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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2010

Open to Public Inspection

A For the 2010 calendar year, or tax year beginning 01-01-2010 and ending 12-31-2010

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

C Name of organization
YMCA OF MONROE COUNTY INC

Doing Business As

Number and street (or P O box if mail is not delivered to street address) | Room/suite
2125 S HIGHLAND AVENUE

City or town, state or country, and ZIP + 4
BLOOMINGTON, IN 47401

D Employer identification number
35-1384859

E Telephone number
(812) 332-5555

G Gross receipts $ 9,154,743

F Name and address of principal officer
ROBERTA KELZER
2125 S HIGHLAND AVENUE
BLOOMINGTON,IN 47401

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

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

H(c) Group exemption number ▶

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

J Website: ▶ WWW MONROECOUNTYYMCA ORG

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ | **L** Year of formation 1977 | **M** State of legal domicile IN

Part I Summary

1 Briefly describe the organization's mission or most significant activities
PUT CHRISTIAN PRINCIPLES INTO PRACTICE THROUGH PROGRAMS THAT BUILD A HEALTHY SPIRIT, MIND, & BODY FOR ALL BUILD FOUNDATIONS OF COMMUNITY THROUGH SOCIAL RESPONSIBILITY, YOUTH DEVELOPMENT, & HEALTH & WELL-BEING

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

Activities & Governance

3	Number of voting members of the governing body (Part VI, line 1a)	**3**	23
4	Number of independent voting members of the governing body (Part VI, line 1b)	**4**	23
5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	**5**	480
6	Total number of volunteers (estimate if necessary)	**6**	399
7a	Total unrelated business revenue from Part VIII, column (C), line 12	**7a**	0
b	Net unrelated business taxable income from Form 990-T, line 34	**7b**	0

		Prior Year	Current Year
Revenue	**8** Contributions and grants (Part VIII, line 1h)	188,729	5,405,860
	9 Program service revenue (Part VIII, line 2g)	3,322,617	3,589,208
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	24,760	60,796
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	45,476	48,718
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,581,582	9,104,582
Expenses	**13** Grants and similar amounts paid (Part IX, column (A), lines 1–3)	133,698	159,539
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	2,144,329	2,387,216
	16a Professional fundraising fees (Part IX, column (A), line 11e)	24,170	37,159
	b Total fundraising expenses (Part IX, column (D), line 25) ▶290,387		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	1,361,129	1,341,680
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	3,663,326	3,925,594
	19 Revenue less expenses Subtract line 18 from line 12	-81,744	5,178,988

		Beginning of Current Year	End of Year
Net Assets or Fund Balances	**20** Total assets (Part X, line 16)	5,121,239	10,539,448
	21 Total liabilities (Part X, line 26)	676,844	814,230
	22 Net assets or fund balances Subtract line 21 from line 20	4,444,395	9,725,218

Part II Signature Block

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

Sign Here

****** | 2011-05-10
Signature of officer | Date

SHANNON KANE CFO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check if self-employed ▶☐	PTIN
Firm's name ▶ CROWE HORWATH LLP				Firm's EIN ▶
Firm's address ▶ 3815 River Crossing Parkway Suite 300 Indianapolis, IN 462400977				Phone no ▶ (317) 569-8989

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

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III . . . . . ☑

1 Briefly describe the organization's mission

SEE SCHEDULE O

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

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

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

If "Yes," describe these changes on Schedule O

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

4a (Code) (Expenses $ 614,523 including grants of $ 0) (Revenue $ 165,763)

YMCA CHILDCARE AND PRESCHOOL THE YMCA OFFERS A QUALITY CHILDCARE PROGRAM TO OUR MEMBERS WE BELIEVE THAT PLAY IS AN ESSENTIAL PART OF A HAPPY LIFE AND A POWERFUL TOOL IN A CHILD'S HEALTHY DEVELOPMENT OUR DIRECTED PLAY PROGRAM INTEGRATES A VARIETY OF THEMES INVOLVING MOVEMENT, GAMES, AND STORYTELLING THE STAFF IS TRAINED AND PREPARED TO GUIDE THE CHILDREN IN ACTIVITIES WHERE SOCIAL SKILLS ARE DEVELOPED TO HELP THEM LEARN HOW THE WORLD WORKS OUR TOP PRIORITY IS TO PROVIDE A SAFE, NURTURING ENVIRONMENT AT THE YMCA IN WHICH ALL CHILDREN CAN GROW AND HAVE FUN IN 2010, 18,049 CHILD VISITS WERE ACCOMMODATED IN OUR CHILDCARE PROGRAM WE BELIEVE THE EARLY YEARS OF A CHILD'S LIFE TO BE OF CRITICAL IMPORTANCE IN HIS OR HER DEVELOPMENT IN OUR PRESCHOOL PROGRAMS WE STRIVE TO ENCOURAGE HEALTHY GROWTH IN SPIRIT, MIND, AND BODY, THROUGH POSITIVE CHARACTER DEVELOPMENT, MOVEMENT AND CARDIOVASCULAR LIFESTYLE EDUCATION ACTIVITIES WITHIN A SAFE AND NURTURING ENVIRONMENT WE AIM TO ENCOURAGE WHOLE CHILD DEVELOPMENT, WHICH INCLUDES THE SUPPORT AND RESOURCES OF, AND FOR, PARENTS, TEACHERS, FAMILY, AND THE COMMUNITY IN 2010, OVER 236 CHILDREN WERE ENROLLED IN OUR PRESCHOOL, MUSIKGARTEN, AND DANCE PROGRAMS

4b (Code) (Expenses $ 448,289 including grants of $ 0) (Revenue $ 207,147)

YMCA CAMPING YMCA DAY CAMPS HELP CAMPERS DEVELOP SELF-CONFIDENCE, SELF-RESPECT, SOCIALIZATION, AND HEALTHY LIFESTYLE WHILE PARTICIPATING IN FUN ACTIVE GAMES THAT CHALLENGE THE SPIRIT, MIND, AND BODY CAMPING PROGRAMS ARE EDUCATIONAL WHILE PROMOTING SOCIALIZATION SKILLS, SPIRITUAL AWARENESS, MENTAL DEVELOPMENT, PHYSICAL DEVELOPMENT, AND RESPECT FOR THE ENVIRONMENT FINANCIAL ASSISTANCE IS AVAILABLE FOR THOSE WHO CANNOT AFFORD THE CUSTOMARY FEES AND WE ENCOURAGE THE PARTICIPATION OF ALL INDIVIDUALS AND WILL MAKE ACCOMMODATIONS TO MEET THE NEEDS OF THOSE WITH SPECIAL NEEDS IN 2010, THE YMCA SERVED 1,533 CHILDREN IN OUR DAY CAMP PROGRAMS

4c (Code) (Expenses $ 385,719 including grants of $ 0) (Revenue $ 170,026)

