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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

2011

Open to Public Inspection

A For the 2011 calendar year, or tax year beginning 09-01-2011 and ending 08-31-2012

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)

420 SOUTH MAIN STE 200

Room/suite

City or town, state or country, and ZIP + 4

TULSA, OK 74103

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

D Employer identification number

73-0579269

E Telephone number

(918) 747-9622

G Gross receipts \$ 10,625,321

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	<div><div>1</div><div>Briefly describe the organization's mission or most significant activities</div><div>TO PUT CHRISTIAN PRINCIPLES INTO PRACTICE THROUGH PROGRAMS THAT BUILD HEALTHY SPIRIT, MIND AND BODY FOR ALL</div></div>																								
	<div><div>2</div><div>Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets</div></div>																								
	<table><tr><td>3</td><td>Number of voting members of the governing body (Part VI, line 1a)</td><td>29</td></tr><tr><td>4</td><td>Number of independent voting members of the governing body (Part VI, line 1b)</td><td>29</td></tr><tr><td>5</td><td>Total number of individuals employed in calendar year 2011 (Part V, line 2a)</td><td>762</td></tr><tr><td>6</td><td>Total number of volunteers (estimate if necessary)</td><td>3,012</td></tr><tr><td>7a</td><td>Total unrelated business revenue from Part VIII, column (C), line 12</td><td>0</td></tr><tr><td>7b</td><td>Net unrelated business taxable income from Form 990-T, line 34</td><td>0</td></tr></table>	3	Number of voting members of the governing body (Part VI, line 1a)	29	4	Number of independent voting members of the governing body (Part VI, line 1b)	29	5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)	762	6	Total number of volunteers (estimate if necessary)	3,012	7a	Total unrelated business revenue from Part VIII, column (C), line 12	0	7b	Net unrelated business taxable income from Form 990-T, line 34	0						
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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

\*\*\*\*\*

Signature of officer

2013-02-25

Date

SUSAN PLANK CEO

Type or print name and title

Paid Preparer's Use Only

Preparer's signature

ALAN R SCHMITZ

Firm's name (or yours if self-employed), address, and ZIP + 4

HOGANTAYLOR LLP  
2200 S UTICA PL SUITE 400  
TULSA, OK 741147000

Date

Check if self-employed

☐

Preparer's taxpayer identification number (see instructions)

P00168987

EIN

73-1413977

Phone no

(918) 745-2333

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2011)

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?

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?

If “Yes,” describe these changes on Schedule O

4

Describe the organization’s program service accomplishments for each of its three largest program services, as measured 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 \$ 5,690,506 including grants of \$ ) (Revenue \$ 293,951 )
	YMCA MEMBERSHIP AND HEALTH ENHANCEMENT
4b	(Code ) (Expenses \$ 1,095,023 including grants of \$ ) (Revenue \$ 713,803 )
	YMCA CAMPING
4c	(Code ) (Expenses \$ 2,180,442 including grants of \$ ) (Revenue \$ 857,299 )
	YMCA CHILDCARE
	(Code ) (Expenses \$ 270,352 including grants of \$ ) (Revenue \$ 232,390 )
	SPORTS AND RECREATION
	(Code ) (Expenses \$ 147,174 including grants of \$ ) (Revenue \$ 152,273 )
	OTHER PROGRAMS
4d	Other program services (Describe in Schedule O )
	(Expenses \$ 417,526 including grants of \$ ) (Revenue \$ 384,663 )
4e	Total program service expenses \$ 9,383,497

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.	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	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.		No
4	<b>Section 501(c)(3) organizations.</b> 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.		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.		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which 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.		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.		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.		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.		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V.	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, line 10? If "Yes," complete Schedule D, Part VI.	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.		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.		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.		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	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.	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.	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.		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I.		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, Part II and IV.		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U.S.? If "Yes," complete Schedule F, Part III and IV.		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.		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.		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.		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H.		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? <b>Note.</b> All Form 990 filers that operated one or more hospitals must attach audited financial statements.		

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> . . . . .	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? <i>If "Yes," complete Schedule I, Parts I and III</i> . . . . .	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? <i>If "Yes," complete Schedule J</i> . . . . .	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? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25</i> . . . . .	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	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part II</i> . . . . .	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i> . . . . .	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	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 owner? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> . . . . .	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> . . . . .	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> . . . . .	32		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? <i>If "Yes," complete Schedule R, Part I</i> . . . . .	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i> . . . . .	34		No
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		No
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	35b		No
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	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? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .	38	Yes	

