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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 09-01-2010 and ending 08-31-2011

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

C Name of organization
THE YOUNG MEN'S CHRISTIAN ASSOCIATION
OF GREATER TULSA

Doing Business As

Number and street (or P O box if mail is not delivered to street address) Room/suite
420 SOUTH MAIN STE 200

City or town, state or country, and ZIP + 4
TULSA, OK 74103

D Employer identification number
73-0579269

E Telephone number
(918) 747-9622

G Gross receipts $ 10,525,897

F Name and address of principal officer
SUSAN PLANK
420 SOUTH MAIN STE 200
TULSA, OK 74103

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 YMCATULSA ORG

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ | L Year of formation 1909 | M State of legal domicile OK

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
TO PUT CHRISTIAN PRINCIPLES INTO PRACTICE THROUGH PROGRAMS THAT BUILD HEALTHY SPIRIT, MIND AND BODY FOR ALL

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

3	Number of voting members of the governing body (Part VI, line 1a)	3	26
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	26
5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	690
6	Total number of volunteers (estimate if necessary)	6	2,783
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)	7,365,011	7,362,616
	9	Program service revenue (Part VIII, line 2g)	1,724,766	1,736,760
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-147,933	514,732
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	23,392	19,499
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	8,965,236	9,633,607
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	0	0
	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)	4,583,311	4,396,520
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶12,136		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	5,141,877	5,270,488
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	9,725,188	9,667,008
	19	Revenue less expenses Subtract line 18 from line 12	-759,952	-33,401
Net Assets or Fund Balances			Beginning of Current Year	End of Year
	20	Total assets (Part X, line 16)	27,239,518	28,675,065
	21	Total liabilities (Part X, line 26)	15,282,826	14,908,114
	22	Net assets or fund balances Subtract line 21 from line 20	11,956,692	13,766,951

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

****** 2012-03-21
Signature of officer Date

SUSAN PLANK CEO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name ALAN R SCHMITZ	Preparer's signature ALAN R SCHMITZ	Date	Check if self-employed ▶ ☐	PTIN
Firm's name ▶ HOGANTAYLOR LLP				Firm's EIN ▶
Firm's address ▶ 2200 S UTICA PL SUITE 400 TULSA, OK 741147000				Phone no ▶ (918) 745-2333

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 $ 5,191,825 including grants of $) (Revenue $ 323,179)

YMCA MEMBERSHIP AND HEALTH ENHANCEMENT

4b (Code) (Expenses $ 1,074,342 including grants of $) (Revenue $ 637,709)

YMCA CAMPING

4c (Code) (Expenses $ 1,483,691 including grants of $) (Revenue $ 516,281)

YMCA CHILDCARE

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

(Expenses $ 529,734 including grants of $) (Revenue $ 259,591)

4e **Total program service expenses** ▶$ 8,279,592

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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	Yes	
11	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		No
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		No
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		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)*

			Yes	No
21	Did the organization report more than $5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21		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		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b–24d and complete Schedule K. If "No," go to line 25*	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? *If "Yes," complete Schedule L, Part III*	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
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		No
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**	13			
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**	690			
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**		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			**7b**		
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: 26			
b	Enter the number of voting members included in line 1a, above, who are independent	1b: 26			
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	Yes	
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	Yes	
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	Yes	
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 ▶OK

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 ▶

RONDA C JENKINS-THOMPSON
420 S MAIN STE 200
TULSA, OK 74103
(918) 728-3915

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			
See Additional Data Table										

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) Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(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
See Additional Data Table										

		(D)	(E)	(F)
1b	**Sub-Total** ▶			
c	**Total from continuation sheets to Part VII, Section A** ▶			
d	**Total (add lines 1b and 1c)** ▶	332,087	0	59,631

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

			Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	**3**		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	**4**	Yes	
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*	**5**		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
MAYOWIGGINS PROPERTY 420 S MAIN STREET SUITE 201 TULSA, OK 74103	LEASING COMPANY	340,534
FINAL TOUCH CLEANING 10404 E 55TH PLACE TULSA, OK 74146	CLEANING SERVICES	297,141
BURGGRAF SERVICES 400 S ROCKFORD AVE TULSA, OK 74120	CLEANING/RESTORATION	271,336
TEDFORD INSURANCE 121 EAST MAIN STREET JENKS, OK 740373954	GENERAL LIABILITY INSURANCE	212,326
COMMUNITY CARE INSURANCE 218 W 6TH STREET TULSA, OK 74119	INSURANCE	193,474

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 ▶8

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 . . . 1a					
	b	Membership dues 1b	5,103,922				
	c	Fundraising events 1c					
	d	Related organizations . . . 1d					
	e	Government grants (contributions) 1e	699,029				
	f	All other contributions, gifts, grants, and similar amounts not included above 1f	1,559,665				
	g	Noncash contributions included in lines 1a-1f $					
	h	**Total.** Add lines 1a-1f . . . . ▶		7,362,616			
Program Service Revenue			Business Code				
	2a	PROGRAM DUES	713940	1,332,788	1,332,788		
	b	RENTAL INCOME	713940	223,561	223,561		
	c	OTHER RELATED INCOME	713940	180,411	180,411		
	d						
	e						
	f	All other program service revenue					
	g	**Total.** Add lines 2a–2f . . . . ▶		1,736,760			
Other Revenue	3	Investment income (including dividends, interest and other similar amounts) . . . . . ▶		39,625			39,625
	4	Income from investment of tax-exempt bond proceeds . . ▶					
	5	Royalties . . . . ▶					
			(i) Real / (ii) Personal				
	6a	Gross Rents					
	b	Less rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss) . . . . ▶					
			(i) Securities / (ii) Other				
	7a	Gross amount from sales of assets other than inventory	710,164 / 630,898				
	b	Less cost or other basis and sales expenses	718,966 / 146,989				
	c	Gain or (loss)	-8,802 / 483,909				
	d	Net gain or (loss) . . . . ▶		475,107			475,107
	8a	Gross income from fundraising events (not including $ ____ of contributions reported on line 1c) See Part IV, line 18 . . . a					
	b	Less direct expenses . . . b					
	c	Net income or (loss) from fundraising events . . ▶					
	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 . . . ▶					
	10a	Gross sales of inventory, less returns and allowances . a	45,834				
	b	Less cost of goods sold . . b	26,335				
	c	Net income or (loss) from sales of inventory . . ▶		19,499			19,499
		Miscellaneous Revenue	Business Code				
	11a						
	b						
	c						
	d	All other revenue					
	e	**Total.** Add lines 11a–11d . . . . . . ▶					
	12	**Total revenue.** See Instructions . . . ▶		9,633,607	1,736,760	0	534,231

