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SCANNED JUL 27 2011

Department of the Treasury -Internal Revenue Service

For the 2010 calendar year, or tax year beginning

## **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

and ending

OMB No 1545-0047 2010

Open to Public Inspection

В	Check if applicable	C Name of organization	D Empl	oyer identification number
$\sqcup$	Address change	Walla Walla YMCA	01.	.0E000E <i>6</i>
	Name change	Doing Business As		-0580856
	In:tial return	Number and street (or P O box if mail is not delivered to street address)  Room/suite	E Telepi	hone number
Ħ	Terminated	340 S. Park Street		
吕		City or town, state or country, and ZIP + 4		0 006 655
ᆜ	Amended return	Walla Walla WA 99362	<b>G</b> Gross rec	eipts\$ 2,886,655
$\square$	Application pending	F Name and address of pπnαpal officer H(a) is this ag	roup return for	affiliates? Yes X No
				Ä.
		H(b) Are all a		ist (see instructions)
		<u></u>	o, allaura	ist (see instructions)
<u></u>	Tax-exempt sta	·		
<u>J</u>		www.wwymca.org H(c) Group e	exemption nu	
_	Form of organization			M State of legal domicile
<u> </u>	Υ -	ummary		
	1 .	describe the organization's mission or most significant activities		
8	You	th & adult development		
ğ	i			
Activities & Governance				
Š	2 Check	his box $ ightharpoonup$ if the organization discontinued its operations or disposed of more than 25% of its net as:	sets	
ತ	3 Numbe	r of voting members of the governing body (Part VI, line 1a)	3	18
98	4 Numbe	r of independent voting members of the governing body (Part VI, line 1b)	4	18
₹	5 Total n	imber of individuals employed in calendar year 2010 (Part V, line 2a)	5	185
¥	6 Total n	imber of volunteers (estimate if necessary)	6	
_		related business revenue from Part VIII, column (C), line 12	.7a	
	b Net unr	elated business taxable income from Form 990-T, line 34	7b	0
	1	Prior Ye.		Current Year
Revenue	8 Contrib		6,577	623,398
	9 Program	· · · · · ·	8,020	2,217,946
	10 Investm	ent income (Part VIII, column (A), lines 3, 4, and 7d)		
_	11 Other n		7,973	45,311
	1		2,570	<u>2,886,655</u>
		and similar amounts paid (Part IX, column (A), lines 1-3)		
	14 Benefit	s paid to or for members (Part IX, column (A), line 4)		
S	15 Salane	· · · · · · · · · · · · · · · · · · ·	7,260	1,566,984
S.	16a Profess	ional fundraising fees (Part IX, column (A), line 11e)		
Expenses	b Total fu	ndraising expenses (Part IX, column (D), line 25) ▶		
ш	17 Other e	xpenses (Part IX, column (A), lines 11a–11d, 11f–24f)		971,203
			4,640	2,538,187
	19 Revenu		7,930	348,468
Net Assets or		Beginning of Cu	9,736	End of Year
889	20 Totala		9,136	8,528,204
¥ ;	21 Total lia		0 736	0 520 204
			9,736	8,528,204
_		ignature block		
		penury, I declare that I have examined this return, including accompanying schedules and statements, and to the best o complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge	f my knowled	dge and belief, it is
	uo, concer, and	this did the state of the state	$\overline{}$	-1 <i>U</i> -11
<b>0</b> :		Li Waw Jet	/	-17-11
Sig	- 1.	Signature of officer PHNNY GRANT EXECUTIVE DIRECTOR	Date	1.0
HE	ere	•	7	<u>-174.                                    </u>
_	<b>—   7</b>	Type or print name and title	1	<b>T</b>
D~	iai	ype preparer's name Preparer's signature Date		K X If PTIN
Pal	Dary.			mployed P00183394
			Firm's EIN ▶	82-0586254
Ų\$	e Only	450 Valley Chapel Rd		FAA FAF 1661
_			Phone no	509-525-1664
_	<u> </u>	uss this return with the preparer shown above? (see instructions)	_	Yes No
FO		teduction Act Notice, see the separate instructions.		Form <b>990</b> (2010)

om	n 990 (2010) Walla Walla YMCA 91-0580856		Р	age :
Pa	art 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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to		1	
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	<u> </u>	X
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,		ļ	۱.,
	Part III	5	<b>├</b>	X
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,"			۱.,
	complete Schedule D, Part I	6	<b>}_</b>	X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			l
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	├	X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			l
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			l
	complete Schedule D, Part IV	9	ļ	X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-			l
	endowments? If "Yes," complete Schedule D, Part V	10		X
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			ŀ
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"	1		
	complete Schedule D, Part VI	11a	X	<u> </u>
þ	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	-	X
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more		1	
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	<b></b>	X
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	<del> </del>	X
8	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	<del></del>	X
f				٠.
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	-	X
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	<del>├</del>	X
þ	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	400	ľ	<b>.</b>
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	├	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	<del> </del>	X
14a		14a	$\vdash$	
þ		445	l	x
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b	<del> </del>	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	4.5		x
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	<del> </del>	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	46		x
. ~	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	$\vdash$	┢
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	47		x
40	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	<del> </del>	<b>├</b> ^
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	18		x
40	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	<del>                                     </del>	^
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?  If "Yes " complete Schedule G. Part III	19		x