<b>Part V</b> <b>Statements Regarding Other IRS Filings and Tax Compliance</b>						
Check if Schedule O contains a response to any question in this Part V <input type="checkbox"/>						
		<b>Yes</b>	<b>No</b>			
<b>1a</b>	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. .	<b>1a</b>	15			
<b>b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	<b>1b</b>	0			
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	<b>1c</b>	Yes			
<b>2a</b>	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return. .	<b>2a</b>	762			
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	<b>2b</b>	Yes			
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?	<b>3a</b>				No
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	<b>3b</b>				
<b>4a</b>	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 or securities account)?	<b>4a</b>				No
<b>b</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.					
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<b>5a</b>				No
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<b>5b</b>				No
<b>c</b>	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<b>5c</b>				
<b>6a</b>	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?	<b>6a</b>				No
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<b>6b</b>				
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>					
<b>a</b>	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?	<b>7a</b>				No
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?	<b>7b</b>				
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7c</b>				No
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year.	<b>7d</b>				
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<b>7e</b>				No
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<b>7f</b>				No
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<b>7g</b>				
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	<b>7h</b>				
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	<b>8</b>				
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>					
<b>a</b>	Did the organization make any taxable distributions under section 4966?	<b>9a</b>				
<b>b</b>	Did the organization make a distribution to a donor, donor advisor, or related person?	<b>9b</b>				
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter					
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12.	<b>10a</b>				
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	<b>10b</b>				
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter					
<b>a</b>	Gross income from members or shareholders.	<b>11a</b>				
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	<b>11b</b>				
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	<b>12a</b>				
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	<b>12b</b>				
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>					
<b>a</b>	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state.	<b>13a</b>				
<b>b</b>	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	<b>13b</b>				
<b>c</b>	Enter the aggregate amount of reserves on hand.	<b>13c</b>				
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?	<b>14a</b>				No
<b>b</b>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	<b>14b</b>				

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	29		
b	Enter the number of voting members included in line 1a, above, who are independent . . . . .	1b	29
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	Did the organization have members or stockholders? . . . . .	6	No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? . . . . .	7a	Yes
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? . . . . .	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	Did the organization have local chapters, branches, or affiliates? . . . . .	10a	Yes
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? . . . . .	10b	Yes
11a	Has the organization provided a complete 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 the Form 990 . . . . .		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13 . . . . .	12a	Yes
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . .	12b	Yes
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done . . . . .	12c	Yes
13	Did the organization have a written whistleblower policy? . . . . .	13	Yes
14	Did 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," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take 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 <input checked="" type="checkbox"/> 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 made these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request
19	Describe in Schedule O whether (and if so, how), the organization made 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 <input checked="" type="checkbox"/> 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization’s **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) TIP BURCH BOARD MEMBER	0 00	X						0	0	0
(2) BRIAN CARNEY BOARD MEMBER	0 00	X						0	0	0
(3) MANYLES GAINES BOARD MEMBER	0 00	X						0	0	0
(4) DEREK GATES BOARD MEMBER	0 00	X						0	0	0
(5) BOB GEWENIGER BOARD MEMBER	0 00	X						0	0	0
(6) LEIGH GOODSON BOARD MEMBER	0 00	X						0	0	0
(7) DAVID HAYS BOARD MEMBER	0 00	X						0	0	0
(8) RICHARD HEDGECOCK BOARD MEMBER	0 00	X						0	0	0
(9) JOHN HICKEY BOARD MEMBER	0 00	X						0	0	0
(10) MOLLY JARVIS BOARD MEMBER	0 00	X						0	0	0
(11) JIM KNEALE BOARD MEMBER	0 00	X						0	0	0
(12) STEVE MALCOLM BOARD MEMBER	0 00	X						0	0	0
(13) KELLI BAILEY BOARD MEMBER	0 00	X						0	0	0
(14) STEVEN NELL BOARD MEMBER	0 00	X						0	0	0
(15) ELLIOT NELSON BOARD MEMBER	0 00	X						0	0	0
(16) PAUL SAMUELS BOARD MEMBER	0 00	X						0	0	0
(17) NANCY MCDONALD BOARD MEMBER	0 00	X						0	0	0



Part VII

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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			
(18) WILL SMITH BOARD MEMBER	0 00	X						0	0	0
(19) HETTY FORE BOARD MEMBER	0 00	X						0	0	0
(20) SUZANN STEWART BOARD MEMBER	0 00	X						0	0	0
(21) MARK MUSSER BOARD MEMBER	0 00	X						0	0	0
(22) DOUG WALKER BOARD MEMBER	0 00	X						0	0	0
(23) JOSEPH NICHOLSON III BOARD MEMBER	0 00	X						0	0	0
(24) REX WOODS BOARD MEMBER	0 00	X						0	0	0
(25) LAURIE TILLEY BOARD MEMBER	0 00	X						0	0	0
(26) SANDI PELLOW BOARD MEMBER	0 00	X						0	0	0
(27) RACHEL MATHIS BOARD MEMBER	0 00	X						0	0	0
(28) SUSAN PLANK CHIEF EXECUTIVE OFFICER	40 00			X				159,458	0	20,837
(29) SAM CARROLL CHIEF OPERATING OFFICER	40 00			X				97,735	0	27,533
(30) RONDA JENKINS-THOMPSON CHIEF FINANCIAL OFFICER	40 00			X				86,700	0	11,411
<b>1b Sub-Total</b>										
<b>c Total from continuation sheets to Part VII, Section A</b>										
<b>d Total (add lines 1b and 1c)</b>								343,893	0	59,781

2

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

1

		Yes	No
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		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? <i>If "Yes," complete Schedule J for such individual</i>	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? <i>If "Yes," complete Schedule J for such person</i>		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. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
MAYOWIGGINS PROPERTY 420 S MAIN STREET SUITE 201 TULSA, OK 74103	LEASING COMPANY	443,849
FINAL TOUCH CLEANING 10404 E 55TH PLACE TULSA, OK 74146	CLEANING SERVICES	441,040
JULES AND ASSOCIATES 515 S FIGUEROA ST SUITE 1950 LOS ANGELES, CA 90071	EQUIPMENT LEASING COMPANY	294,518
COMMUNITY CARE INSURANCE 218 W 6TH STREET TULSA, OK 74119	INSURANCE	268,125
TEDFORD INSURANCE 121 EAST MAIN STREET JENKS, OK 740373954	GENERAL LIABILITY INSURANCE	251,786
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization		6