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				
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	391,718		391,718	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	3,286,987	2,925,905	361,082	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	326,629	268,519	58,110	
10	Payroll taxes	391,186	320,814	70,372	
a	Fees for services (non-employees) Management				
b	Legal	15,793		15,793	
c	Accounting	27,000		27,000	
d	Lobbying				
e	Professional fundraising services *See Part IV, line 17* . .				
f	Investment management fees				
g	Other				
12	Advertising and promotion	170,799	170,799		
13	Office expenses	879,866	841,553	30,341	7,972
14	Information technology				
15	Royalties . .				
16	Occupancy	1,638,174	1,638,157	17	
17	Travel	117,990	73,833	44,157	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	38,941	27,622	11,319	
20	Interest	577,351	367,118	210,233	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,125,680	1,082,965	42,715	
23	Insurance	213,485	208,891	4,594	
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	MISCELLANEOUS	174,087	117,833	55,375	879
b	CONTRACT FEES	173,983	126,160	44,538	3,285
c	DUES	117,339	109,423	7,916	
d					
e					
f	All other expenses				
25	**Total functional expenses.** Add lines 1 through 24f	9,667,008	8,279,592	1,375,280	12,136
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				

Part X Balance Sheet

					(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing			229,393	1	372,562
	2	Savings and temporary cash investments			500,248	2	565,269
	3	Pledges and grants receivable, net			391,120	3	362,894
	4	Accounts receivable, net			137,288	4	114,410
	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				8	
	9	Prepaid expenses and deferred charges			224,395	9	217,026
	10a	Land, buildings, and equipment cost or other basis *Complete Part VI of Schedule D*	10a	37,551,600			
	b	Less accumulated depreciation	10b	12,825,190	23,418,444	10c	24,726,410
	11	Investments—publicly traded securities			1,705,592	11	1,696,482
	12	Investments—other securities See Part IV, line 11			434,885	12	434,053
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			198,153	15	185,959
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)			27,239,518	16	28,675,065
Liabilities	17	Accounts payable and accrued expenses			393,568	17	458,188
	18	Grants payable				18	
	19	Deferred revenue			453,231	19	467,517
	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			13,925,000	23	13,515,000
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities Complete Part X of Schedule D			511,027	25	467,409
	26	**Total liabilities.** Add lines 17 through 25			15,282,826	26	14,908,114
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			11,013,886	27	12,520,591
	28	Temporarily restricted net assets			825,941	28	1,106,788
	29	Permanently restricted net assets			116,865	29	139,572
		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			11,956,692	33	13,766,951
	34	Total liabilities and net assets/fund balances			27,239,518	34	28,675,065

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	9,633,607
2	Total expenses (must equal Part IX, column (A), line 25)	2	9,667,008
3	Revenue less expenses Subtract line 2 from line 1	3	-33,401
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . .	4	11,956,692
5	Other changes in net assets or fund balances (explain in Schedule O)	5	1,843,660
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	13,766,951

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		

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
THE YOUNG MEN'S CHRISTIAN ASSOCIATION
OF GREATER TULSA

Employer identification number

73-0579269

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	No	(v) Did you notify the organization in col (i) of your support? Yes	No	(vi) Is the organization in col (i) organized in the U S ? Yes	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 ")	6,253,302	6,673,077	8,444,633	8,663,603	8,695,404	38,730,019
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	2,049,514	1,982,534	1,232,521	478,844	449,806	6,193,219
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	8,302,816	8,655,611	9,677,154	9,142,447	9,145,210	44,923,238
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
8 **Public Support** (Subtract line 7c from line 6)						44,923,238

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	8,302,816	8,655,611	9,677,154	9,142,447	9,145,210	44,923,238
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	483,507	191,302	43,452	41,091	39,625	798,977
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	483,507	191,302	43,452	41,091	39,625	798,977
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 **Total support** (Add lines 9, 10c, 11 and 12)	8,786,323	8,846,913	9,720,606	9,183,538	9,184,835	45,722,215

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**	98 250 %
16 Public support percentage from 2009 Schedule A, Part III, line 15	**16**	98 200 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2010** (line 10c column (f) divided by line 13 column (f))	**17**	1 750 %
18 Investment income percentage from **2009** Schedule A, Part III, line 17	**18**	1 800 %

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

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
THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER TULSA

Employer identification number
73-0579269

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	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06	2d	

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

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

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 ▶ $ ________

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	1,096,769	1,116,460	1,238,215		
b Contributions	22,707		500		
c Investment earnings or losses	69,358	34,256	-68,308		
d Grants or scholarships					
e Other expenditures for facilities and programs	53,948	53,947	53,947		
f Administrative expenses					
g End of year balance	1,134,886	1,096,769	1,116,460		

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

a Board designated or quasi-endowment ▶

b Permanent endowment ▶ 12 400 %

c Term endowment ▶ 87 600 %

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		2,469,808		2,469,808
b Buildings		22,923,531	6,368,962	16,554,569
c Leasehold improvements		6,195,952	1,212,830	4,983,122
d Equipment		5,962,309	5,243,398	718,911
e Other				
Total. Add lines 1a-1e *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)* ▶				24,726,410

