDGES	39,605		39,605	
TRAINING	22,281	22,256	25	
SCHOLARSHIPS	180,306	180,306		
GROUP ACTIVITIES AND SUPPLIES	192,617	192,617		
CONTRACT SERVICES	187,552	117,718	69,834	