20a

20b

X

20a Did the organization operate one or more hospitals? If "Yes," complete Schedule H

b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)

Pa	intil Checklist of Required Schedules (continued)					
					Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations					
	in the United States on Part IX, column (A), line 17 if "Yes," complete Schedule I, Parts I and II			21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States					
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III			22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the					
	organization's current and former officers, directors, trustees, key employees, and highest compensated		į			
	employees? If "Yes," complete Schedule J			23		X
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					
	through 24d and complete Schedule K If "No," go to line 25			24a		X
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?			24b		
С	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		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior					
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?					
	If "Yes," complete Schedule L, Part I			25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or					
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II			26		X
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		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,					
	Part IV instructions for applicable filing thresholds, conditions, and exceptions).					
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete					
	Schedule L, Part IV			28b		X
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		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M			29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified					
	conservation contributions? If "Yes," complete Schedule M			30	L	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,					
	Part I			31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"				İ	
	complete Schedule N, Part II			32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations					
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I			33		X
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		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			35		Х
а	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,		( <del></del> )			
	Part V, line 2	Yes	X No			1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable					
	related organization? If "Yes," complete Schedule R, Part V, line 2			36	—	X
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	ļ	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and					<b>.</b>
	19? Note. All Form 990 filers are required to complete Schedule O	<u> </u>	•	38_	000	X

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Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V			П
	Check ii Concedio O Comanio a 100pondo to arry question in tino i are v		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and	1 1		
Ŭ	reportable gaming (gambling) winnings to prize winners?	1c		X
22	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 185			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	x	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	1		_
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		x
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	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		X
h	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		x
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
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		х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
-	qifts were not tax deductible?	6ь		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7е		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
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.	l		
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter.			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter.	}		
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them )			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		<u> </u>
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		<del>                                     </del>
	Note. See the instructions for additional information the organization must report on Schedule O			
þ	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	<u> </u>			x
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		
b_	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	gan	(2010)
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Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a Part VI "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule See instructions. X Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Ye<u>s</u> No 18 1a Enter the number of voting members of the governing body at the end of the tax year 18 1b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 X any other officer, director, trustee, or key employee? 2 3 Did the organization delegate control over management duties customarily performed by or under the direct X supervision of officers, directors or trustees, or key employees to a management company or other person? 3 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? X Did the organization become aware during the year of a significant diversion of the organization's assets? X Does the organization have members or stockholders? 6 7a Does the organization have members, stockholders, or other persons who may elect one or more members X of the governing body? 7a **b** Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following. X a The governing body? 8a X 8b b Each committee with authority to act on behalf of the governing body? 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No 10a X 10a Does the organization have local chapters, branches, or affiliates? 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 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the 11a X 11a Describe in Schedule O the process, if any, used by the organization to review this Form 990 X 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 b Are officers, directors or trustees, and key employees required to disclose annually interests that could give 12b rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done 12c Does the organization have a written whistleblower policy? 13 13 Does the organization have a written document retention and destruction policy? 14 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 Other officers or key employees of the organization 15b 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 X with a taxable entity during the year? 16a 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 List the states with which a copy of this Form 990 is required to be filed ▶ 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, 19 and financial statements available to the public State the name, physical address, and telephone number of the person who possesses the books and records of the 20 PO Box 1637 organization > YMCA WA 99362 509-525-8863 Walla Walla

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 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

(A) Name and Title	(B) Average hours per			chec	C) k all t	hat ap	ply)	(D) Reportable compensation	(E)  Reportable compensation from	(F) Estimated amount of
	week (describe hours for related organizations in Schedule O)	individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) Scott Abajian	0.00	x						0	0	
(2) Tim Larkin	0.00	x						0	0	(
(3) Darin Harvey	0.00	x						0	0	(
(4) Mick Miller	0.00	x						0	0	(
(5) Mike Clark	0.00	x						0	0	(
(6) Sandi Madsen	0.00	x						0	0	
(7) Mike Monahan	0.00	x						O	0	•
(8) Kerry Tierney President	0.00	x		x				0	0	
(9) Paul Folz	0.00	x						o	O	(
10) Becky Musick	0.00	x						0	0	
11) Dave Elmenhurst	0.00	x		!				O	0	
12) Ted Cohan	0.00	x						o	0	(
13) Rob Blethen	0.00	x						0	0	(
14) John Ladderud	0.00	x						0	0	
15) Steve Burdick	0.00	x						0	0	
16)										