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	5,568,855				
	c	Fundraising events . . . . .	1c					
	d	Related organizations . . . .	1d					
	e	Government grants (contributions)	1e	600,700				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	1,620,116				
	g	Noncash contributions included in lines 1a-1f \$ _____						
	h	Total. Add lines 1a-1f . . . . .		7,789,671				
Program Service Revenue			Business Code					
	2a	PROGRAM DUES	713940	1,901,719	1,901,719			
	b	RENTAL INCOME	713940	243,095	243,095			
	c	OTHER RELATED INCOME	713940	104,902	104,902			
	d							
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f . . . . .		2,249,716				
Other Revenue	3	Investment income (including dividends, interest and other similar amounts) . . . . .		37,309			37,309	
	4	Income from investment of tax-exempt bond proceeds . .						
	5	Royalties . . . . .						
	6a	(i) Real		(ii) Personal				
		Gross rents						
		b Less rental expenses						
		c Rental income or (loss)						
	d	Net rental income or (loss) . . . . .						
	7a	(i) Securities		(ii) Other				
		Gross amount from sales of assets other than inventory	486,211	3,000				
		b Less cost or other basis and sales expenses	477,378	2,600				
		c Gain or (loss)	8,833	400				
	d	Net gain or (loss) . . . . .		9,233			9,233	
	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	59,414				
	b	Less cost of goods sold . . . . .	b	40,327				
	c	Net income or (loss) from sales of inventory . .		19,087			19,087	
	Miscellaneous Revenue		Business Code					
11a								
b								
c								
d	All other revenue . . . . .							
e	Total. Add lines 11a-11d . . . . .							
12	Total revenue. See Instructions . . . . .		10,105,016	2,249,716	0	65,629		

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)

Check if Schedule O contains a response to any question in this Part IX

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 United States See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees . . . . .	395,240		395,240	
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	3,912,209	3,521,017	332,784	58,408
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . . . .				
9	Other employee benefits . . . . .	376,500	319,059	57,441	
10	Payroll taxes . . . . .	448,789	385,768	63,021	
11	Fees for services (non-employees)				
a	Management . . . . .				
b	Legal . . . . .	3,219		3,219	
c	Accounting . . . . .	26,500		26,500	
d	Lobbying . . . . .				
e	Professional fundraising See Part IV, line 17 . . . . .				
f	Investment management fees . . . . .				
g	Other . . . . .				
12	Advertising and promotion . . . . .	104,790	103,076	1,714	
13	Office expenses . . . . .	1,106,525	1,015,840	39,240	51,445
14	Information technology . . . . .				
15	Royalties . . . . .				
16	Occupancy . . . . .	1,855,191	1,855,191		
17	Travel . . . . .	107,105	70,621	36,484	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .				
19	Conferences, conventions, and meetings . . . . .	55,067	27,178	27,889	
20	Interest . . . . .	557,865	352,344	205,521	
21	Payments to affiliates . . . . .				
22	Depreciation, depletion, and amortization . . . . .	1,178,791	1,143,092	35,699	
23	Insurance . . . . .	208,410	204,092	4,318	
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	CONTRACT FEES	224,492	152,298	72,194	
b	MISCELLANEOUS	152,787	131,522	21,265	
c	DUES	109,640	102,399	7,241	
d					
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	10,823,120	9,383,497	1,329,770	109,853
26	Joint costs. Check here <input type="checkbox"/> 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)		(B)
					Beginning of year		End of year
Assets	<b>1</b>	Cash—non-interest-bearing . . . . .			372,562	<b>1</b>	192,526
	<b>2</b>	Savings and temporary cash investments . . . . .			565,269	<b>2</b>	71,954
	<b>3</b>	Pledges and grants receivable, net . . . . .			362,894	<b>3</b>	479,382
	<b>4</b>	Accounts receivable, net . . . . .			114,410	<b>4</b>	125,415
	<b>5</b>	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L . . . . .				<b>5</b>	
	<b>6</b>	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L . . . . .				<b>6</b>	
	<b>7</b>	Notes and loans receivable, net . . . . .				<b>7</b>	
	<b>8</b>	Inventories for sale or use . . . . .				<b>8</b>	
	<b>9</b>	Prepaid expenses and deferred charges . . . . .			217,026	<b>9</b>	263,691
	<b>10a</b>	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D . . . . .	<b>10a</b>	37,768,477			
	<b>b</b>	Less: accumulated depreciation . . . . .	<b>10b</b>	13,982,386	24,726,410	<b>10c</b>	23,786,091
	<b>11</b>	Investments—publicly traded securities . . . . .			1,696,482	<b>11</b>	1,716,401
	<b>12</b>	Investments—other securities. See Part IV, line 11 . . . . .			434,053	<b>12</b>	434,427
	<b>13</b>	Investments—program-related. See Part IV, line 11 . . . . .				<b>13</b>	
	<b>14</b>	Intangible assets . . . . .				<b>14</b>	
	<b>15</b>	Other assets. See Part IV, line 11 . . . . .			185,959	<b>15</b>	173,765
	<b>16</b>	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .			28,675,065	<b>16</b>	27,243,652
Liabilities	<b>17</b>	Accounts payable and accrued expenses . . . . .			458,188	<b>17</b>	246,552
	<b>18</b>	Grants payable . . . . .				<b>18</b>	
	<b>19</b>	Deferred revenue . . . . .			467,517	<b>19</b>	344,820
	<b>20</b>	Tax-exempt bond liabilities . . . . .				<b>20</b>	
	<b>21</b>	Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .				<b>21</b>	
	<b>22</b>	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . .				<b>22</b>	
	<b>23</b>	Secured mortgages and notes payable to unrelated third parties . . . . .			13,515,000	<b>23</b>	13,085,000
	<b>24</b>	Unsecured notes and loans payable to unrelated third parties . . . . .				<b>24</b>	
	<b>25</b>	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D . . . . .			467,409	<b>25</b>	358,051
	<b>26</b>	<b>Total liabilities.</b> Add lines 17 through 25 . . . . .			14,908,114	<b>26</b>	14,034,423
Net Assets or Fund Balances	<b>Organizations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>						
	<b>27</b>	Unrestricted net assets . . . . .			12,520,591	<b>27</b>	12,155,848
	<b>28</b>	Temporarily restricted net assets . . . . .			1,106,788	<b>28</b>	913,809
	<b>29</b>	Permanently restricted net assets . . . . .			139,572	<b>29</b>	139,572
	<b>Organizations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>						
	<b>30</b>	Capital stock or trust principal, or current funds . . . . .				<b>30</b>	
	<b>31</b>	Paid-in or capital surplus, or land, building or equipment fund . . . . .				<b>31</b>	
	<b>32</b>	Retained earnings, endowment, accumulated income, or other funds . . . . .				<b>32</b>	
	<b>33</b>	<b>Total net assets or fund balances</b> . . . . .			13,766,951	<b>33</b>	13,209,229
	<b>34</b>	<b>Total liabilities and net assets/fund balances</b> . . . . .			28,675,065	<b>34</b>	27,243,652