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	
CAPITAL LEASE OBLIGATIONS	7,087
DERIVATIVE LIABILITY	460,322
Total. *(Column (b) should equal Form 990, Part X, col (B) line 25)* ▶	467,409

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	9,633,607
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	9,667,008
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-33,401
4	Net unrealized gains (losses) on investments	4	37,979
5	Donated services and use of facilities	5	17,413
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	1,788,268
9	Total adjustments (net) Add lines 4 - 8	9	1,843,660
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	1,810,259

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	11,503,602
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	37,979		
b	Donated services and use of facilities	2b	17,413		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d	1,814,603		
e	Add lines **2a** through **2d**			2e	1,869,995
3	Subtract line **2e** from line **1**			3	9,633,607
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			
c	Add lines **4a** and **4b**			4c	0
5	Total Revenue Add lines **3** and **4c.** (This should equal Form 990, Part I, line 12)			5	9,633,607

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

1	Total expenses and losses per audited financial statements			1	9,693,343
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIV)	2d	26,335		
e	Add lines **2a** through **2d**			2e	26,335
3	Subtract line **2e** from line **1**			3	9,667,008
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			
c	Add lines **4a** and **4b**			4c	0
5	Total expenses Add lines **3** and **4c.** (This should equal Form 990, Part I, line 18)			5	9,667,008

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
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	THE ACCOUNTING FOR INCOME TAXES MAY, AT TIMES, INVOLVE SOME DEGREE OF UNCERTAINTY AND, AS SUCH, LEAD TO UNCERTAIN TAX POSITIONS BEING TAKEN MANAGEMENT EVALUATED THE YMCA'S TAX POSITIONS AND CONCLUDED THAT IT HAS TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENTS TO THE FINANCIAL STATEMENTS GENERALLY, YMCA IS NOT SUBJECT TO INCOME TAX EXAMINATIONS BY FEDERAL, STATE OR LOCAL AUTHORITIES FOR YEARS BEFORE 2008
PART XI, LINE 8 - OTHER ADJUSTMENTS		ACQUISITION OF BIXBY YMCA 1,788,268
PART XII, LINE 2D - OTHER ADJUSTMENTS		COST OF GOODS SOLD 26,335 ACQUISITION OF BIXBY YMCA 1,788,268
PART XIII, LINE 2D - OTHER ADJUSTMENTS		COST OF GOODS SOLD 26,335

Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
THE YOUNG MEN'S CHRISTIAN ASSOCIATION
OF GREATER TULSA

Employer identification number
73-0579269

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☐ First-class or charter travel ☐ Travel for companions ☐ Tax idemnification and gross-up payments ☐ Discretionary spending account ☐ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☐ Health or social club dues or initiation fees ☐ Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain	**1b**		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	**2**		
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply ☑ Compensation committee ☐ Independent compensation consultant ☐ Form 990 of other organizations ☐ Written employment contract ☑ Compensation survey or study ☑ Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
a	Receive a severance payment or change-of-control payment from the organization or a related organization?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**		No
c	Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	**4c**		No
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	**5a**		No
b	Any related organization? If "Yes," to line 5a or 5b, describe in Part III	**5b**		No
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	**6a**		No
b	Any related organization? If "Yes," to line 6a or 6b, describe in Part III	**6b**		No
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	**8**		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	**9**		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) SUSAN PLANK	(i)	157,233	0	0	19,831	420	177,484	0
	(ii)	0	0	0	0	0	0	0
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								

Part III **Supplemental Information**

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

Identifier	Return Reference	Explanation

Schedule K (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax Exempt Bonds

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER TULSA

Employer identification number
73-0579269

Part I Bond Issues

	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Price	(f) Description of Purpose	(g) Defeased		(h) On Behalf of Issuer		(i) Pool financing	
							Yes	No	Yes	No	Yes	No
A	TULSA INDUSTRIAL AUTHORITY		8996767KX	11-01-2006	17,000,000	SEE STATEMENT IN SCHEDULE O		X		X		X

Part II Proceeds

		A	B	C	D
1	Amount of bonds retired				
2	Amount of bonds legally defeased				
3	Total proceeds of issue				
4	Gross proceeds in reserve funds				
5	Capitalized interest from proceeds				
6	Proceeds in refunding escrow				
7	Issuance costs from proceeds				
8	Credit enhancement from proceeds				
9	Working capital expenditures from proceeds				
10	Capital expenditures from proceeds				
11	Other spent proceeds				
12	Other unspent proceeds				
13	Year of substantial completion				

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No
14	Were the bonds issued as part of a current refunding issue?		X						
15	Were the bonds issued as part of an advance refunding issue?		X						
16	Has the final allocation of proceeds been made?		X						
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?		X						

Part III Private Business Use

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X						
2	Are there any lease arrangements that may result in private business use of bond-financed property?		X						

Part III Private Business Use *(Continued)*

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No
3a	Are there any management or service contracts that may result in private business use?		X						
b	Are there any research agreements that may result in private business use of bond-financed property?		X						
c	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶								
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶								
6	Total of lines 4 and 5								
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?		X						

Part IV Arbitrage

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		X						
2	Is the bond issue a variable rate issue?		X						
3a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?		X						
b	Name of provider								
c	Term of hedge								
d	Was the hedge superintegrated?								
e	Was a hedge terminated?								
4a	Were gross proceeds invested in a GIC?		X						
b	Name of provider								
c	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
5	Were any gross proceeds invested beyond an available temporary period?		X						
6	Did the bond issue qualify for an exception to rebate?		X						

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule K (see instructions)

Identifier	Return Reference	Explanation

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
THE YOUNG MEN'S CHRISTIAN ASSOCIATION
OF GREATER TULSA

Employer identification number
73-0579269

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A		THE ORGANIZATION HAS MEMBERS WHO ANNUALLY ELECT THE GOVERNING BODY