Pa	rt:VII Section A. Officers	, Directors, Trus	tee	3, Ke	y Er	nplo	yee	s, an	nd Highest Compensated	Employees (continued)				
-	(A) Name and Title	(B) Average	Posi	tion (	(Check	C) k all 1	that a	pply)	(D) Reportable	(E) Reportable		(F) Estima	ted	
	•	hours per week (describe hours for related organizations in Schedule O)	individual trustee or director	_	Officer	_	Highest compensated employee	_	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations			
(17)														
(18)														
(19)														
(20)													-	
(21)														
(22)														
(23)														
(24)														
(25)														
(26)														
(27)														
(28)														
1b	Sub-total							<b>&gt;</b>						
C d	Total from continuation she Total (add lines 1b and 1c)	ets to Part VII, S	ectio	on A				<b>&gt;</b>						
2	Total number of individuals (in				thos	e lis	ted a	bov	re) who received more than	\$100,000 in	<u> </u>			
	reportable compensation from	the organization	<u> </u>	0			-						V	NI.
3	Did the organization list any for employee on line 1a? If "Yes,"								oyee, or highest compensa	ted		3	Yes	No X
4	For any individual listed on lin organization and related orga	e 1a, is the sum	of re	port	able	com	pen	satic						
5	Individual  Did any person listed on line for services rendered to the o									r ındıvıdual		5		x
Sec	ction B. Independent Contract			-					Tot Good police.					
1	Complete this table for your fi compensation from the organ	ization	ensa	ited	inde	pend	lent (	cont					(C)	
	Name and	(A) d business address						╀	Descrip	(B) ation of services		Cc	(C) mpensa	ton
						_		L						
								L						
								L						
								igspace						
						L			- h-1-d - h					<u>-</u>
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														

Pa	η ν	iii Statement of Reve	nue		<del></del>	445	(5)	(0)	(D)
1	•					(A) Total revenue	(B) Related or exempt	(C) Unrelated	Revenue excluded from tax
1							function	business revenue	under sections
<u> </u>							revenue		512, 513, or 514
	1a	Federated campaigns	1a						
윤일	Þ	Membership dues	1b						
ま」。 を 上	C	Fundraising events	1c						
200	đ	Related organizations	1d						
Program Service Revenue Contributions, gifts, grants and other similar amounts	8	Government grants (contributions)	1e						
	f	All other contributions, gifts, grants, and similar amounts not included above	ا ا		602 200				
# 문항			_1f_		623,398				
SE SE	9	Noncash contributions included in lines 1a-	1f \$	•	[	622 200			
=	h	Total. Add lines 1a-1f			<u> </u>	623,398			
ğ	_				Busn. Code	1 020 220	1 020 220		
8	2a	Membership dues			}	1,938,320	1,938,320		
뼔	þ	Program revenue			<b></b>	279,626	279,626		
ž	C								
န္မ	d				<del> </del>				
튙	8				$\vdash$				
<u>g</u>	f	All other program service reve	nue		<u> </u>	0.017.046			L
_	ы	Total. Add lines 2a-2f			<u> </u>	2,217,946			<u> </u>
	3	Investment income (including	dividen	ds, intere	est,	·			
		and other similar amounts)							
	4	Income from investment of tax	r-exem	pt bond p	roceeds P			<u> </u>	
	5	Royalties	Т		<b>P</b>				
		(i) Real		(ii) F	'ersonal				
	6a	Gross Rents							
	þ	Less rental exps							
	C	Rental inc or (loss)						•	
	d 7a	Net rental income or (loss) Gross amount from (1) Securition			<b>D</b>				
		sales of assets (i) Securities	B 	(11)	Other				
		other than inventory							
	þ	Less cost or other							
		basis & sales exps							
	C	Gain or (loss)	_	i		_	-		
	d	Net gain or (loss)	ſ						
9	8a	Gross income from fundraising eve	ents						
ent		(not including \$							
Şe.		of contributions reported on line 1c	)						
er i		See Part IV, line 18	а						
Other Revenue		Less direct expenses	þ			-		-	
		Net income or (loss) from fund		events	<b>•</b>				<u> </u>
	9a	Gross income from gaming activities							
		See Part IV, line 19	а						
		Less direct expenses	ρĺ						
		Net income or (loss) from gam	ning ac	tivities	<b></b>				
	10a	Gross sales of inventory, less	ĺ						
		returns and allowances	а		-				
		Less cost of goods sold	þĮ						
	С	Net income or (loss) from sale		ventory_					
		Miscellaneous Revenue	3		Busn. Code	45 844			45 044
	11a	Miscellaneous			<del>                                     </del>	45,311			45,311
	b				<del> </del>				
	C .	A.H A.							
	d	All other revenue				AE 344			
	θ	Total. Add lines 11a-11d			▶	45,311			45 211
	12	Total revenue. See instruction	ns .		▶	2,886,655	2,217,946	0	45,311