YMCA YOUTH AND ADULT SPORTS THE YMCA YOUTH AND ADULT SPORTS PROGRAMS PROMOTE AN APPRECIATION OF ONE'S OWN WORTH WHATEVER THE SPORT, THE FOCUS IS ON FULL AND EQUAL PARTICIPATION OF ALL, EVERY CHILD PLAYS IN EVERY GAME LEAGUES ARE ORGANIZED ON THE BASIS OF SKILLS CLINICS WIN OR LOSE, YMCA YOUTH SPORTS PROGRAMS EMPHASIZE DEVELOPMENT OF SKILL, HEALTH AND FITNESS, SAFETY, COOPERATION, SELF-ESTEEM, AND RESPECT FOR OTHERS IN 2010, OVER 1,440 CHILDREN ENROLLED IN OUR YOUTH SPORTS PROGRAMS, WHICH INCLUDES SOCCER, BASKETBALL, T-BALL, VOLLEYBALL, GYMNASTICS, MARTIAL ARTS, AND RACQUETBALL IN ADDITION, WE EXPERIENCED OVER 524 ADULT REGISTRATIONS IN RACQUETBALL, DODGE BALL, BASKETBALL, AND VOLLEYBALL PROGRAMS IN 2010, THERE WERE ALSO OVER 375 PARTICIPANTS IN THE SPRING RUN

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

(Expenses $ 1,786,368 including grants of $ 159,539) (Revenue $ 3,051,043)

4e Total program service expenses ▶ $ 3,234,899

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)?	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, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? *If "Yes," complete Schedule D, Part II*	7	Yes	
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	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line10? *If "Yes," complete Schedule D, Part VI.*	11a	Yes	
b	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.*	11b		No
c	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.*	11c		No
d	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.*	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X.*	11e	Yes	
f	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 (ASC 740)? *If "Yes," complete Schedule D, Part X.*	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional*	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, and program service activities outside the United States? *If "Yes," complete Schedule F, Parts I and IV*	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the U S ? *If "Yes," complete Schedule F, Parts II and IV*	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, Parts III and IV*	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 (see instructions)*	17	Yes	
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18	Yes	
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No
20a	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? **Note.** Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Part IV Checklist of Required Schedules *(continued)*

21	Did the organization report more than $5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	**21**		No
22	Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	**22**	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	**23**		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 lines 24b–24d and complete Schedule K. If "No," go to line 25*	**24a**		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	**24b**		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	**24c**		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	**24d**		
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	**25a**		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	**25b**		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	**26**		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? *If "Yes," complete Schedule L, Part III*	**27**		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	**28a**		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	**28b**		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	**28c**		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	**29**	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	**30**		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	**31**		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	**32**		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	**33**		No
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	**34**		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	**35**		No
a	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2* ☐ **Yes** ☑ **No**			
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	**36**		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	**37**		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O	**38**	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V . . . . . ☐

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable . .	1a	8		
b	Enter the number of Forms W-2G included in line 1a *Enter -0-* if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		1c	Yes	
2a	Enter the number of employees reported on Form W-3, *Transmittal of Wage and Tax Statements* filed for the calendar year ending with or within the year covered by this return	2a	480		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?		3a		No
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a		No
b	If "Yes," enter the name of the foreign country ▶ _____ See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . .		5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible?		6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b		
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?		7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . .		7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h		
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		8		
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the organization make any taxable distributions under section 4966?		9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
10	**Section 501(c)(7) organizations.** Enter				
a	Initiation fees and capital contributions included on Part VIII, line 12 . . .	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O		13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O* . .		14b		

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.

Check if Schedule O contains a response to any question in this Part VI . . . . . ☑

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	23		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	23		
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		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		No
6	Does the organization have members or stockholders?		6		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		7a		No
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?		8a	Yes	
b	Each committee with authority to act on behalf of the governing body?		8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

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

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

☐ Own website ☐ Another's website ☑ Upon request

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

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

SHANNON KANE
2125 S HIGHLAND AVENUE
BLOOMINGTON, IN 47401
(812) 332-5555

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

Check if Schedule O contains a response to any question in this Part VII . . . . . .☐

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

- 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, if any 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, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations

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

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) HEIDI DOLSON EX-OFFICIO EXECUTIVE COMMITTEE MEMBER	1	X						0	0	0
(2) ANN ZERFAS BOARD MEMBER	1	X						0	0	0
(3) MARK MCCONAHAY BOARD MEMBER	2	X						0	0	0
(4) RANDY LLOYD BOARD MEMBER	2	X						0	0	0
(5) JAN WILLIAMSON BOARD MEMBER	1	X						0	0	0
(6) DEON VIGILANCE BOARD MEMBER	1	X						0	0	0
(7) BRANDON SEXTON BOARD MEMBER	1	X						0	0	0
(8) JEAN SCALLON BOARD MEMBER	1	X						0	0	0
(9) LAURA HAMMACK BOARD MEMBER	1	X						0	0	0
(10) DEL BRINKMAN BOARD MEMBER	1	X						0	0	0
(11) MARY CLARE BAUMAN PRESIDENT	4	X		X				0	0	0
(12) JOE WALKER TREASURER	3	X		X				0	0	0
(13) RICK NOTTER VICE PRESIDENT	2	X		X				0	0	0
(14) SUE STOLZ BOARD MEMBER	1	X						0	0	0
(15) DAVID SABBAGH SECRETARY	2	X		X				0	0	0
(16) BILL BEGGS BOARD MEMBER	2	X						0	0	0

Part VII **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** (continued)

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(17) ALEX RABINOWITCH BOARD MEMBER	1	X						0	0	0
(18) RICK WEIDENBENER BOARD MEMBER	1	X						0	0	0
(19) NANCY RIGGERT BOARD MEMBER	2	X						0	0	0
(20) FRED EICHHORN BOARD MEMBER	1	X						0	0	0
(21) SCOTT RINK BOARD MEMBER	1	X						0	0	0
(22) CINDY KINNARNEY BOARD MEMBER	1	X						0	0	0
(23) ROSANN SPIRO BOARD MEMBER	1	X						0	0	0
(24) ROBERTA KELZER EXECUTIVE DIRECTOR	55			X				73,235	0	14,488
(25) SHANNON KANE CFO	55			X				63,111	0	11,298
1b **Sub-Total**										
c **Total from continuation sheets to Part VII, Section A**										
d **Total (add lines 1b and 1c)**								136,346	0	25,786

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 ▶ 0

		Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*		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*		No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*		No

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 in compensation from the organization ▶ 0

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns	5,081				
	b	Membership dues					
	c	Fundraising events	2,600				
	d	Related organizations					
	e	Government grants (contributions)	19,856				
	f	All other contributions, gifts, grants, and similar amounts not included above	5,378,323				
	g	Noncash contributions included in lines 1a-1f $	525,650				
	h	**Total.** Add lines 1a-1f		5,405,860			
Program Service Revenue			Business Code				
	2a	Memership Dues		2,249,516	2,249,516		
	b	Program Fees		1,190,152	1,190,152		
	c	Joiner Fees		100,404	100,404		
	d	Daily Membership Dues		49,136	49,136		
	e						
	f	All other program service revenue		0	0	0	0
	g	**Total.** Add lines 2a–2f		3,589,208			
	3	Investment income (including dividends, interest and other similar amounts)		38,292			38,292
	4	Income from investment of tax-exempt bond proceeds		0			
	5	Royalties		0			