Part XI Reconciliation 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	10,105,016
2	Total expenses (must equal Part IX, column (A), line 25)	2	10,823,120
3	Revenue less expenses Subtract line 2 from line 1	3	-718,104
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	13,766,951
5	Other changes in net assets or fund balances (explain in Schedule O)	5	160,382
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	13,209,229

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 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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?		No
b	Were the organization's financial statements audited by an independent accountant?	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	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 <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> 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?		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		

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

2011

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

☐

2

☐

3

☐

4

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5

☐

6

☐

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(i)

(ii)

(iii)

h

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(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?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support?
			Yes	No	Yes	No	Yes	No	
Total									

Part II

Support Schedule for Organizations Described in IRC 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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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 (Explain in Part IV ) Do not include gain or loss from the sale of capital assets						
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 2011 (line 6 column (f) divided by line 11 column (f))	14
15	Public Support Percentage for 2010 Schedule A, Part II, line 14	15
16a	<b>33 1/3% support test—2011.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization	<input type="checkbox"/>
b	<b>33 1/3% support test—2010.</b> 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 <b>stop here.</b> The organization qualifies as a publicly supported organization	<input type="checkbox"/>
17a	<b>10%-facts-and-circumstances test—2011.</b> 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 <b>stop here.</b> Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization	<input type="checkbox"/>
b	<b>10%-facts-and-circumstances test—2010.</b> 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 <b>stop here.</b> Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization	<input type="checkbox"/>
18	<b>Private Foundation</b> If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions	<input type="checkbox"/>

Part IIIPart III

Support Schedule for Organizations Described in IRC 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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	6,673,077	8,444,633	8,663,603	8,695,404	9,691,390	42,168,107
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	1,982,534	1,232,521	478,844	449,806	407,411	4,551,116
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	8,655,611	9,677,154	9,142,447	9,145,210	10,098,801	46,719,223
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		122,882	43,535	99,755	79,750	345,922
c Add lines 7a and 7b		122,882	43,535	99,755	79,750	345,922
8 Public Support (Subtract line 7c from line 6.)						46,373,301

Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6	8,655,611	9,677,154	9,142,447	9,145,210	10,098,801	46,719,223
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	191,302	43,452	41,091	39,625	37,309	352,779
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	191,302	43,452	41,091	39,625	37,309	352,779
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.)	8,846,913	9,720,606	9,183,538	9,184,835	10,136,110	47,072,002
14 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	<input type="checkbox"/>					

Section C. Computation of Public Support Percentage		
15 Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f))	15	98.520 %
16 Public support percentage from 2010 Schedule A, Part III, line 15	16	98.250 %

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))	17	0.750 %
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18	1.750 %
19a 33 1/3% support tests—2011. 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	<input type="checkbox"/>	
b 33 1/3% support tests—2010. 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	<input type="checkbox"/>	
20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions	<input type="checkbox"/>	



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

Facts And Circumstances Test

Explanation

SCHEDULE D  
(Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

<b>Name of the organization</b> THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER TULSA	<b>Employer identification number</b>  73-0579269
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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?	
	<div><input type="checkbox"/> Yes</div> <div><input type="checkbox"/> No</div>	
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	
	<div><input type="checkbox"/> Yes</div> <div><input type="checkbox"/> No</div>	