### 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,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,254,974	1,167,126	87,848	
8	Pension plan contributions (include section 401(k)	1	•	ĺ	
-	and section 403(b) employer contributions)				
9	Other employee benefits	312,010	290,169	21,841	·-·
10	Payroll taxes		,	- <b>,</b>	
11	Fees for services (non-employees)				
а	Management				
b	Legal				
C	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				<u> </u>
g	Other				
12	Advertising and promotion				
13	Office expenses				
14	Information technology	:			
15	Royalties				
16	Occupancy	258,239	240,162	18,077	
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	51,623	48,009	3,614	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	234,813	234,813		
23	Insurance				
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.)		444		
а	Programs	193,852	193,852	2 647	
þ	Miscellaneous	52,105		3,647	
С	National dues	52,042	48,399	3,643	
d	Repairs & maintenance	36,438	33,887	2,551	<u></u>
е	Professional fees	30,677	28,530	2,147	
f	All other expenses	61,414	57,115	4,299	
25	1	2,538,187	2,390,520	147,667	0
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				
DAA	campaign and fundraising solicitation				Form <b>990</b> (2010

Part X	Balance Sheet			
•		(A) Beginning of year		(B) End of year
1	Cash—non-interest bearing	628	1	628
2	Savings and temporary cash investments	671,959	2	593,747
3	Pledges and grants receivable, net		_3	
4	Accounts receivable, net		4	
5	Receivables from current and former officers, directors, trustees, key		1	
	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			
1	employers and sponsoring organizations of section 501(c)(9) voluntary			
	employees' beneficiary organizations (see instructions)		6	
Assets	Notes and loans receivable, net		7	
88 8	Inventories for sale or use		8	
<b>⋖</b>   9	Prepaid expenses and deferred charges		9	
10a	Land, buildings, and equipment, cost or			
	other basis Complete Part VI of Schedule D 10a 8,060,758			
b	Less. accumulated depreciation 10b 4,619,743	3,412,769	10c	3,441,015
11	Investments—publicly traded securities	4,094,380	11	4,492,814
12	Investments—other securities See Part IV, line 11		12	
13	Investments—program-related See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	8,179,736	16	8,528,204
17	Accounts payable and accrued expenses		17	
18	Grants payable		18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
တ္က 21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities 23	Payables to current and former officers, directors, trustees, key			
<u></u>	employees, highest compensated employees, and disqualified persons			
<u> </u>	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		25	
26	Total liabilities. Add lines 17 through 25	0	26	0
Se	Organizations that follow SFAS 117, check here ▶ X and complete			
[일	lines 27 through 29, and lines 33 and 34.			
<u>ē</u>   27	Unrestricted net assets	8,179,736	27	8,528,204
Fund Balances 27 28 29 29	Temporanly restricted net assets		28	
일 29	Permanently restricted net assets		29	
2	Organizations that do not follow SFAS 117, check here ▶ ☐ and			
5	complete lines 30 through 34.			
<b>2</b> 30	Capital stock or trust principal, or current funds		30	
31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Ø 32	Retained earnings, endowment, accumulated income, or other funds		32	
Net Assets 32 33 34	Total net assets or fund balances	8,179,736		8,528,204
Ž   34	Total liabilities and net assets/fund balances	8,179,736	34	8,528,204

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in

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

the Single Audit Act and OMB Circular A-133?