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11		THE ORGANIZATION'S FINANCE COMMITTEE IS RESPONSIBLE FOR REVIEWING THE FORM 990 BEFORE IT IS FINALIZED AND SIGNED

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	THE ORGANIZATION'S BOARD MEMBERS AND EMPLOYEES ARE REQUIRED TO SIGN THE CONFLICT OF INTEREST POLICY ANNUALLY ADDITIONALLY, BOARD MEMBERS MAY RECUSE THEMSELVES OR APPOINT ANOTHER BOARD MEMBER FOR RECUSAL IF A CONFLICT OF INTEREST ARISES DURING A BOARD MEETING ONGOING BOARD EDUCATION OCCURS THROUGHOUT THE YEAR TO REMIND MEMBERS OF THE ORGANIZATION'S CONFLICT OF INTEREST POLICY

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	ALL OF THE ORGANIZATION'S COMPENSATION PACKAGES ARE DETERMINED THROUGH THE USE OF THE HAY SALARY ADMINISTRATION SYSTEM, A POINT AND BASE PAY SYSTEM THIS PROCESS COMES FROM YUSA TO YMCA'S AS A MEANS OF DETERMINING COMPENSATION THE ORGANIZATION ALSO USES COMPARABILITY DATA FROM OTHER LIKE SIZE YMCA'S WHEN IT COMES TO ANY COMPENSATION/BENEFIT THAT IS NOT SALARY BASED

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION'S CONFLICT OF INTEREST POLICY IS AVAILABLE UPON REQUEST THE ORGANIZATION IS IN THE PROCESS OF MAKING THE CONFLICT INTEREST POLICY AVAILABLE THROUGH ITS WEBSITE THE ORGANIZATION'S FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST AND INCLUDED WITH ITS ANNUAL REPORT ON THE ORGANIZATION'S WEBSITE

Identifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED GAINS ON INVESTMENTS 37,979 DONATED SERVICES AND USE OF FACILITIES 17,413 ACQUISITION OF BIXBY YMCA 1,788,268 TOTAL TO FORM 990, PART XI, LINE 5 1,843,660

Identifier	Return Reference	Explanation
	FORM 990, PART XII, LINE 2C	THE ORGANIZATION'S FINANCE COMMITTEE MEETS MONTHLY AND IS RESPONSIBLE FOR REVIEWING AND APPROVING MONTHLY FINANCIAL STATEMENTS AND REPORTS IT IS RESPONSIBLE FOR REVIEW AND APPROVAL OF THE ORGANIZATION'S AUDIT REPORT EVERY 3 TO 5 YEARS, THE FINANCE COMMITTEE REVIEWS AUDIT PROPOSALS AND MAKES AN INDEPENDENT AUDITOR SELECTION THIS PROCESS IS CONSISTENT WITH PRIOR YEARS

Identifier	Return Reference	Explanation
	FORM 990, PART III, LINE 1	THE YMCA OF GREATER TULSA IS A VOLUNTEER LED PUBLIC CHARITY THAT INCLUDES MEN, WOMEN AND CHILDREN OF ALL AGES, ABILITIES, INCOMES, RACES AND RELIGIONS OUR MISSION IS TO PUT CHRISTIAN PRINCIPLES INTO PRACTICE THROUGH PROGRAMS THAT BUILD STRONG KIDS, FAMILIES AND COMMUNITIES THE CORE YMCA VALUES OF HONESTY, CARING, RESPECT AND RESPONSIBILITY ARE CONSCIOUSLY INCORPORATED INTO EACH YMCA ACTIVITY, CREATING AN ENVIRONMENT WHERE MEMBERS, VOLUNTEERS AND STAFF CAN TRULY REACH THEIR FULL POTENTIAL WHILE THESE CORE PRINCIPLES REMAIN STEADFASTLY THE SAME, YMCA PROGRAMS ARE CONSTANTLY CHANGING TO MEET THE EVOLVING NEEDS OF TODAY'S FAMILIES AND COMMUNITIES THE YMCA OF TODAY OFFERS COMPREHENSIVE COMMUNITY PROGRAMMING AND WHOLESOME ACTIVITIES FOR PEOPLE OF ALL AGES LAST YEAR, THROUGH THE HELP OF INDIVIDUAL DONORS AND A GENEROUS PHILANTHROPIC COMMUNITY, THE YMCA OF GREATER TULSA PROVIDED OVER $1 5 MILLION IN DIRECT FINANCIAL ASSISTANCE THIS SUPPORT ALLOWS OUR YMCA TO KEEP OUR MISSION DRIVEN PROMISE OF NEVER TURNING A CHILD OR FAMILY AWAY BECAUSE THEY ARE UNABLE TO PAY