		(i) Real	(ii) Personal				
	6a	Gross Rents					
	b	Less rental expenses					
	c	Rental income or (loss)	0	0			
	d	Net rental income or (loss)			0			

		(i) Securities	(ii) Other				
	7a	Gross amount from sales of assets other than inventory	20,725	16,476			
	b	Less cost or other basis and sales expenses	9,948	4,749			
	c	Gain or (loss)	10,777	11,727			
	d	Net gain or (loss)			22,504			22,504
Other Revenue	8a	Gross income from fundraising events (not including $ 2,600 of contributions reported on line 1c) See Part IV, line 18	a	37,130				
	b	Less direct expenses	b	25,585				
	c	Net income or (loss) from fundraising events			11,545			11,545
	9a	Gross income from gaming activities See Part IV, line 19	a					
	b	Less direct expenses	b					
	c	Net income or (loss) from gaming activities			0			
	10a	Gross sales of inventory, less returns and allowances	a	12,189				
	b	Less cost of goods sold	b	9,879				
	c	Net income or (loss) from sales of inventory			2,310			2,310
		Miscellaneous Revenue		Business Code				
	11a	Locker Rental			13,646			13,646
	b	Facility Rental			14,261			14,261
	c	Towel Rental			2,185			2,185
	d	All other revenue			4,771	4,771	0	0
	e	**Total.** Add lines 11a–11d			34,863			
	12	**Total revenue.** See Instructions			9,104,582	3,593,979	0	104,743

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U S See Part IV, line 21	0			
2 Grants and other assistance to individuals in the U S See Part IV, line 22	159,539	159,539		
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	162,132	31,095	71,628	59,409
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	1,882,055	1,715,331	96,017	70,707
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	91,381	66,924	12,463	11,994
9 Other employee benefits	86,235	62,694	12,202	11,339
10 Payroll taxes	165,413	109,344	29,235	26,834
a Fees for services (non-employees) Management	0			
b Legal	0			
c Accounting	21,164	9,524	11,217	423
d Lobbying	0			
e Professional fundraising services *See Part IV, line 17*	37,159			37,159
f Investment management fees	0			
g Other	30,867	30,867		
12 Advertising and promotion	95,721	57,433	14,358	23,930
13 Office expenses	122,482	95,386	17,620	9,476
14 Information technology	56,678	14,794	41,226	658
15 Royalties	0			
16 Occupancy	416,296	399,313	16,983	
17 Travel	28,444	20,922	4,474	3,048
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19 Conferences, conventions, and meetings	4,022	1,609	804	1,609
20 Interest	0			
21 Payments to affiliates	68,942	34,471	34,471	
22 Depreciation, depletion, and amortization	265,457	238,911	26,546	
23 Insurance	71,197	61,005	7,059	3,133
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a Program supplies	103,051	102,560	184	307
b Dues and subscriptions	3,671	1,835	1,652	184
c Community service	1,440	756	684	
d Fundraising	25,723			25,723
e Miscellaneous	26,525	20,586	1,485	4,454
f All other expenses	0	0	0	0
25 **Total functional expenses.** Add lines 1 through 24f	3,925,594	3,234,899	400,308	290,387
26 **Joint costs.** Check here ▶ ☐ if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	0			

Part X Balance Sheet

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing			1	
	2	Savings and temporary cash investments		1,277,876	2	1,127,256
	3	Pledges and grants receivable, net		2,800	3	4,137,180
	4	Accounts receivable, net		31,985	4	35,252
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Schedule L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use		5,909	8	4,610
	9	Prepaid expenses and deferred charges		42,919	9	41,307
	10a	Land, buildings, and equipment cost or other basis *Complete Part VI of Schedule D*	10a 10,253,705			
	b	Less accumulated depreciation	10b 6,189,804	2,707,404	10c	4,063,901
	11	Investments—publicly traded securities		1,052,346	11	1,129,942
	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	
	15	Other assets See Part IV, line 11			15	0
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		5,121,239	16	10,539,448
Liabilities	17	Accounts payable and accrued expenses		96,210	17	116,362
	18	Grants payable			18	
	19	Deferred revenue		538,073	19	633,240
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability *Complete Part IV of Schedule D*			21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons *Complete Part II of Schedule L*			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities Complete Part X of Schedule D		42,561	25	64,628
	26	**Total liabilities.** Add lines 17 through 25		676,844	26	814,230
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		3,854,935	27	4,981,384
	28	Temporarily restricted net assets		228,329	28	4,334,095
	29	Permanently restricted net assets		361,131	29	409,739
		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		4,444,395	33	9,725,218
	34	Total liabilities and net assets/fund balances		5,121,239	34	10,539,448

Part XI Reconcilliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI . . . . . ☑

1	Total revenue (must equal Part VIII, column (A), line 12) . . .	1	9,104,582
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,925,594
3	Revenue less expenses Subtract line 2 from line 1	3	5,178,988
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . .	4	4,444,395
5	Other changes in net assets or fund balances (explain in Schedule O)	5	101,835
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	9,725,218

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII . . . . . ☐

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? . .	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated 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		

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SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
YMCA OF MONROE COUNTY INC

Employer identification number
35-1384859

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

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

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

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

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

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

_____

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

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

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

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

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

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

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

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

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

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

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

	Yes	No
(i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization? **11g(i)**		
(ii) a family member of a person described in (i) above? **11g(ii)**		
(iii) a 35% controlled entity of a person described in (i) or (ii) above? **11g(iii)**		

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

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

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public Support.** Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 **Total support** (Add lines 7 through 10)						

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

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

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2010 (line 6 column (f) divided by line 11 column (f)) **14**

15 Public Support Percentage for 2009 Schedule A, Part II, line 14 **15**

16a **33 1/3% support test—2010.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

b **33 1/3% support test—2009.** If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

17a **10%-facts-and-circumstances test—2010.** If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶☐

b **10%-facts-and-circumstances test—2009.** If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶☐

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

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	199,694	207,907	186,282	188,729	5,405,860	6,188,472
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	2,953,115	3,155,418	3,233,764	3,322,617	3,589,208	16,254,122
3 Gross receipts from activities that are not an unrelated trade or business under section 513			28,438	27,137	32,402	87,977
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
5 The value of services or facilities furnished by a governmental unit to the organization without charge						0
6 **Total.** Add lines 1 through 5	3,152,809	3,363,325	3,448,484	3,538,483	9,027,470	22,530,571
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						0
c Add lines 7a and 7b	0	0	0	0	0	0
8 **Public Support** (Subtract line 7c from line 6)						22,530,571