3a

3h

X

## SCHEDULE A (Form 990 or 990-EZ)

**Public Charity Status and Public Support** 

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

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

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

OMB No 1545-0047

2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Part I

Walla Walla YMCA

Employer identification number 91-0580856

The	orgar	nization is not	a private foundation becaus	e it is (For lines 1 through 11, o	check only	one box	)						
1		A church, co	nvention of churches, or ass	ociation of churches described	ın section	170(b)(1	)(A)(i).						
2		A school des	cribed in section 170(b)(1)(	A)(ii). (Attach Schedule E )									
3		A hospital or	a cooperative hospital service	ce organization described in sec	ction 170	b)(1)(A)(i	ili).						
4		A medical re-	search organization operated	d in conjunction with a hospital o	described	ın sectio	n 170(b	)(1)(A)(i	ii). Ente	r the ho	ospital's nan	ıe,	
		city, and stat	e.										
5		• .		of a college or university owned	or operate	ed by a q	ovemme	ental uni	t descri	bed ın			
	ت	•	b)(1)(A)(iv). (Complete Part	•	·								
6	$\Box$	•		overnmental unit described in s	ection 17	0(b)(1)(A	)(v).						
7	H	•	•	substantial part of its support fro				from the	genera	d public	•		
•		-	section 170(b)(1)(A)(vi). (Co		Jiii a gove		dine or		gonore	pubc	•		
8				1 <b>70(b)(1)(A)(vi)</b> . (Complete Part	шх								
	X	-			•	nontribut.	one me	mbombi	n food	and are	200		
9	A	_		1) more than 33 1/3% of its supp							J55		
		-		npt functions—subject to certain									
			~	nd unrelated business taxable in				c) from E	usines	ses			
40			=	0, 1975 See section 509(a)(2).	•		•						
10	$\vdash$	•	•	exclusively to test for public safe	•					_			
11		_	•	exclusively for the benefit of, to	=						_		
				ed organizations described in se						section	1		
		<u>`````</u>		he type of supporting organizati		•	1	_ ·		<b>.</b>			
		a Type	<b>□</b> , •.	c Type III–Functions			d		e III–Ot				
е	Ш			anization is not controlled direct	-					•			
			•	er than one or more publicly sup	ported or	ganizatioi	is descr	ibea in s	ection	509(a)(	.')		
		or section 50	` ' '	among the state of the LDC that it is	a Tuna I	Tunnil	. T						
f		_		ermination from the IRS that it is	a Type I,	Type II,	or Type	iii suppo	orting				Г Т
			check this box										
g		_	•	tion accepted any gift or contrib	ution from	any of tr	1e						
		following per										<u> </u>	т
		• • •	•	ontrols, either alone or together	with perso	ons descr	ibea in (	ii) and			<u> </u>	Yes	No
		, ,	w, the governing body of the	• • •							11g(		+
		•	member of a person describ	**							11g(		+
_		• •	·	described in (i) or (ii) above?							11g(	(11)]	
h			T .	he supported organization(s)	Ta								
(i)		e of supported anization	(ii) EiN	(iii) Type of organization (described on lines 1–9	1 ' '	rganization sted in your		ou notify	(VI) I organizat	s the		mount of pport	Ť
	U.g.	anization.		above or IRC section		document?	col (i)	of your	(i) organı	zed in the		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
				(see instructions))	<del></del>			port?		S 7	ĺ		
					Yes	No	Yes	No	Yes	No			
A)								1			ł		
					<del>                                     </del>		!	<b>-</b>					
B)					i								
					<del> </del>			<u> </u>	-				
C)					ŀ								
					ļ			ļ	<u> </u>				
D)					ł		ł	ĺ					
					<del> </del>						<u> </u>		
E)													
					<u> </u>			<del> </del>	-				
							i		ł				
Tota	ıl		1	I	I	I	I	I	ŀ	1 !	1		

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.)

Sec	tion A. Public Support							
Caler	dar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 201	0	(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							
Sec	tion B. Total Support							
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 201	0	(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						$\longrightarrow$	
12	Gross receipts from related activities, etc	(see instructions)					12	
13	First five years. If the Form 990 is for the	organization's firs	t, second, third, fo	urth, or fifth tax ye	ar as a section 501	(c)(3)		
	organization, check this box and stop her							<u>▶</u>
Sec	tion C. Computation of Public Su	upport Percen	tage	<u>-</u>				
14	Public support percentage for 2010 (line 6	i, column (f) dıvıde	d by line 11, colun	nn (f))			14	<u>%</u>
15	Public support percentage from 2009 Sch	edule A, Part II, lin	ie 14				15	%
16a	33 1/3% support test—2010. If the organ	zation did not che	ck the box on line	13, and line 14 is 3	33 1/3% or more, o	heck this		
	box and stop here. The organization qual	ifies as a publicly s	supported organiza	ation				▶ [_
b	33 1/3% support test—2009. If the organi	zation did not che	ck a box on line 1:	3 or 16a, and line 1	15 is 33 1/3% or m	ore,		
	check this box and stop here. The organiz	•		_				▶ [_
17a	10%-facts-and-circumstances test—201	0. If the organizati	on did not check a	a box on line 13, 16	6a, or 16b, and line	14 is		
	10% or more, and if the organization meet	ts the "facts-and-c	ircumstances" tes	t, check this box ai	nd <b>stop here</b> . Expl	ain in		
	Part IV how the organization meets the "fa	acts-and-circumsta	inces" test. The or	ganization qualifie	s as a publicly sup	ported		. •
	organization							▶ [
þ	10%-facts-and-circumstances test—200							
	15 is 10% or more, and if the organization							
	Explain in Part IV how the organization me	eets the "facts-and	l-circumstances" to	est. The organizati	on qualifies as a p	ublicly		, r-
	supported organization							▶ [
18	Private foundation. If the organization did	not check a box	on line 13, 16a, 16	ib, 17a, or 17b, che	eck this box and se	ee		
	instructions							▶ [

Page 3

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.)