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

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

► \$ \_\_\_\_\_

For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

Cat No 52283D

Schedule D (Form 990) 2011

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

1b

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

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

2b

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 . . . . .	1,134,886	1,096,769	1,116,460	1,238,215
1b	Contributions . . . . .		22,707		500
1c	Investment earnings or losses . . . . .	62,169	69,358	34,256	-68,308
1d	Grants or scholarships . . . . .				
1e	Other expenditures for facilities and programs . . . . .	129,803	53,948	53,947	53,947
1f	Administrative expenses . . . . .				
1g	End of year balance . . . . .	1,067,252	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 ▶ 88 800 %

b

Permanent endowment ▶ 11 200 %

c

Term endowment ▶

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

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

Description of property	(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
1b Buildings . . . . .		23,105,775	7,120,839	15,984,936
1c Leasehold improvements . . . . .		6,225,452	1,391,515	4,833,937
1d Equipment . . . . .		5,967,442	5,470,032	497,410
1e Other . . . . .				
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) . . . . . ▶				23,786,091



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)	110,105,016
2	Total expenses (Form 990, Part IX, column (A), line 25)	10,823,120
3	Excess or (deficit) for the year Subtract line 2 from line 1	-718,104
4	Net unrealized gains (losses) on investments	139,104
5	Donated services and use of facilities	21,272
6	Investment expenses	
7	Prior period adjustments	
8	Other (Describe in Part XIV)	6
9	Total adjustments (net) Add lines 4 - 8	160,382
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	-557,722

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return		
1	Total revenue, gains, and other support per audited financial statements . . . . .	110,317,333
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	
a	Net unrealized gains on investments . . . . .2a139,104	
b	Donated services and use of facilities . . . . .2b32,881	
c	Recoveries of prior year grants . . . . .2c	
d	Other (Describe in Part XIV) . . . . .2d40,327	
e	Add lines 2a through 2d . . . . .2e212,312	
3	Subtract line 2e from line 1 . . . . .3	10,105,021
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-5	
c	Add lines 4a and 4b . . . . .4c-5	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12 ) . . . . .5	10,105,016

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return		
1	Total expenses and losses per audited financial statements . . . . .	110,875,055
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	
a	Donated services and use of facilities . . . . .2a11,609	
b	Prior year adjustments . . . . .2b	
c	Other losses . . . . .2c	
d	Other (Describe in Part XIV) . . . . .2d40,327	
e	Add lines 2a through 2d . . . . .2e51,936	
3	Subtract line 2e from line 1 . . . . .3	10,823,119
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) . . . . .4b1	
c	Add lines 4a and 4b . . . . .4c1	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18 ) . . . . .5	10,823,120

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 2009.
PART XI, LINE 8 - OTHER ADJUSTMENTS		ROUNDING 6
PART XII, LINE 2D - OTHER ADJUSTMENTS		COST OF GOODS SOLD 40,327
PART XII, LINE 4B - OTHER ADJUSTMENTS		ROUNDING -5
PART XIII, LINE 2D - OTHER ADJUSTMENTS		COST OF GOODS SOLD 40,327
PART XIII, LINE 4B - OTHER ADJUSTMENTS		ROUNDING 1

Schedule J  
(Form 990)

Compensation Information

OMB No 1545-0047

2011

Open to Public Inspection

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.

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 appropriate 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. <div><div><input type="checkbox"/> First-class or charter travel</div><div><input type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input type="checkbox"/> Tax idemnification and gross-up payments</div><div><input type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Discretionary spending account</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div>		
1b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain		
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?		
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. <div><div><input checked="" type="checkbox"/> Compensation committee</div><div><input type="checkbox"/> Written employment contract</div><div><input type="checkbox"/> Independent compensation consultant</div><div><input checked="" type="checkbox"/> Compensation survey or study</div><div><input type="checkbox"/> Form 990 of other organizations</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div>		
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		
4a	Receive a severance payment or change-of-control payment?		No
4b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?		No
4c	Participate in, or receive payment from, an equity-based compensation arrangement?		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III		
	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		
5a	The organization?		No
5b	Any related organization?		No
	If "Yes," to line 5a or 5b, describe in Part III		
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		
6a	The organization?		No
6b	Any related organization?		No
	If "Yes," to line 6a or 6b, describe in Part III		
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		No
8	Were any amounts reported in Form 990, Part VII, paid or accrued 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		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?		

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) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual.

[illegible]

**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
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Schedule K  
(Form 990)

Department of the Treasury  
Internal Revenue Service

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

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

2011

Open to Public Inspection

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 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								
		Yes	No	Yes	No	Yes	No	Yes	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		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use?		X						
b	If 'Yes' to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c	Are there any research agreements that may result in private business use of bond-financed property?		X						
d	If 'Yes' to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any 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		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		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

Procedures To Undertake Corrective Action

Check the box if the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations . . . . . ☐ Yes ☒ No

Part VI

Supplemental Information

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

Identifier	Return Reference	Explanation
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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

2011

Open to Public  
Inspection

Name of the organization THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER TULSA	Employer identification number  73-0579269
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Identifier	Return Reference	Explanation
	FORM 990, PART VI	WE HAVE A EXECUTIVE COMMITTEE THAT ACTS ON THE BOARDS BEHALF WHEN THE BOARD DOES NOT MEET THESE MEMBERS ARE ALSO MEMBERS OF THE BOARD

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 139,104 DONATED SERVICES AND USE OF FACILITIES 21,272 ROUNDING 6 TOTAL TO FORM 990, PART XI, LINE 5 160,382