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6	3,152,809	3,363,325	3,448,484	3,538,483	9,027,470	22,530,571
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	38,727	68,325	47,840	28,629	38,292	221,813
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0
c Add lines 10a and 10b	38,727	68,325	47,840	28,629	38,292	221,813
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	38,931	19,433	1,341	5,493	4,771	69,969
13 **Total support** (Add lines 9, 10c, 11 and 12)	3,230,467	3,451,083	3,497,665	3,572,605	9,070,533	22,822,353

14 **First Five Years** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

15	Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f))	15	98 72 %
16	Public support percentage from 2009 Schedule A, Part III, line 15	16	98 051 %

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2010** (line 10c column (f) divided by line 13 column (f))	17	0 97 %
18	Investment income percentage from **2009** Schedule A, Part III, line 17	18	1 266 %

19a **33 1/3% support tests—2010.** 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—2009.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

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

Part IV **Supplemental Information.** Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Explanation

OTHER INCOME, FORM 990, SCHEDULE A, PART III, SECTION B, LINE 12, 2006 $38,931 2007 $19,433 2008 $1,341 2009 $5,493 2010 $4,771 TOTAL OTHER INCOME $69,969,

Additional Data

Software ID: 10000128
Software Version: v2010.1.0
EIN: 35-1384859
Name: YMCA OF MONROE COUNTY INC

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

4d. Other program services

(Code	) (Expenses $	380,000	including grants of $		) (Revenue $	)
(Code	) (Expenses $	380,000	including grants of $		) (Revenue $	)
(Code	) (Expenses $	380,000	including grants of $		) (Revenue $	)
(Code	) (Expenses $	380,000	including grants of $		) (Revenue $	)
(Code	) (Expenses $	266,368	including grants of $	159,539	) (Revenue $	3,051,043)

OTHER PROGRAM SERVICES EXCEPT FOR TOP 3 PLEASE SEE SCHEDULE O

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SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
YMCA OF MONROE COUNTY INC

Employer identification number
35-1384859

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit ☐ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)
- ☑ Preservation of land for public use (e g , recreation or pleasure)
- ☐ Preservation of an historically importantly land area
- ☑ Protection of natural habitat
- ☐ Preservation of a certified historic structure
- ☑ Preservation of open space

2 Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

		Held at the End of the Year
a	Total number of conservation easements	2a 10
b	Total acreage restricted by conservation easements	2b 42 15
c	Number of conservation easements on a certified historic structure included in (a)	2c 0
d	Number of conservation easements included in (c) acquired after 8/17/06	2d 0

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ 0

4 Number of states where property subject to conservation easement is located ▶ 1

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☑ No

6 Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $ 0

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ▶ $

(ii) Assets included in Form 990, Part X ▶ $

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a Revenues included in Form 990, Part VIII, line 1 ▶ $

b Assets included in Form 990, Part X ▶ $

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

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a ☐ Public exhibition
- b ☐ Scholarly research
- c ☐ Preservation for future generations
- d ☐ Loan or exchange programs
- e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

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

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

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

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

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

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current Year	(b) Prior Year	(c) Two Years Back	(d) Three Years Back	(e) Four Years Back
1a Beginning of year balance	1,177,906	987,623	1,286,392		
b Contributions	39,662	20,424	51,718		
c Investment earnings or losses	140,132	215,590	-329,290		
d Grants or scholarships					
e Other expenditures for facilities and programs	6,561	45,731	21,197		
f Administrative expenses					
g End of year balance	1,351,139	1,177,906	987,623		

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

- a Board designated or quasi-endowment ▶ 67 0 %
- b Permanent endowment ▶ 28 0 %
- c Term endowment ▶ 5 0 %

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

		Yes	No
(i) unrelated organizations	3a(i)		No
(ii) related organizations	3a(ii)		No
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		1,532,803		1,532,803
b Buildings		7,356,578	5,103,764	2,252,814
c Leasehold improvements		365,767	335,456	30,311
d Equipment		901,476	750,584	150,892
e Other		97,081		97,081
Total. Add lines 1a-1e *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)* ▶				4,063,901

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
Other		
Total. *(Column (b) should equal Form 990, Part X, col (B) line 12)* ▶		

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

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

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

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

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

1 (a) Description of Liability	(b) Amount
Federal Income Taxes	
GIFT CERTIFICATE LIABILITY	0
CREDIT VOUCHER LIABILITY	12,412
OTHER LIABILITIES	22,541
GIFT CERTIFICATE LIABILITY	29,675
Total. *(Column (b) should equal Form 990, Part X, col (B) line 25)* ▶	64,628

2. Fin 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC740)

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	9,104,582
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	3,925,594
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	5,178,988
4	Net unrealized gains (losses) on investments	4	101,835
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	0
9	Total adjustments (net) Add lines 4 - 8	9	101,835
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	5,280,823

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	9,081,423
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	101,835		
b	Donated services and use of facilities	2b	24,666		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d	9,879		
e	Add lines **2a** through **2d**			2e	136,380
3	Subtract line **2e** from line **1**			3	8,945,043
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b	159,539		
c	Add lines **4a** and **4b**			4c	159,539
5	Total Revenue Add lines **3** and **4c.** (This should equal Form 990, Part I, line 12)			5	9,104,582

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

1	Total expenses and losses per audited financial statements			1	3,800,600
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a	24,666		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIV)	2d	9,879		
e	Add lines **2a** through **2d**			2e	34,545
3	Subtract line **2e** from line **1**			3	3,766,055
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b	159,539		
c	Add lines **4a** and **4b**			4c	159,539
5	Total expenses Add lines **3** and **4c.** (This should equal Form 990, Part I, line 18)			5	3,925,594