<del></del>	tion A. Public Support	quality under t	ile lesis listeu	below, please	complete r ai	t 11.)	
	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
	• • • • •	(a) 2000	(b) 2007	(0) 2000	(4) 2003	(0) 2010	(i) rotal
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	2,224,642	2,590,399	2,271,319	716,577	233,687	8,036,624
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	524,823	384,753	52,123	57,973	45,311	1,064,983
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge	:					
6	Total. Add lines 1 through 5	2,749,465	2,975,152	2,323,442	774,550	278,998	9,101,607
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000	407, 200	355 001	28,889			991 219
	or 1% of the amount on line 13 for the year  Add lines 7a and 7b	497,328 497,328	355,001 355,001	28,889			881,218 881,218
8	Public support (Subtract line 7c from line 6)	437,320	333,001				8,220,389
Sec	tion B. Total Support						572257555
	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9	Amounts from line 6	2,749,465	2,975,152	2,323,442	774,550	278,998	9,101,607
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b			-			
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on				56,973	44,311	101,284
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11,	l T	I				
	and 12)	2,749,465	2,975,152	2,323,442	831,523	323,309	9,202,891
14	First five years. If the Form 990 is for the organization, check this box and stop her	е		rth, or fifth tax year	as a section 501(	c)(3)	<b>&gt;</b> [
Sec	tion C. Computation of Public Su				·		
15	Public support percentage for 2010 (line 8			n (f))		15	89.32%
16	Public support percentage from 2009 Sch					16	86.48%
	tion D. Computation of Investme						
17	Investment income percentage for 2010 (I			column (f))		17	%
18	Investment income percentage from 2009			44 45	th 20 4 1001	18	<u></u> %
19a	33 1/3% support tests—2010. If the orga 17 is not more than 33 1/3%, check this b	ox and stop here. T	he organization q	ualifies as a publicl	y supported organ	ization	► X
b	33 1/3% support tests—2009. If the orga						▶ □
20	line 18 is not more than 33 1/3%, check the Private foundation. If the organization did						-

Partily

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).

## **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

Open to Public Inspection

Name	e of the organization		Employe	r identification number
W	alla Walla YMCA		91-0	580856
	art I Organizations Maintaining Donor Advised Fu organization answered "Yes" to Form 990, Par	inds or Other Similar Funds or t 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 (dunng year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in writing that	at the assets held in donor advised		
	funds are the organization's property, subject to the organization's exc	clusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor advisors in	writing that grant funds can be used		
	only for charitable purposes and not for the benefit of the donor or don	or advisor, or for any other purpose		
	conferring impermissible private benefit?			Yes No
Pa	art II Conservation Easements. Complete if the org	anization answered "Yes" to Fo	<u>rm 990, F</u>	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization (check	k all that apply)		
	Preservation of land for public use (e g , recreation or education)	Preservation of an historically in	mportant lan	d area
	Protection of natural habitat	Preservation of a certified history	nc structure	
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualified conse	ervation contribution in the form of a cons	servation	
	easement on the last day of the tax year			
			<del>  </del>	Held at the End of the Tax Year
a			2a	
b	,		2b	<del> </del>
C			2c	· · · · · · · · · · · · · · · · · ·
a	Number of conservation easements included in (c) acquired after 8/17	706, and not on a	2d	
•	historic structure listed in the National Register  Number of conservation easements modified, transferred, released, ex	vtinguished, or terminated by the organiz		the
3	tax year	Attinguished, or terminated by the organiz	ation during	tile
4	Number of states where property subject to conservation easement is	located ▶		
5	Does the organization have a written policy regarding the periodic mor			
·	violations, and enforcement of the conservation easements it holds?	moning, moposition, mandaling or		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enfor	cing conservation easements during the	year	
	<b>•</b>			
7	Amount of expenses incurred in monitoring, inspecting, and enforcing	conservation easements during the year		
	<b>▶</b> \$			
8	Does each conservation easement reported on line 2(d) above satisfy	the requirements of section 170(h)(4)(B)		
	(i) and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIV, describe how the organization reports conservation easen	•		
	balance sheet, and include, if applicable, the text of the footnote to the	e organization's financial statements that	describes th	ne
_	organization's accounting for conservation easements	Historical Tonoroma an Other	· Olmailan	A 4-
Pä	Organizations Maintaining Collections of Art Complete if the organization answered "Yes" to		r Similar <i>i</i>	Assets.
1a	If the organization elected, as permitted under SFAS 116 (ASC 958),	not to report in its revenue statement and	d balance sh	eet
	works of art, historical treasures, or other similar assets held for public			
	public service, provide, in Part XIV, the text of the footnote to its finance	cial statements that describes these item	IS	
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to	·		
	works of art, historical treasures, or other similar assets held for public	c exhibition, education, or research in furt	therance of	
	public service, provide the following amounts relating to these items			_
	(I) Revenues included in Form 990, Part VIII, line 1		<b>•</b>	\$
	(II) Assets included in Form 990, Part X			\$
2	If the organization received or held works of art, historical treasures, o		rovide the	
_	following amounts required to be reported under SFAS 116 (ASC 958)	) relating to these items.		œ
a	Revenues included in Form 990, Part VIII, line 1			\$