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 PROGRAMING 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	<p>PROGRAM DESCRIPTIONS STRATEGIC PLAN GOALS OF THE YMCA OF GREATER TULSA THREE YEARS AGO, THE METROPOLITAN BOARD OF DIRECTORS, STAFF, AND BRANCH ADVISORY BOARD MEMBERS CREATED THE 2008-2013 YMCA STRATEGIC PLAN. RECENTLY, THE BOARD RECONVENED TO REVIEW AND REFRESH THE PLAN. WHAT FOLLOWS IS OUR BOLD VISION IN THREE CRITICAL AREAS THAT ARE ALIGNED WITH THE Y-USA 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 TO PROVIDE THE RESOURCES NEEDED BY OUR COMMUNITIES TO ADDRESS THE MOST PRESSING SOCIAL ISSUES, FROM CHILDHOOD OBESITY TO GRADUATION RATES. THROUGH THE SUPPORT OF OUR COMMUNITY, WE EMPOWER 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 SCHOOL, IMPROVE THE HEALTH OF OUR COMMUNITY'S CITIZENS AND OFFER OPPORTUNITIES FOR KIDS AND ADULTS TO HELP AND SERVE OTHERS THROUGH Y PROGRAMS. THIS PAST YEAR HAS BEEN FULL OF OPPORTUNITIES, CHALLENGES AND, BEST OF ALL, PERSONAL AND SOCIAL CHANGE THROUGH YMCA PROGRAMS AND SERVICES. THE Y AT UNION JOINED OUR ASSOCIATION. WE ARE EXCITED TO SERVE CHILDREN AND FAMILIES LIVING IN THE UNION PUBLIC SCHOOL DISTRICT AT AN EVEN GREATER CAPACITY. IN THIS 990, WE ARE PLEASED TO ANNOUNCE SIGNIFICANT PROGRESS IN EACH OF OUR THREE STRATEGIC PRIORITY AREAS: YOUTH DEVELOPMENT, HEALTHY LIVING AND SOCIAL RESPONSIBILITY.</p> <p><b>YOUTH DEVELOPMENT:</b> NURTURING THE POTENTIAL OF EVERY CHILD AND TEEN. WE BELIEVE THAT ALL KIDS DESERVE THE OPPORTUNITY 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 POSITIVE BEHAVIORS, BETTER HEALTH AND EDUCATIONAL ACHIEVEMENT.</p> <p><b>CHALLENGE:</b> DURING AFTERSCHOOL HOURS, CHILDREN ARE MORE LIKELY TO PARTICIPATE IN RISKY BEHAVIOR, BECOME A VICTIM OF A CRIME, OR COMMIT ONE. AN ESTIMATED 25.4 PERCENT OF CHILDREN IN TULSA COUNTY DON'T GRADUATE FROM HIGH SCHOOL. OKLAHOMA'S DIVORCE RATES ARE AMONG THE WORST IN THE NATION, AND THE AVERAGE CHILD SPENDS SIX HOURS A DAY IN FRONT OF A SCREEN-IMPACTING THE AMOUNT OF QUALITY TIME FAMILIES SPEND TOGETHER.</p> <p><b>RESPONSE:</b> PROVIDE GRADUATE OKLAHOMA (GO) PROGRAM IN ALL Y AFTER-SCHOOL SITES. PROVIDE FAMILY-STRENGTHENING SCHEDULES, ACTIVITIES AND PROGRAMS. PROVIDE CAMPING EXPERIENCES THAT WILL HELP CHILDREN DISCOVER THE WONDERS OF A NATURAL WORLD AND REDUCE THE AMOUNT OF TIME CHILDREN ARE PLUGGED INTO A SCREEN.</p> <p><b>2011-2012 ACHIEVEMENTS:</b> 90% OF GRADUATE OKLAHOMA PARTICIPANTS MAINTAINED OR ACHIEVED A HEALTHY BMI (BODY MASS INDEX). 100% OF YMCA CAMPERS REDUCED SCREEN TIME BY HALF. 75% OF FAMILY PARTICIPANTS REPORTED AN INCREASE IN THE AMOUNT OF TIME THEY SPENT TOGETHER THROUGH HERO CAMP. 90% OF PRESCHOOL PARENTS INVOLVED IN OUR FAMILY LITERACY PROGRAM REPORTED READING MORE TO THEIR CHILDREN EACH WEEK.</p> <p><b>SUCCESS STORY:</b> SUMMER LEARNING INSTITUTE IN APRIL, WITH SUMMER BREAK QUICKLY APPROACHING, THE GEORGE KAISER FAMILY FOUNDATION EXTENDED A CHALLENGE GRANT TO THE Y TO PROVIDE AFTERNOON CARE AND EDUCATION FOR STUDENTS WHO ATTENDED THE FOLLOWING TEACH FOR AMERICA AND TPS PARTNERSHIP SCHOOLS - SKELLY, HAWTHORNE, AND MCCLURE ELEMENTARY. MORE THAN 500 CHILDREN BECAME PART OF THE Y'S SUMMER LEARNING INSTITUTE. OUR GOAL WAS TO COMBAT THE SUMMER LEARNING GAP, WHICH CAN CAUSE SOME STUDENTS TO FALL BEHIND ACADEMICALLY BY AS MUCH AS 2 MONTHS EACH SUMMER. THE Y'S SUMMER LEARNING INSTITUTE PROGRAM GAVE KIDS THE OPPORTUNITY TO STAY MENTALLY AND PHYSICALLY ACTIVE DURING THE MONTHS WHEN MANY OF THEM TYPICALLY WOULD BE PARKED IN FRONT OF A TELEVISION SCREEN. THE FREE PROGRAM WAS ESPECIALLY BENEFICIAL TO SINGLE AND WORKING PARENTS WHO FACE THE CHALLENGES OF HIGH DAYCARE COSTS AND KEEPING THEIR KIDS OCCUPIED WITH HEALTHY ACTIVITIES DURING SUMMER MONTHS. WHILE THE Y'S SUMMER LEARNING INSTITUTE FOCUSED ON HEALTH, WELLNESS AND KEEPING KIDS MOVING, THE PROGRAM PROVIDED MORE THAN JUST PHYSICAL ACTIVITIES. KIDS ALSO WORKED ON THEIR LITERARY SKILLS BY READING BOOKS AND PARTICIPATING IN ACTIVITIES RELATED TO THE STORIES. EACH SESSION EVEN INCLUDED DAILY INSTRUCTIONS THAT EMPHASIZED THE RELATIONSHIP BETWEEN GOOD FOOD AND GOOD HEALTH.</p> <p><b>HEALTHY LIVING:</b> 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.</p> <p><b>CHALLENGE:</b> OKLAHOMANS ARE AMONG THE LEAST HEALTHY IN THE COUNTRY, RANKING ONLY ABOVE MISSISSIPPI. DIABETES COSTS THE CITIZENS OF OKLAHOMA AN ESTIMATED \$1.8 BILLION EACH YEAR. THE ESTIMATED COST ASSOCIATED WITH OBESITY IN OKLAHOMA IS MORE THAN \$854 MILLION EACH YEAR.</p> <p><b>RESPONSE:</b> ENGAGE AND SUPPORT OUR MEMBERS AND PROGRAM PARTICIPANTS IN THEIR PURSUIT OF HEALTH. BUILD</p>