Identifier	Return Reference	Explanation
	FORM 990, PART III, LINE 4	PROGRAM DESCRIPTIONS STRATEGIC PLAN GOALS OF THE YMCA OF GREATER TULSA THREE YEARS AGO, TH E METROPOLITAN BOARD OF DIRECTORS, STAFF, AND BRANCH ADVISORY BOARD MEMBERS CREATED THE 20 08-2013 YMCA STRATEGIC PLAN WHAT FOLLOWS IS OUR BOLD VISION IN THREE CRITICAL AREAS THAT ARE AREAS OF FOCUS YOUTH DEVELOPMENT HEALTHY LIVING SOCIAL RESPONSIBILITY TO BRING ABOUT MEANINGFUL CHANGE, INDIVIDUALS NEED ONGOING ENCOURAGEMENT WE'RE HERE DAY IN AND DAY OUT T O PROVIDE THE RESOURCES NEEDED BY OUR COMMUNITIES TO ADDRESS THE MOST PRESSING SOCIAL ISSU ES, FROM CHILDHOOD OBESITY TO GRADUATION RATES THROUGH THE SUPPORT OF OUR COMMUNITY, WE E MPOWER EVERY CHILD, ADULT AND FAMILY TO STRIVE TO BE HEALTHY, CONFIDENT AND CONNECTED THE YMCA OF GREATER TULSA'S BOARD AND STAFF ARE COMMITTED IN OUR EFFORT TO KEEP KIDS IN SCHOO L, IMPROVE THE HEALTH OF OUR COMMUNITY'S CITIZENS AND OFFER OPPORTUNITIES FOR KIDS AND ADU LTS TO HELP AND SERVE OTHERS THROUGH Y PROGRAMS THIS PAST YEAR HAS BEEN FULL OF OPPORTUNI TIES, CHALLENGES AND, BEST OF ALL, PERSONAL AND SOCIAL CHANGE THROUGH YMCA PROGRAMS AND SE RVICES WE ARE HAPPY AND GRATEFUL THAT OUR LONG-TIME NEIGHBOR TO THE SOUTH, THE DAILY FAMI LY YMCA, HAS JOINED OUR Y, ENHANCING OUR ABILITY TO DEVELOP YOUTH, PROMOTE HEALTHY LIVING AND ENCOURAGE SOCIAL RESPONSIBILITY WE CONTINUE TO FOCUS OUR EFFORTS ON IMPROVING TULSA'S GRADUATION RATES HUNDREDS OF CHILDREN ARE READING A YEAR OR MORE AHEAD OF THEIR PEERS TH ROUGH THE GRADUATE OKLAHOMA PROGRAM NINETY PERCENT OF OUR PARENTS REPORT READING TO THEIR CHILDREN MORE THAN ONCE A WEEK, A 63% IMPROVEMENT SINCE OUR FAMILY LITERACY PROGRAM AT TH E HUTCHERSON YMCA STARTED MORE THAN 250 NEW BOOKS ARE NOW IN THE HOMES OF OUR HUTCHERSON YMCA FAMILIES AS A RESULT OF THE GWEN AND STEVE MALCOLM GIVING LIBRARY TODAY, 100% OF OUR PARENTS REPORT HAVING AN AGE-APPROPRIATE BOOK FOR THEIR CHILD IN THEIR HOME, COMPARED TO 20% JUST A YEAR AGO AS YOU READ THIS 990, TAKE SPECIAL NOTE OF OUR HEALTH-AND-WELLNESS EF FORTS, INCLUDING LIVESTRONG AND OUR FIGHT AGAINST TEEN OBESITY THROUGH A COLLABORATIVE EFF ORT WITH THE UNITED WAY AND OKLAHOMA STATE UNIVERSITY'S CENTER FOR HEALTH SCIENCES IN THI S 990, WE ARE PLEASED TO ANNOUNCE SIGNIFICANT PROGRESS IN EACH OF OUR THREE STRATEGIC PRIO RITY AREAS YOUTH DEVELOPMENT, HEALTHY LIVING AND SOCIAL RESPONSIBILITY YOUTH DEVELOPMENT NURTURING THE POTENTIAL OF EVERY CHILD AND TEEN WE BELIEVE THAT ALL KIDS DESERVE THE OP PORTUNITY TO DISCOVER WHO THEY ARE AND WHAT THEY CAN ACHIEVE THE Y IS PROVIDING HUNDREDS OF YOUTH WITH A PLACE TO CULTIVATE THE VALUES, SKILLS AND RELATIONSHIPS THAT LEAD TO POSIT IVE BEHAVIORS, BETTER HEALTH AND EDUCATIONAL ACHIEVEMENT CHALLENGE DURING THE FEW HOURS AFTER SCHOOL, CHILDREN ARE MORE LIKELY TO PARTICIPATE IN RISKY BEHAVIOR, BECOME A VICTIM O F A CRIME, OR COMMIT ONE AN ESTIMATED 20% OF CHILDREN IN TULSA COUNTY DON'T GRADUATE FROM HIGH SCHOOL OKLAHOMA'S DIVORCE RATES ARE AMONG THE WORST IN THE NATION, AND THE AVERAGE CHILD SPENDS SIX HOURS A DAY IN FRONT OF A SCREEN, IMPACTING THE AMOUNT OF QUALITY TIME FA MILIES SPEND TOGETHER RESPONSE PROVIDE A GRADUATE OKLAHOMA (GO) PROGRAM IN ALL Y ELEMENT ARY AND AFTER-SCHOOL SITES ESTABLISH A MEMBERSHIP PROGRAM TARGETING MIDDLE- AND HIGH-SCHO OL STUDENTS WORK WITH COMMUNITY PARTNERS TO ENSURE OUR GO AND ACHIEVERS PROGRAM PARTICIPA NTS HAVE ACCESS TO WORKPLACE-READINESS SKILLS AND COLLEGE-ACCESS SUPPORT PROVIDE FAMILY-S TRENGTHENING SCHEDULES, ACTIVITIES AND PROGRAMS PROVIDE CAMPING EXPERIENCES THAT WILL HEL P CHILDREN DISCOVER THE WONDERS OF A NATURAL WORLD AND REDUCE THE AMOUNT OF TIME CHILDREN ARE PLUGGED INTO A SCREEN 2010-2011 ACHIEVEMENTS 90% OF GRADUATE OKLAHOMA PARTICIPANTS MA INTAINED OR REDUCED THEIR BMI (BODY MASS INDEX) 100% OF YMCA CAMPERS REDUCED SCREEN TIME BY 50% 75% OF FAMILY PARTICIPANTS REPORTED AN INCREASE IN THE AMOUNT OF TIME THEY SPENT T OGETHER AS A RESULT OF Y ACTIVITIES OUR FATHERHOOD INITIATIVE PILOT PROGRAM FOR YUSA IS C URRENTLY BEING REPLICATED FOR POSSIBLE USE NATIONWIDE 90% OF PRESCHOOL PARENTS INVOLVED I N OUR FAMILY LITERACY PROGRAM REPORTED READING TO THEIR CHILDREN MORE THAN ONCE A WEEK SU CCESS HERO CAMP TO THE RESCUE ONE OF THE BEST HERO CAMP SUCCESS STORIES INVOLVES A YOUNG MAN NAMED KARTER I FIRST MET KARTER AND HIS MOTHER IN DECEMBER 2010, WHEN KARTER WAS ATTE NDING WINTER BREAK CAMP HE CONSISTENTLY STRUGGLED, HAD A HARD TIME INTERACTING WITH OTHER CAMPERS, AND WOULD LASH OUT PHYSICALLY AND VERBALLY WHEN HE WAS MAD I KNEW THAT KARTER'S MOM WAS ALWAYS LOOKING FOR SOMETHING CONSTRUCTIVE TO DO WITH KARTER AND HIS YOUNGER BROTH ER ZANDER THEY STARTED ATTENDING HERO CAMP, AND RIGHT AWAY THINGS BEGAN TO CHANGE FOR THE BETTER TODAY, KARTER LOVES TO COME OUT AND EXPLORE THE WILDERNESS AT THE WESTSIDE Y HE IS ALWAYS SO EXCITED TO TELL HIS MOM ABOUT ROCK CITY OR OTHER PLACES ON THE GROUNDS AT HE RO CAMP, KARTER HAS BEEN ABLE TO LEARN HOW TO CANOE, FISH, ROCK CLIMB, AND BUILD A FIRE, B UT THE BIGGEST IMPROVEMENT I HAVE SEEN IN KARTER I