Pa	Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)									
3										
а	Public exhibition d Loan or exchange programs									
b	Scholarly research	e 🗌 Other		1						
C	Preservation for future generations	_								
4	Provide a description of the organization's colle	ections and explain how	they further the orga	nızatıon'	s exempt purp	ose in Par	t			
	XIV.									
5	During the year, did the organization solicit or	receive donations of art,	historical treasures,	or other	sımılar				_	-
	assets to be sold to raise funds rather than to							Ų_ Ye		No
Pa	rtiV Escrow and Custodial Arra			ation a	nswered "Y	es" to F	orm 99	90, Pa	rt IV	,
	line 9, or reported an amour									
1a	Is the organization an agent, trustee, custodial	n or other intermediary fo	or contributions or ot	her asse	ts not				_	٦
	ıncluded on Form 990, Part X?							Ye	s L	_ No
b	If "Yes," explain the arrangement in Part XIV a	nd complete the following	ig table.					•		
								Amoun		
	Beginning balance					1c				
d	Additions during the year					1d	<b></b>			
8	Distributions during the year					1e	<b>—</b>		—	—
T 0-	Ending balance	000 Dark V Ivaa 040				_1f		<u> </u>		1
	Did the organization include an amount on For If "Yes," explain the arrangement in Part XIV	m 990, Part X, line 21?						Ye	s L	No
	ert V Endowment Funds. Completing	ete if organization a	nswered "Yes"	to Forn	n 990 Part	IV line	10			
	Endownione i undo: Compie	(a) Current year	(b) Pnor year			(d) Three ye		(e) Foul	years	back
1a	Beginning of year balance			<del> `</del>						
b	Contributions									
c	Net investment earnings, gains, and									
	losses					~ <i>&gt;</i>	*			
d	Grants or scholarships						4			
e	Other expenditures for facilities and									* *
	programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the year	end balance held as								
а	a Board designated or quasi-endowment ▶ %									
b	Permanent endowment ▶ %									
C	Term endowment ▶ %									
3a	Are there endowment funds not in the possess	sion of the organization t	hat are held and adn	nınıstere	d for the			1		
	organization by								Yes	No
	(i) unrelated organizations							3a(i)		├
	(ii) related organizations							3a(ii)		<del> </del> -
b	If "Yes" to 3a(ii), are the related organizations							3b		<u> </u>
- <del>4</del>	Describe in Part XIV the intended uses of the or vivil Land, Buildings, and Equip			10						
	Description of investment	(a) Cost or other basis	(b) Cost or other		(c) Accum	nulated	$\top$	(d) Book	value	
	boompaon of infoodinging	(investment)	(other)		depreci			,_,		
12	Land	· · ·		,311	¥ *		+-	2	<del>60</del> .	311
	Buildings		1	,			+		/	
	Leasehold improvements		1				1			
	Equipment					··	1			
	Other									
	I. Add lines 1a through 1e (Column (d) must eq	ual Form 990, Part X, co	olumn (B), line 10(c)	)		<u> </u>	<b>&gt;</b>	2	<b>60</b> ,	311