Part XIV Supplemental Information

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

Identifier	Return Reference	Explanation
Conservation easements financial reporting	Schedule D, Part II, Line 9	THE CONSERVATION EASEMENTS WERE PART OF A LAND PURCHASE MADE ON DECEMBER 30, 2010 THE PURCHASED LAND IS RECORDED ON THE BALANCE SHEET OF THE PURCHASED LAND, 42 15 IS CONSIDERED TO BE A CONSERVATION EASEMENT THERE IS NO FOOTNOTE IN THE 2010 FINANCIAL STATEMENTS RELATED TO ACCOUNTING FOR CONSERVATION EASEMENTS
Intended uses of endowment funds	Schedule D, Part V, Line 4	THE MONROE COUNTY YMCA HAS ESTABLISHED AN ENDOWMENT FUND TO PROVIDE RESOURCES FOR THE YMCA IN FUTURE YEARS THE ENDOWMENT FUND'S PURPOSE IS TO ENHANCE THE YMCA'S GOAL TO STRENGTHEN THE FOUNDATIONS OF COMMUNITY THROUGH SOCIAL RESPONSIBILITY, YOUTH DEVELOPMENT, AND HEALTH AND WELL BEING THROUGH PROJECTS AND PROGRAMS APART FROM THE YMCA'S ONGOING PROGRAMS NO PART OF THE INCOME GENERATED BY THE ENDOWMENT FUND SHALL BE USED FOR THE YMCA'S ANNUAL OPERATING BUDGET
FIN 48 (ASC 740) footnote	Schedule D, Part X, Line 2	THE YMCA IS EXEMPT FROM INCOME TAXES ON INCOME FROM RELATED ACTIVITIES UNDER SECTION 501(C)(3) OF THE U S INTERNAL REVENUE CODE AND CORRESPONDING STATE TAX LAW ACCORDINGLY, NO PROVISION HAS BEEN MADE FOR FEDERAL OR STATE INCOME TAXES ADDITIONALLY, THE YMCA HAS BEEN DETERMINED NOT TO BE A PRIVATE FOUNDATION UNDER SECTION 509(A) OF THE INTERNAL REVENUE CODE THE YMCA IS HOWEVER SUBJECT TO INCOME TAXES ON INCOME GENERATED FROM ACTIVITIES THAT ARE UN-RELATED TO ITS EXEMPT PURPOSE CURRENT ACCOUNTING STANDARDS REQUIRE THAT THE YMCA DISCLOSE THE AMOUNT OF POTENTIAL BENEFIT OR OBLIGATION TO BE REALIZED AS A RESULT OF AN EXAMINATION PERFORMED BY A TAXING AUTHORITY FOR THE YEARS ENDED DECEMBER 31, 2010 AND 2009, MANAGEMENT HAS DETERMINED THE YMCA DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS THAT WOULD IMPACT THE YMCA'S FINANCIAL STATEMENTS THE YMCA IS NO LONGER SUBJECT TO EXAMINATION BY TAXING AUTHORITIES FOR THE YEARS BEFORE 2007 THE YMCA DOES NOT EXPECT THE TOTAL AMOUNT OF UNRECOGNIZED TAX BENEFITS TO SIGNIFICANTLY CHANGE IN THE NEXT 12 MONTHS THE YMCA RECOGNIZES INTEREST AND/OR PENALTIES RELATED TO INCOME TAX MATTERS IN INCOME TAX EXPENSE THE YMCA DID NOT HAVE ANY AMOUNTS ACCRUED FOR INTEREST AND PENALTIES AT DECEMBER 31, 2010 AND 2009
Other revenues in audited financial statements not in form 990	Schedule D, Part XII, Line 2d	COST OF GOODS SOLD - 9879,
Other revenues in form 990 not in audited financial statements	Schedule D, Part XII, Line 4b	SCHOLARSHIPS - 159539,
Other expenses in audited financial statements not in form 990	Schedule D, Part XIII, Line 2d	COST OF GOODS SOLD - 9879,
Other expenses in form 990 not in audited financial statements	Schedule D, Part XII, Line 4b	SCHOLARSHIPS - 159539,

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SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
YMCA OF MONROE COUNTY INC

Employer identification number
35-1384859

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

1 Indicate whether the organization raised funds through any of the following activities Check all that apply

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

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☑ **Yes** ☐ **No**

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization Form 990-EZ filers are not required to complete this table

(i) Name and address of individual or entity (fundraiser)	**(ii)** Activity	**(iii)** Did fundraiser have custody or control of contributions? Yes	**(iii)** No	**(iv)** Gross receipts from activity	**(v)** Amount paid to (or retained by) fundraiser listed in col **(i)**	**(vi)** Amount paid to (or retained by) organization
DONOR BY DESIGN GROUP LLC	CAPITAL CAMPAIGN		No	4,600,367	37,159	4,563,208
Total . . . . . ▶				4,600,367	37,159	4,563,208

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

IN

Part II **Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than $15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than $5,000.

		(a) Event #1 GOLF OUTING (event type)	(b) Event #2 (event type)	(c) Other Events (total number)	(d) Total Events (Add col (a) through col (c))
Revenue	1 Gross receipts	39,730			39,730
	2 Less Charitable contributions	2,600			2,600
	3 Gross income (line 1 minus line 2)	37,130	0	0	37,130
Direct Expenses	4 Cash prizes				0
	5 Non-cash prizes	2,250			2,250
	6 Rent/facility costs	10,879			10,879
	7 Food and beverages				0
	8 Entertainment				0
	9 Other direct expenses	12,456			12,456
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				25,585
	11 Net income summary Combine lines 3 and 10 in column (d) ▶				11,545

Part III **Gaming.** Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than $15,000 on Form 990-EZ, line 6a.

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

9 Enter the state(s) in which the organization operates gaming activities _____

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," Explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," Explain _____

11 Does the organization operate gaming activities with nonmembers? . . . . . ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? . . . . . ☐ Yes ☐ No

13 Indicate the percentage of gaming activity operated in

a The organization's facility	**13a**	
b An outside facility	**13b**	

14 Provide 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? . . . . . ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ $ _____ and the amount of gaming revenue retained by the third party ▶ $ _____

c If "Yes," enter name and address

Name ▶

Address ▶

16 Gaming manager information

Name ▶

Gaming manager compensation ▶ $

Description of services provided ▶

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions

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

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 ▶ $

Part IV Complete this part to provide additional information for responses to question on Schedule G (see instructions.)

Identifier	ReturnReference	Explanation
FUNDRAISING COSTS	SCHEDULE G, PART IV	FUNDRAISING COST FOR 2010 ARE RELATED TO ADVANCE PLANNING WORK FOR FUTURE PROJECTS

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Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ **Attach to Form 990**

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
YMCA OF MONROE COUNTY INC

Employer identification number
35-1384859

Part I General Information on Grants and Assistance

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

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

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than $5,000. Check this box if no one recipient received more than $5,000. Part II can be duplicated if additional space is needed. . . . . ▶ ☐

1 (a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance

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

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

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(1) MEMBERSHIP ASSISTANCE	2142	98,285	0	N/A	N/A
(2) PROGRAM ASSISTANCE	331	43,805	0	N/A	N/A
(3) JOINER FEE ASSISTANCE	4	300	0	N/A	N/A
(4) CARDIAC REHAB ASSISTANCE	20	17,149	0	N/A	N/A

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

Identifier	Return Reference	Explanation
Procedures for monitoring use of grant funds	Schedule I, Part I, Line 2	INDIVIDUALS APPLY FOR ASSISTANCE BY COMPLETING AN APPLICATION THE APPLICATIONS ARE REVIEWED AND ASSISTANCE IS AWARDED BASED ON FINANCIAL NEED FUNDS AWARDED TO INDIVIDUALS FOR FINANCIAL ASSISTANCE ARE RAISED THROUGH OUR ANNUAL CAMPAIGN AND GOLF OUTING THE INDIVIDUAL DOES NOT RECEIVE THE ASSISTANCE DIRECTLY THEY PAY THE DIFFERENCE BETWEEN THE ASSISTANCE AWARDED AND THE ACTUAL COST SEPARATE GENERAL LEDGER ACCOUNTS ARE SET UP TO TRACK DOLLARS RAISED AND DOLLARS AWARDED REPORTS ARE PREPARED AND REVIEWED FOR ALL ASSISTANCE DOLLARS