Identifier	Return Reference	Explanation
	FORM 990, PART III, LINE 4	S HIS NEW POSITIVE BEHAVIOR KARTER HAS STOPPED LASHING OUT PHYSICALLY, AND I DON'T HAVE TO TALK WITH HIM ABOUT HIS CHOICE IN LANGUAGE ANYMORE IT HAS BEEN AMAZING TO WATCH THIS FAMILY'S BOND GROW, AND TO SEE THIS CHILD GO FROM MAKING POOR CHOICES TO MAKING THE RIGHT ONES HEALTHY LIVING IMPROVING TULSA'S HEALTH AND WELL-BEING THE Y BRINGS FAMILIES CLOSER TOGETHER, ENCOURAGES GOOD HEALTH AND FOSTERS CONNECTIONS THROUGH FITNESS, SPORTS, FUN AND SHARED INTERESTS AS A RESULT, HUNDREDS OF FAMILIES ARE RECEIVING THE SUPPORT, GUIDANCE AND RESOURCES NEEDED TO ACHIEVE GREATER HEALTH AND WELL-BEING FOR THEIR SPIRIT, MIND AND BODY CHALLENGE OKLAHOMA IS EXPECTED TO HAVE THE HIGHEST OBESITY RATE IN THE COUNTRY BY 2012, WHEN 56 PERCENT OF THE STATE'S RESIDENTS ARE PROJECTED TO BE OVERWEIGHT OKLAHOMANS ARE AMONG THE LEAST HEALTHY IN THE COUNTRY, RANKING ONLY ABOVE MISSISSIPPI, ACCORDING TO THE UNITED HEALTH FOUNDATION RESPONSE ENGAGE AND SUPPORT OUR MEMBERS AND PROGRAM PARTICIPANTS IN THEIR PURSUIT OF WELL-BEING IN SPIRIT, MIND AND BODY PROVIDE LIFESTYLE-BEHAVIOR-CHANGE GROUPS AND PROGRAMS THROUGH STRONG COMMUNITY PARTNERSHIPS, POSITION THE Y AS THE LEADER IN PROMOTING HEALTH AND WELLNESS THROUGH PREVENTION, RESTORATION AND REHABILITATION, WITH A PRIORITY ON TARGETING UNDERSERVED POPULATIONS 2010-2011 ACHIEVEMENTS SERVED 58,134 MEMBERS AND 24,166 PROGRAM PARTICIPANTS WELCOMED THE DAILY FAMILY YMCA TO THE YMCA OF GREATER TULSA FAMILY MAINTAINED 57% RETENTION RATE FOR FAMILIES AND INDIVIDUALS FINANCIAL ASSISTANCE THROUGH MFA RESULTED IN 1 7 M IN SUBSIDY, A 6% INCREASE FROM LAST YEAR SELECTED TO PARTICIPATE IN NATIONAL YMCA CANCER INITIATIVE LIVESTRONG AT THE YMCA LAUNCHED FREE YOUTH SPORTS PROGRAM TO ENGAGE MORE CHILDREN AND FAMILIES IN PHYSICAL ACTIVITY STRONG MEDICAL PARTNERSHIPS EXIST IN OUR BRANCHES, INCLUDING COLLABORATIVE EFFORTS WITH THE UNIVERSITY OF OKLAHOMA'S COLLEGE OF COMMUNITY MEDICINE, OKLAHOMA STATE UNIVERSITY'S CENTER FOR HEALTH SCIENCES, INDIAN HEALTH CARE RESOURCE CENTER, AND ST JOHN HEALTH SYSTEM SUCCESS CAMP COWBOY THE Y'S "COWBOYS GET HEALTHY, GET FIT" COMBINES STRUCTURED PHYSICAL ACTIVITY SESSIONS FOR TEENS AND NUTRITION EDUCATION FOR PARENTS POTENTIAL PARTICIPANTS ARE IDENTIFIED THROUGH A REVIEW OF FAMILY HEALTH AND NUTRITION CLINIC RECORDS, AND TARGETS KIDS 10-16 YEARS OLD THE PROGRAM CONSISTS OF 12 PHYSICAL ACTIVITY SESSIONS OVER 12 WEEKS, COORDINATED BY THE DOWNTOWN YMCA EXECUTIVE DIRECTOR AND EXERCISE SPECIALISTS THE GOAL FOR PARTICIPANTS WAS TO COMPLETE A 5K RACE AT THE END OF THE PROGRAM ALL OF THE KIDS INVOLVED IN THE PILOT PROGRAM WERE FROM LOW-INCOME FAMILIES, AND MANY HAD NEVER WORKED OUT BEFORE THE HOUR-LONG SESSIONS INCLUDED 30 MINUTES OF WALKING AND RUNNING FOLLOWED BY 30 MINUTES OF VARIOUS STRENGTH AND CONDITIONING EXERCISES, YOGA, CYCLING, AND BOOT CAMP "GRADUATION" FROM THE PROGRAM OCCURRED ON JULY 4, 2011, WHEN PARTICIPANTS COMPLETED THEIR FIRST 5K RACE, THE FIRECRACKER 5K IN DOWNTOWN TULSA ENTRY FEES WERE DONATED BY FLEET FEET SPORTS, AND THE YMCA DONATED COMMEMORATIVE SHIRTS FOR EVERYONE IT TRULY WAS INDEPENDENCE DAY FOR THESE KIDS, WHO WERE ABLE TO FREE THEMSELVES FROM DORMANT LIFESTYLES AND LEARN THE VALUE OF ACCOMPLISHING A DIFFICULT CHALLENGE, BUILDING SELF-ESTEEM IN THE PROCESS THERE IS NO OTHER PROGRAM LIKE THIS IN THE CITY-ONE THAT PROVIDES ACCESS TO EXERCISE FACILITIES, PROFESSIONAL SUPPORT, AND EXTENDED MEMBERSHIP BEYOND THE 12-WEEK PROGRAM IN FACT, THREE TEENS WHO GRADUATED FROM OUR FIRST 12-WEEK SESSION RETURNED TO SERVE AS MENTORS "COWBOYS GET HEALTHY, GET FIT" IS A COLLABORATIVE EFFORT AMONG THE OKLAHOMA STATE CENTER FOR HEALTH SCIENCES FAMILY HEALTH AND NUTRITION CLINIC, THE YMCA OF GREATER TULSA, AND THE OSU COOPERATIVE EXTENSION FRESH START PROGRAM