Identifier	Return Reference	Explanation
	FORM 990, PART III, LINE 4	<p>STRONG COMMUNITY PARTNERSHIPS, POSITION THE Y AS THE LEADER IN PROMOTING HEALTH AND WELLNESS THROUGH PREVENTION, RESTORATION AND REHABILITATION, WITH A FOCUS ON UNDERSERVED POPULATIONS. WORK WITH THE MEDICAL COMMUNITY TO PROVIDE HIGH IMPACT INTERVENTION PROGRAMS INCLUDING OUR EARLY LEARNING INTERVENTION, LIVESTRONG AT THE YMCA AND TEEN OBESITY PROGRAMS. 2011-2012 ACHIEVEMENTS SERVED 42,143 MEMBERS AND 24,708 PROGRAM PARTICIPANTS. WELCOMED THE Y AT UNION TO THE YMCA OF GREATER TULSA FAMILY. FINANCIAL ASSISTANCE THROUGH MEMBERSHIP FOR ALL RESULTED IN \$1.7M IN SUBSIDY, A 6 PERCENT INCREASE FROM LAST YEAR. 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 STORY: LIVESTRONG AT THE YMCA. SHORTLY AFTER LOSING HER HUSBAND, ANNE WAS DIAGNOSED WITH CANCER. TREATMENTS TOOK A TREMENDOUS TOLL ON HER BODY, SO MUCH THAT SHE HAD TO GIVE UP HER JOB AS A SCHOOL PRINCIPAL, A VERY DIFFICULT DECISION BECAUSE SHE HAD DEVOTED HER LIFE TO KIDS. LOSING HER HUSBAND, HER GOOD HEALTH AND HER JOB IN QUICK SUCCESSION MADE ANNE WITHDRAW, AVOIDING FRIENDS AND FAMILY. SHE WAS UNDERSTANDABLY OVERWHELMED, BUT ANNE'S DAUGHTER WASN'T ABOUT TO LET HER MOTHER FACE THESE CHALLENGES ALONE. SHE TOLD HER MOM ABOUT THE LIVESTRONG AT THE YMCA PROGRAM AND CONVINCED HER TO JOIN. LIVESTRONG AT THE YMCA IS A 12-WEEK PROGRAM THAT SUPPORTS ADULT CANCER SURVIVORS IN THE TRANSITIONAL PERIOD BETWEEN COMPLETING THEIR CANCER TREATMENT AND THE RETURN TO FEELING STRONGER PHYSICALLY AND EMOTIONALLY. THE PROGRAM IS CONDUCTED OUTSIDE OF MEDICAL FACILITIES TO EMPHASIZE THAT LIVESTRONG AT THE YMCA IS ABOUT HEALTH, NOT DISEASE. AFTER ANNE WAS IN THE PROGRAM A FEW WEEKS, HER DAUGHTER TOLD US, "THANK YOU SO MUCH. WE HAVEN'T SEEN OUR MOTHER SMILE SINCE WE LOST OUR DAD OVER A YEAR AGO. THIS PROGRAM HAS GIVEN US OUR MOM BACK." THROUGHOUT CHEMOTHERAPY AND RADIATION, ANNE DIDN'T MISS AN OPPORTUNITY TO COME TO LIVESTRONG. THE Y WAS ABLE TO PROVIDE HER WITH A SUPPORT SYSTEM - NEW "FRIENDS FOR LIFE" AS SHE SAYS - AND HELP HER FIND HER "NEW NORMAL" THROUGH THIS PROGRAM, ANNE HAS FOUND THE SPARK IN HER LIFE AND NOW LIVES WITH HOPE.</p> <p>SOCIAL RESPONSIBILITY: 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.</p> <p>CHALLENGE: IN A TIME OF LIMITED RESOURCES, HUMAN SERVICE ORGANIZATIONS ARE STRETCHED BEYOND CAPACITY TO MEET COMMUNITY NEEDS. RESPONSE LAUNCHED AN ANNUAL VOLUNTEER-DRIVEN, INTEGRATED CAPITAL AND ENDOWMENT CAMPAIGN TO SUPPORT AND SUSTAIN PROGRAMS THAT MEET NEEDS IN OUR COMMUNITY. CONTINUED 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. PROVIDED CAREGIVERS OF YOUNG CHILDREN (INFANTS TO 4-YEAR-OLDS) WITH THE SKILLS THEY NEED TO BETTER PREPARE THEIR CHILDREN FOR SCHOOL THROUGH OUR EARLY LEARNING READINESS PROGRAM. BUILT STRATEGIC PARTNERS AND INCREASE THE NUMBER OF VOLUNTEERS AND VISIONARY LEADERS. 2011-2012 ACHIEVEMENTS: RAISED MORE THAN \$250,000 IN CAPITAL SUPPORT FOR THE DAILY FAMILY YMCA. RECEIVED \$709,647 FROM OUR GENEROUS DONORS TO SUPPORT THE MISSION OF THE YMCA OF GREATER TULSA. GIVEN \$630,344 IN SUPPORT BY THE TULSA AREA UNITED WAY.</p>