Part VII	Investments-Other Securities. See Form 9	90, Part X, line 12.		
	(a) Description of security or category	(b) Book value	(c) Method of	valuation
•	(including name of security)		Cost or end-of-year	r market value
(1) Financial of	denvatives			
	eld equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
<u>(I)</u>				
	. (9)	<u> </u>		
Part VIII	Investments—Program Related. See Form	990, Part X, line 13.		
	(a) Description of investment type	(b) Book value	(c) Method of	
			Cost or end-of-yea	ar market value
(1)				
(2)				
(3)				
(4)				
(5)				· · · · · · · · · · · · · · · · · · ·
(6)				
(7)				
(8)				
(9)				
(10)				
	(-)		<u> </u>	
Part IX	Other Assets. See Form 990, Part X, line 15	) <del>.</del>		
	(a) Description			(b) Book value
(1)				
(2)		·		
(3)				
_(4)				
(5)				
(6)			· ·	
(7)		<del></del>		
(8)				
(9)				
(10)	(h) must sound Feet 2000 Port V. and (P) line 15			
Part X	n (b) must equal Form 990, Part X, col (B) line 15)  Other Liabilities. See Form 990, Part X, line	25	<u> </u>	
	(a) Description of liability	(b) Amount		
1. (4) Fodorel		(b) Allouit	-	
	income taxes		1	
(2)			1	
(3)			†	
(4)			1	
(5) (6)			1	
			1	
(8)			1	
(8)			1	
(9)		+	1	
(10)			1	
(11)	n (h) must equal Form 990. Port Y and (P) line 25.)		4	
TOTAL (COLUM	n (b) must equal Form 990, Part X, col (B) line 25)	o to the emergation's finance	I statements that annuals the	

Sche	dule D (Form 990) 2010 Walla Walla YMCA		1-0580856	Page 4
Pă	Reconciliation of Change in Net Assets from Form 990 to	<b>Audited Fin</b>	ancial Statements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	
3	Excess or (deficit) for the year Subtract line 2 from line 1		3	
4	Net unrealized gains (losses) on investments		4	
5	Donated services and use of facilities		5	
6	Investment expenses		6	<del></del>
7	Pnor penod adjustments		7	
8	Other (Describe in Part XIV)		8	
9	Total adjustments (net) Add lines 4 through 8		9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	)	10	
Pa	rt:XIII Reconciliation of Revenue per Audited Financial Stateme	nts With Rev	venue per Return	
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
а	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b		
C	Recovenes of prior year grants	2c		
	Other (Describe in Part XIV )	2d		
	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	Other (Describe in Part XIV )	4b	` "	
	Add lines 4a and 4b		4c	
_	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	
Pa	Reconciliation of Expenses per Audited Financial Statem	ents With Ex	(penses per Return	
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.		*	
а	Donated services and use of facilities	2a	• · · ·	
b	Pnor year adjustments	2b		
C	Other losses	2c		
d	Other (Describe in Part XIV.)	2d	, ,	
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	1 1	
b		4b		
	Add lines 4a and 4b		4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	

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, line 2, 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

PartXIV Supplemental Information

Schedule D (Form 990) 2010 Walla Walla YMCA
Part XIV Supplemental Information (continued)

# SCHEDULÈ O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization

## Supplemental Information to Form 990 or 990-EZ

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

2010 Open to Public Inspection

OMB No 1545-0047

Walla Walla YMCA

Employer identification number 91-0580856

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 No review was or will be conducted.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation No documents available to the public

# Form 4562

Department of the Treasury Internal Revenue Service

## **Depreciation and Amortization**

► See separate instructions.

(Including Information on Listed Property)

OMB No 1545-0172

Attachment 67

Name(s) shown on return

► Attach to your tax return.

Identifying number 91-0580856 Walla Walla YMCA Business or activity to which this form relates Indirect Depreciation **Election To Expense Certain Property Under Section 179** Part I Note: If you have any listed property, complete Part V before you complete Part I. 500,000 1 1 Maximum amount (see instructions) 2 Total cost of section 179 property placed in service (see instructions) 2 2,000,000 3 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If marned filing separately, see instructions 5 5 (a) Description of property (b) Cost (business use only) (c) Elected cost 7 7 Listed property Enter the amount from line 29 8 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 9 Tentative deduction Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2009 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2011. Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions) Special depreciation allowance for qualified property (other than listed property) placed in service 14 during the tax year (see instructions) Property subject to section 168(f)(1) election 15 15 234,813 Other depreciation (including ACRS) 16 Part III MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2010 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B—Assets Placed in Service During 2010 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recover (e) Convention (g) Depreciation deduction (a) Classification of property placed in (business/investment use (f) Method репод only-see instructions) service 19a 3-year property b 5-year property 7-year property d 10-year property 15-year property 20-year property S/L 25-year property 25 yrs S/L h Residential rental 27.5 yrs. MM property ММ S/L 27 5 yrs. MM Nonresidential real 39 yrs S/L property мм S/L Section C-Assets Placed in Service During 2010 Tax Year Using the Alternative Depreciation System 20a Class life S/L 12 yrs S/L b 12-year MM S/L 40-year 40 yrs

Summary (See instructions.)

Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here

and on the appropriate lines of your return. Partnerships and S corporations—see instructions

For assets shown above and placed in service during the current year, enter the

Listed property. Enter amount from line 28

234,813

23

21

22

22

23

Part IV