Identifier	Return Reference	Explanation
	FORM 990, PART III, LINE 4 (CONTINUED)	SOCIAL RESPONSIBILITV GIVING BACK AND PROVIDING SUPPORT TO OUR NEIGHBORS FOR MORE THAN 100 YEARS, THE Y HAS BEEN LISTENING AND RESPONDING TO OUR COMMUNITIES' MOST CRITICAL NEEDS WHETHER DEVELOPING SKILLS OR EMOTIONAL WELL-BEING THROUGH EDUCATION AND TRAINING, WELCOMING AND CONNECTING DIVERSE DEMOGRAPHIC POPULATIONS, OR BUILDING HEALTHIER COMMUNITIES THROUGH COLLABORATIONS WITH POLICY-MAKERS, THE Y FOSTERS THE CARE AND RESPECT ALL PEOPLE NEED AND DESERVE CHALLENGE TULSA HAS AN AMAZING NON-PROFIT COMMUNITY, BUT RESOURCES ARE LIMITED BY DEVELOPING STRONG, STRATEGIC PARTNERS AND VISIONARY LEADERS, WE CAN BROADEN OUR APPROACH RESPONSE THE Y LAUNCHED AN ANNUAL VOLUNTEER-DRIVEN, INTEGRATED CAPITAL AND ENDOWMENT CAMPAIGN TO SUPPORT AND SUSTAIN PROGRAMS THAT MEET NEEDS IN OUR COMMUNITY CONTINUE TO ENGAGE A BROAD, DIVERSE AND INFLUENTIAL GROUP OF CIVICALLY ENGAGED LEADERS FROM ALL SECTORS OF THE COMMUNITY TO SERVE ON Y BOARDS AND COMMITTEES 2010-2011 ACHIEVEMENTS RAISED MORE THAN $250,000 IN CAPITAL SUPPORT FOR THE DAILY FAMILY YMCA OUR GENEROUS DONORS PROVIDED $681,575 TO SUPPORT THE MISSION OF OUR Y UNITED WAY SUPPORT OF $580,000 ENGAGED 136 BOARD MEMBERS AND 2202 PROGRAM VOLUNTEERS PARTNERED WITH MORE THAN 50 AGENCIES, SCHOOL DISTRICTS, UNIVERSITIES AND MEDICAL INSTITUTIONS 100% OF BOARD AND STAFF MEMBERS CONTRIBUTED TO THE YMCA INCREASED THE NUMBER OF BOARD AND STAFF TO REFLECT THE DIVERSITY OF THE COMMUNITY SUCCESS FAMILY LITERACY SAMANTHA IS A YOUNG MOM RAISING FOUR CHILDREN, AGES ONE TO SEVEN HER SON ZACHARY WAS IN OUR INAUGURAL FAMILY LITERACY PROGRAM AND STILL SHARES HIS ADVENTURES DURING A LITERACY FIELD TRIP TO A FARM, WHERE HE LEARNED HOW TO CALL THE COWS HOME SAMANTHA SAYS ZACHARY, NOW IN PRE-K, "IS TRYING TO READ TO ME NOW!" SAMANTHA SAYS THAT IT IS WONDERFUL THAT THE KIDS GET TO GO TO THE LIBRARY DURING THE DAY, BUT THEY ALL ENJOY THE TIME THEY SPEND TOGETHER IN THE LIBRARY AFTER SCHOOL, AS WELL SHE IS THRILLED THERE ARE BOOKS THAT ARE AGE-APPROPRIATE FOR EACH OF HER KIDS, FROM JUNIE B JONES FOR HER SEVEN-YEAR-OLD NATALIE, TO BOOKS HER ONE-YEAR-OLD HALLIE CAN CHEW ON KAITLLN, HER TWO-YEAR-OLD, DEMANDS A TRIP INTO THE LIBRARY EVERY DAY "I HAVE TO TELL HER THAT SHE CAN'T TAKE A BOOK EVERY DAY," SAYS SAMANTHA "BUT EVERY NIGHT WHEN WE GET HOME, SHE EITHER SITS ON THE FLOOR WITH THE BOOK, TAKES IT TO ONE OF HER GRANDPARENTS TO READ, OR COMES UP TO ME AND SAYS, 'ROCKET, ROCKET!' THAT MEANS SHE WANTS TO ME TO READ WHILE WE ROCK IN THE ROCKING CHAIR "WE LOVE THE LIBRARY NOW WE HAVE DIFFERENT BOOKS TO READ AT BEDTIME "