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SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

NonCash Contributions

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
YMCA OF MONROE COUNTY INC

Employer identification number
35-1384859

Part I Types of Property

	(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining oncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded				
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial	X	1	500,000	SELLING COST
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (OFFICE FURNITURE)	X	1	25,650	REPLACEMENT COST
26 Other ▶( )				
27 Other ▶( )				
28 Other ▶ ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . **29** 1

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

Part II

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

Identifier	Return Reference	Explanation

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93493131006011

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
YMCA OF MONROE COUNTY INC

Employer identification number
35-1384859

Identifier	Return Reference	Explanation
Description of other program services	Form 990, Part III, Line 4d	OTHER PROGRAM SERVICES EXCEPT FOR TOP 3 PLEASE SEE SCHEDULE O

Identifier	Return Reference	Explanation
ORGANIZATION'S MISSION	FORM 990, PART III, LINE 1	THE Y IS A POWERFUL ASSOCIATION OF MEN, WOMEN AND CHILDREN JOINED TOGETHER BY A SHARED COMMITMENT TO NURTURE THE POTENTIAL OF KIDS, PROMOTE HEALTHY LIVING AND FOSTER A SENSE OF SOCIAL RESPONSIBILITY OUR MISSION IS TO PUT CHRISTIAN PRINCIPLES INTO PRACTICE THROUGH PROGRAMS THAT BUILD HEALTHY SPIRIT, MIND, AND BODY FOR ALL YMCA PROGRAMS FOCUS ON FOUR CORE VALUES CARING, HONESTY, RESPECT, AND RESPONSIBILITY WE BELIEVE THAT LASTING PERSONAL AND SOCIAL CHANGE CAN ONLY COME ABOUT WHEN WE WORK TOGETHER TO INVEST IN OUR KIDS, OUR HEALTH AND OUR NEIGHBORS THAT'S WHY, AT THE Y, STRENGTHENING COMMUNITY IS OUR CAUSE EVERY DAY, WE WORK SIDE-BY-SIDE WITH OUR NEIGHBORS TO MAKE SURE THAT EVERYONE, REGARDLESS OF AGE, INCOME OR BACKGROUND, HAS THE OPPORTUNITY TO LEARN, GROW AND THRIVE IN 2010, OUR YMCA SERVED MORE THAN 19,000 INDIVIDUALS THROUGH MEMBERSHIP, PROGRAMS, HEALTH AND WELLNESS EVENTS, HEALTH SCREENINGS, AND FACILITY USAGE FROM DIVERSE COMMUNITIES THROUGHOUT BLOOMINGTON AND MONROE COUNTY AND PROVIDED $159,540 IN MEMBERSHIP AND PROGRAM SCHOLARSHIPS AS OUR NATION CONTINUES TO FACE SERIOUS CHRONIC AND COMMUNITY CHALLENGES, THE Y IS IN MONROE COUNTY MAKING A DIFFERENCE IN THE AREAS OF *YOUTH DEVELOPMENT FIVE THOUSAND YOUTHS ARE TAKING A GREATER INTEREST IN LEARNING, MAKING SMARTER LIFE CHOICES, AND CULTIVATING THE VALUES, SKILLS AND RELATIONSHIPS THAT LEAD TO POSITIVE BEHAVIORS, THE PURSUIT OF HIGHER EDUCATION AND GOAL ACHIEVEMENT *FOR INSTANCE, WE HAVE PILOTED AND IMPLEMENTED A COLLABORATIVE, MOVEMENT BASED NUTRITION AND PHYSICAL EDUCATION PROGRAM CALLED ENERGIZE THAT TARGETS THIRD AND FOURTH GRADE STUDENTS AT RISK FOR POOR HEALTH THIS WILL HELP CHILDREN MAKE BETTER CHOICES EARLIER IN LIFE *HEALTHY LIVING THOUSANDS OF ADULTS AND YOUTH RECEIVE THE SUPPORT, GUIDANCE AND RESOURCES NEEDED TO ACHIEVE BETTER HEALTH AND WELL-BEING * WE RECENTLY STARTED THE YMCA DIABETES PREVENTION PROGRAM WITH FUNDING FROM THE CENTERS FOR DISEASE CONTROL THIS EVIDENCE-BASED PROGRAM HAS BEEN SHOWN TO ELIMINATE DIABETES IN 50 PERCENT OF PARTICIPANTS AND IS PROJECTED TO SERVE 400,000 PEOPLE IN Y'S ACROSS THE COUNTRY OVER THE NEXT FIVE YEARS * SOCIAL RESPONSIBILITY THE Y HELPS PEOPLE GIVE BACK AND ASSIST THEIR NEIGHBORS BY OFFERING THEM OPPORTUNITIES TO VOLUNTEER, ADVOCATE AND SUPPORT PROGRAMS THAT STRENGTHEN COMMUNITY GROUPS OF INDIVIDUALS, THROUGH THEIR INVOLVEMENT IN THE Y AND COLLABORATIONS WITH POLICYMAKERS, ARE ABLE TO ADDRESS MANY OF THE MOST CRITICAL SOCIAL ISSUES THEIR COMMUNITIES FACE * THE ACHIEVE INITIATIVE IS A PRIME EXAMPLE OF A COMMUNITY COLLABORATION BETWEEN LOCAL POLICYMAKERS, THE YMCA, THE PARKS AND RECREATION DEPARTMENT, THE MONROE COUNTY HEALTH DEPARTMENT AND OTHER MEMBERS OF THE ACTIVE LIVING COALITION TO ADVOCATE AND SUPPORT HEALTHY LIVING OPPORTUNITIES BY CHANGING THE ENVIRONMENT WHERE WE LIVE, WORK AND PLAY THE CONTINUED INVOLVEMENT OF KEY LEADERS ACROSS ALL SECTORS ACTS AS A CATALYST FOR IMPROVING THE HEALTH AND WELL-BEING OF OUR COMMUNITY THEY LEAD BY EXAMPLE TO BETTER REACH PEOPLE STRUGGLING TO MAKE PHYSICAL ACTIVITY AND GOOD NUTRITION A PART OF THEIR EVERYDAY LIVES BETTER