Identifier	Return Reference	Explanation
	FORM 990, PART VI, LINE 19	THE FORM 990 TAX RETURN IS AVAILABLE THROUGH GUIDE STAR AND IT IS AVAILABLE UPON REQUEST THE CONFLICT OF INTEREST POLICY AND THE FINANCIAL STATEMENTS ARE ALSO AVAILABLE UPON REQUEST THE ANNUAL REPORT IS ACCESSIBLE ON OUR WEBSITE WE ARE IN THE PROCESS OF MAKING THE FORM 990 AND THE CONFLICT OF INTEREST POLICY AVAILABLE ON OUR WEBSITE

Identifier	Return Reference	Explanation
	SCHEDULE K, PART I, LINE A, COLUMN (F)	(A) THE RENOVATION OF EXISTING YMCA FACILITY, INCLUDING ROOF RENOVATION AND REPLACEMENT, LOCATED AT 5002 SOUTH FULTON, TULSA, OK, AND (B) THE ACQUISITION AND CONSTRUCTION OF A NEW YMCA FACILITY TO BE LOCATED AT 1120 EAST PINE, TULSA, OK, AND (C) THE CONSTRUCTION AND EQUIPPING OF AN ADDITION TO THE REFINANCING OF INTERIM BANK INDEBTEDNESS INCURRED TO FINANCE THE CONSTRUCTION OF A NEW YMCA FACILITY LOCATED AT 8300 OWASSO EXPRESSWAY, OWASSO, OK, AND (D) THE ACQUISITION AND CONSTRUCTION OF A NEW FACILITY TO BE LOCATED AT 8501 SOUTH GARNETT ROAD, BROKEN ARROW, OK, AND (E) THE REFUNDING AND REDEMPTION OF OUTSTANDING REVENUE BONDS (YMCA OF GREATER TULSA PROJECT), SERIES 1999 ISSUED IN THE ORIGINAL AGGREGATE PRINCIPAL AMOUNT OF $6,000,000 BY THE TULSA INDUSTRIAL AUTHORITY

Identifier	Return Reference	Explanation
		THE FOLLOWING QUESTIONS ARE NOT APPLICABLE TO THE ORGANIZATION PART IV QUESTIONS 5, 20B PART V QUESTIONS 3B, 5C, 6B, 7B, 7D 7G, 7H, 8-13C, 14B PART VI, SECTION B QUESTION 16B PART XI QUESTION 3B

Additional Data

Software ID:
Software Version:
EIN: 73-0579269
Name: THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER TULSA

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

(A) Name and Title	(B) Average hours per week	(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			
TIP BURCH BOARD MEMBER		X						0	0	0
BRIAN CARNEY BOARD MEMBER		X						0	0	0
MANYLES GAINES BOARD MEMBER		X						0	0	0
DEREK GATES BOARD MEMBER		X						0	0	0
BOB GEWENIGER BOARD MEMBER		X						0	0	0
LEIGH GOODSON BOARD MEMBER		X						0	0	0
DAVID HAYS BOARD MEMBER		X						0	0	0
RICHARD HEDGECOCK BOARD MEMBER		X						0	0	0
JOHN HICKEY BOARD MEMBER		X						0	0	0
MOLLY JARVIS BOARD MEMBER		X						0	0	0
JIM KNEALE BOARD MEMBER		X						0	0	0
STEVE MALCOLM BOARD MEMBER		X						0	0	0
KELLI BAILEY BOARD MEMBER		X						0	0	0
STEVEN NELL BOARD MEMBER		X						0	0	0
ELLIOT NELSON BOARD MEMBER		X						0	0	0
PAUL SAMUELS BOARD MEMBER		X						0	0	0
NANCY MCDONALD BOARD MEMBER		X						0	0	0
WILL SMITH BOARD MEMBER		X						0	0	0
HETTY FORE BOARD MEMBER		X						0	0	0
SUZANN STEWART BOARD MEMBER		X						0	0	0
MORRIS STROM BOARD MEMBER		X						0	0	0
DOUG WALKER BOARD MEMBER		X						0	0	0
JOSE SILVA BOARD MEMBER		X						0	0	0
REX WOODS BOARD MEMBER		X						0	0	0
LAURIE TILLEY BOARD MEMBER		X						0	0	0

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply) Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(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
KIM JACKSON BOARD MEMBER		X						0	0	0
SUSAN PLANK CHIEF EXECUTIVE OFFICER	40 00			X				157,233	0	20,251
SAM CARROLL CHIEF OPERATING OFFICER	40 00			X				91,815	0	27,291
RONDA JENKINS-THOMPSON CHIEF FINANCIAL OFFICER	40 00			X				83,039	0	12,089

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

4d. Other program services

(Code) (Expenses $ 308,976 including grants of $) (Revenue $ 246,012)
SPORTS AND RECREATION

(Code) (Expenses $ 220,758 including grants of $) (Revenue $ 13,579)
OTHER PROGRAMS