PUBLIC POLICIES CREATE ENVIRONMENTAL CHANGES THAT IMPROVE LASTING, COMMUNITY-WIDE HEALTHY LIVING BEHAVIORS THE MONROE COUNTY YMCA SUPPORTS THE YMCA ACTIVATE AMERICA NATIONAL MOVEMENT THAT IS COMMITTED TO INFLUENCING AND MOTIVATING OUR COMMUNITY IN RESPONSE TO THE GROWING HEALTH CRISIS THE YMCA PROVIDES OPPORTUNITIES FOR PEOPLE OF ALL AGES IN THEIR PURSUIT OF HEALTH AND WELL-BEING THE YMCA EXTENDS ITS CHARITABLE HERITAGE BY DIRECTLY ENGAGING CHILDREN AND ADULTS FROM ALL SEGMENTS OF OUR COMMUNITY TO ACHIEVE HEALTHY SPIRIT, MIND AND BODY AND WELL-BEING THE YMCA EXTENDS ITS CHARITABLE HERITAGE BY DIRECTLY ENGAGING CHILDREN AND ADULTS FROM ALL SEGMENTS OF OUR COMMUNITY TO ACHIEVE HEALTHY SPIRIT, MIND AND BODY OUR MISSION COMES ALIVE THROUGH THE EFFORTS OF * PAID STAFF - WHO ARE FULL AND PART-TIME OF ALL AGES * VOLUNTEERS - WHO LEAD PROGRAMS, SET POLICY, AND RAISE FUNDS * MEMBERS - WHO BECOME MENTORS, COACHES, DONORS, AND PART OF OUR YMCA FAMILY THE YMCA USES THE SEARCH INSTITUTE'S 40 DEVELOPMENTAL ASSETS MODEL TO MEASURE THE SUCCESS OF OUR YOUTH AND TEEN PROGRAMS THROUGH EXTENSIVE RESEARCH THE SEARCH INSTITUTE OF MINNEAPOLIS IDENTIFIED 40 POSITIVE EXPERIENCES AND QUALITIES - "DEVELOPMENTAL ASSETS"- WHICH ALL YOUTH AND TEENS NEED TO BECOME HEALTHY, CONTRIBUTING ADULTS - ASSETS LIKE CARING, ADULT ROLE MODELS, HIGH EXPECTATIONS, AND FEELING SAFE IDEALLY ALL YOUTH AND TEENS SHOULD EXPERIENCE AT LEAST 31 OF THE 40 DEVELOPMENTAL ASSETS, HOWEVER, CURRENTLY NATIONAL STUDIES SHOW THAT MOST EXPERIENCE FEWER THAN 20 YMCA PROGRAMS ARE DESIGNED TO FILL IN THAT GAP, AND GIVE YOUTH AND TEENS THOSE ASSETS THEY NEED TO SUCCEED THROUGH COLLABORATIONS AND PARTNERSHIPS WITH MORE THAN 37 CHURCHES, SCHOOLS, AND OTHER COMMUNITY GROUPS AND ORGANIZATIONS SUCH AS THE 4H, ACTIVE LIVING COALITION, AMERICAN CANCER SOCIETY, AMERICAN HEART ASSOCIATION, AMERICAN RED CROSS, AMETHYST HOUSE, ARTHRITIS FOUNDATION, BIG BROTHERS BIG SISTERS, BLOOMINGTON MEADOWS HOSPITAL, BOY SCOUTS, CAMPUS LIFE, CENTERSTONE, CITY AND COUNTY PARKS & RECREATION, EASTERN-GREENE SCHOOL CORPORATION, GIRL SCOUTS, GIRLS, INC , GREATER BLOOMINGTON CHAMBER OF COMMERCE, HARMONY SCHOOL, IMA, INDIANA UNIVERSITY, INDIANA UNIVERSITY HEALTH, IVY TECH, MIDDLE WAY HOUSE, MONROE COUNTY COMMUNITY SCHOOL CORPORATION, MONROE COUNTY HEALTH DEPARTMENT, MONROE COUNTY LIBRARY, NEW TECH HIGH SCHOOL, OPTIONS, POLICE AND FIRE DEPARTMENTS, PREMIER HEALTHCARE, PROTON THERAPY CENTER, RICHLAND BEAN BLOSSOM SCHOOL SYSTEM, THE RISE, STONE BELT, SUICIDE PREVENTION COALITION AND US ARMED SERVICES, THE YMCA WAS ABLE TO EXTEND ITS PROGRAM OPPORTUNITIES INTO THE SURROUNDING COUNTIES AND DEEP INTO THE HEART OF URBAN NEIGHBORHOODS FOR THOUSANDS OF INDIVIDUALS AND FAMILIES, THE YMCA HELPS PARTICIPANTS * GROW PERSONALLY BUILD SELF-ESTEEM AND SELF-RELIANCE * DEVELOP VALUES FOR DAILY LIVING DEVELOP MORAL AND ETHICAL BEHAVIOR BASED ON JUDEO-CHRISTIAN PRINCIPLES * REDUCE STRESS AND IMPROVE FAMILY RELATIONS LEARN TO CARE, COMMUNICATE, AND COOPERATE WITH OTHERS CLOSE TO THEM * APPRECIATE DIVERSITY RESPECT PEOPLE OF ALL DIFFERENT AGES, ABILITIES, INCOMES, RACE, RELIGIONS, CULTURES, AND BELIEFS * BECOME LEADERS AND SUPPORTERS LEARN TO GIVE AND TAKE NECESSARY STEPS TO WORK TOWARD THE COMMON GOOD * DEVELOP SPECIFIC SKILLS ACQUIRE NEW KNOWLEDGE AND WAYS TO GROW IN SPIRIT, MIND, AND BODY * SERVE THE COMMUNITY VOLUNTEER BOTH INSIDE AND OUTSIDE THE YMCA, RAISE AWARENESS AND FINANCIAL SUPPORT IN ORDER TO PROVIDE YMCA OPPORTUNITIES FOR THOSE FACING ECONOMIC CHALLENGES * HAVE FUN ENJOY A HEALTHY LIFE THE MONROE COUNTY YMCA IS WHERE YOU CAN GIVE BACK OUR COMMUNITY FACES GREAT CHALLENGES CHILDREN, YOUTH, AND FAMILIES NEED SUPPORT AS NEVER BEFORE THE YMCA IS PERFECTLY POSITIONED TO HELP REINVIGORATE OUR COMMUNITIES WE CONTINUE TO COLLABORATE WITH SCHOOL DISTRICTS, RESIDENTS, EDUCATORS, AND OTHER COMMUNITY ORGANIZATIONS TO ENSURE THAT THE NEEDS OF CHILDREN AND FAMILIES IN DISADVANTAGED COMMUNITIES ARE MET IN 2010 THE YMCA STEPPED UP TO THE CHALLENGE BY * PROVIDING $159,540 IN OVER 2,009 FULL OR PARTIAL SCHOLARSHIPS TO YOUTH, FAMILIES, AND INDIVIDUALS WHO WOULD OTHERWISE NOT HAVE BEEN ABLE TO AFFORD TO PARTICIPATE WE DID THIS THROUGH CONTRIBUTIONS TO THE YMCA'S PARTNER WITH YOUTH CAMPAIGN, TOTALING $161,006, AND THE CARDIAC REHAB GOLF TOURNAMENT, WHICH RAISED $11,545 * THE YMCA DOES WHAT IT DOES BEST BY CREATING OPPORTUNITIES FOR ALL TYPES OF NEEDS IN ALL TYPES OF COMMUNITIES

Identifier	Return Reference	Explanation
Review of form 990 by governing body	Form 990, Part VI, Section B, Line 11b	MANAGEMENT AND THE AUDIT COMMITTEE REVIEWS THE FORM 990 IN DETAIL BEFORE IT IS FILED ELECTRONICALLY WITH THE IRS IN ADDITION, THE FORM 990 IS E-MAILED TO THE BOARD OF DIRECTORS FOR THEIR REVIEW BEFORE IT IS ELECTRONICALLY FILED

Identifier	Return Reference	Explanation
Conflict of interest policy	Form 990, Part VI, Section B, Line 12c	YMCA OF MONROE COUNTY, INC HAS A CONFLICT OF INTEREST POLICY THAT IS COMPLETED BY ALL DIRECTORS AND OFFICERS WHEN THEY FIRST BEGIN THEIR POSITION AND THEN AGAIN ANNUALLY THE CONFLICT OF INTEREST POLICIES ARE REVIEWED BY THE CFO AND THEN POTENTIAL CONFLICTS ARE BROUGHT TO THE ATTENTION OF THE AUDIT COMMITTEE THE AUDIT COMMITTEE DETERMINES BY MAJORITY VOTE OF DISINTERESTED PERSONS WHETHER A DISCLOSED INTEREST MAY RESULT IN A CONFLICT OF INTEREST

Identifier	Return Reference	Explanation
Process used to establish compensation of top management official	Form 990, Part VI, Section B, Line 15a	THE PERSONNEL COMMITTEE IS RESPONSIBLE FOR ANNUALLY CONDUCTING A PERFORMANCE EVALUATION OF THE EXECUTIVE DIRECTOR, RECOMMENDING THE SALARY, AND REPORTING TO THE BOARD OF DIRECTORS THE EXECUTIVE DIRECTOR RECEIVES A 360 DEGREE EVALUATION FROM THE OTHER MONROE COUNTY YMCA MANAGEMENT STAFF AND THE BOARD OF DIRECTORS THIS PROCESS BEGINS BY JUNE 1ST EACH YEAR THE STAFF EVALUATIONS ARE SUBMITTED TO THE CHAIR OF THE PERSONNEL COMMITTEE AND THE BOARD EVALUATIONS TO THE ADMINISTRATIVE ASSISTANT, BOTH BY AUGUST 30 THE ADMINISTRATIVE ASSISTANT COMPILES ALL INFORMATION AND PRESENTS THE RESULTS OF THE EVALUATIONS TO THE PERSONNEL COMMITTEE THE PERSONNEL COMMITTEE THEN SUBMITS A PERFORMANCE REVIEW AND SALARY INCREASE RECOMMENDATION TO THE EXECUTIVE COMMITTEE THE CHAIR OF THE PERSONNEL COMMITTEE PRESENTS THE PERFORMANCE REVIEW INFORMATION AND SALARY RECOMMENDATION TO THE BOARD OF DIRECTORS FOR APPROVAL THE PERSONNEL COMMITTEE CHAIR MEETS ONE ON ONE WITH THE EXECUTIVE DIRECTOR TO PRESENT THE FULL EVALUATION THE WRITTEN EVALUATION DOCUMENTS THE DELIBERATION PROCESS IN ADDITION TO THE MANAGEMENT STAFF AND BOARD EVALUATIONS OF THE EXECUTIVE DIRECTOR, THE PERSONNEL COMMITTEE PERFORMS SALARY SURVEY WORK EACH YEAR, GATHERING COMPARATIVE DATA FROM ORGANIZATIONS IN OUR COMMUNITY, BOTH FOR PROFIT AND NOT-FOR-PROFIT, AND OTHER YMCA'S THE END RESULT OF THE EXECUTIVE DIRECTOR ANNUAL EVALUATION PROCESS IS A WRITTEN, SIGNED EMPLOYMENT CONTRACT FOR THE COMING CALENDAR YEAR THE PROCESS DESCRIBED ABOVE WAS LAST UNDERTAKEN IN 2010

Identifier	Return Reference	Explanation
Process used to establish compensation of other officers/key employees	Form 990, Part VI, Section B, Line 15b	THE EXECUTIVE DIRECTOR IS RESPONSIBLE FOR ANNUALLY CONDUCTING A PERFORMANCE EVALUATION OF THE CFO, RECOMMENDING THE SALARY, AND REPORTING TO THE CHAIR OF THE FINANCE COMMITTEE THE CFO'S SALARY IS PRESENTED TO THE PERSONNEL COMMITTEE BY THE EXECUTIVE DIRECTOR AS PART OF THE TOTAL PROFESSIONAL SALARY LINE FOR THE YEAR BOTH THE CHAIR OF THE FINANCE COMMITTEE AND THE PERSONNEL COMMITTEE APPROVE THE SALARY FOR THE CFO IN ADDITION TO THE ANNUAL REVIEW PREPARED BY THE EXECUTIVE DIRECTOR, SALARY SURVEY WORK IS PERFORMED EACH YEAR, GATHERING COMPARATIVE DATA FROM ORGANIZATIONS IN OUR COMMUNITY, BOTH FOR PROFIT AND NOT-FOR-PROFIT, AND OTHER YMCA'S THE END RESULT OF THE CFO ANNUAL EVALUATION PROCESS IS A WRITTEN, SIGNED EMPLOYMENT CONTRACT FOR THE COMING CALENDAR YEAR IN ADDITION TO THE SIGNED CONTRACT, A WRITTEN EVALUATION IS PREPARED DOCUMENTING THE DELIBERATION PROCESS THE PROCESS DESCRIBED ABOVE WAS LAST UNDERTAKEN IN 2010

Identifier	Return Reference	Explanation
Public Disclosure	Form 990, Part VI, Section C, Line 19	REQUESTS FOR DOCUMENTS SHOULD BE MADE TO THE MONROE COUNTY YMCA CFO THE DOCUMENTS WILL BE PROVIDED TO THE REQUESTER AS SOON AS POSSIBLE THE FOLLOWING DOCUMENTS WILL BE MADE AVAILABLE UPON REQUEST - FORM 1023, APPLICATION FOR RECOGNITION OF EXEMPTION UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE - FORM 990, RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX - DETERMINATION LETTER - AUDITED FINANCIAL STATEMENTS - CONFLICT OF INTEREST POLICY - KEY GOVERNING DOCUMENTS - ARTICLES OF INCORPORATION - BY LAWS THE FORM 990 IS MADE AVAILABLE TO THE PUBLIC VIA THE GUIDESTAR WEBSITE, WWW GUIDESTAR ORG A FINANCIAL REPORT, AS WELL AS CONTRIBUTION, SCHOLARSHIP, AND MEMBERSHIP INFORMATION IS PUBLISHED IN OUR ANNUAL REPORT THAT IS MAILED TO ALL CURRENT MONROE COUNTY YMCA MEMBERS

Identifier	Return Reference	Explanation
Other changes in net assets or fund balances	Form 990, Part XI, Line 5	NET UNREALIZED GAINS (LOSSES) ON INVESTMENTS - 101835,