Identifier	Return Reference	Explanation
	FORM 990, PART III, LINE 4 (CONTINUED)	ENGAGED 135 BOARD MEMBERS AND 2,597 PROGRAM VOLUNTEERS PARTNERED WITH MORE THAN 50 AGENCIES, SCHOOL DISTRICTS, UNIVERSITIES, AND MEDICAL INSTITUTIONS CONTINUED 100% OF BOARD AND STAFF MEMBERS CONTRIBUTIONS TO THE YMCA INCREASED THE NUMBER OF BOARD AND STAFF TO REFLECT THE DIVERSITY OF THE COMMUNITY SUCCESS STORY FAMILY FRIENDS AND NEIGHBORS THE THORNTON FAMILY YMCA WAS CHOSEN TO PILOT AN INNOVATIVE PROGRAM TO EQUIP CAREGIVERS WITH THE SKILLS THEY NEED TO PREPARE THEIR CHILDREN FOR SCHOOL THE PROGRAM IS IDEAL FOR ESTHER, HER 3-YEAR-OLD SON DANIEL, AND 1-YEAR OLD MIRIAM, A K A PRINCESS CLASSES MEET TWICE A WEEK AT THE BRIGHTON APARTMENTS JUST BEHIND THE THORNTON Y, AND ESTHER MAKES SURE THAT DANIEL AND PRINCESS NEVER MISS A SESSION KIDS AND THEIR CAREGIVERS IN THE ELR PROGRAM ENJOY TOYS, BOOKS, GAMES, RESOURCES, AND SNACKS TOGETHER IN THE PROCESS, CAREGIVERS LEARN THE IMPORTANCE OF CREATING AN EDUCATIONAL ENVIRONMENT BEFORE SCHOOL EVEN BEGINS WHEN ESTHER LEAVES, FOR EXAMPLE, SHE TAKES LETTER SHEETS HOME TO HELP DANIEL WORK ON HIS ABCS, SO HE'LL BE WELL PREPARED WHEN HE STARTS SCHOOL WHEN HE BEGAN THE ELR PROGRAM, DANIEL DIDN'T KNOW HIS COLORS, BUT NOW HE KNOWS THEM IN ENGLISH AND SPANISH, AND IS EVEN TEACHING THE Y STAFF THEIR COLORS IN SPANISH

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 20B PART V QUESTIONS 3B, 5C, 6B, 7B, 7D, 7G, 7H, 8-13C, 14B PART VI, SECTION B QUESTION 16B PART XII QUESTION 3B

Additional Data

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

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

4d. Other program services					
(Code )	(Expenses \$	270,352	including grants of \$	(Revenue \$	232,390 )
SPORTS AND RECREATION					
(Code )	(Expenses \$	147,174	including grants of \$	(Revenue \$	152,273 )
OTHER PROGRAMS					

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	0 00	X						0	0	0
BRIAN CARNEY BOARD MEMBER	0 00	X						0	0	0
MANYLES GAINES BOARD MEMBER	0 00	X						0	0	0
DEREK GATES BOARD MEMBER	0 00	X						0	0	0
BOB GEWENIGER BOARD MEMBER	0 00	X						0	0	0
LEIGH GOODSON BOARD MEMBER	0 00	X						0	0	0
DAVID HAYS BOARD MEMBER	0 00	X						0	0	0
RICHARD HEDGECOCK BOARD MEMBER	0 00	X						0	0	0
JOHN HICKEY BOARD MEMBER	0 00	X						0	0	0
MOLLY JARVIS BOARD MEMBER	0 00	X						0	0	0
JIM KNEALE BOARD MEMBER	0 00	X						0	0	0
STEVE MALCOLM BOARD MEMBER	0 00	X						0	0	0
KELLI BAILEY BOARD MEMBER	0 00	X						0	0	0
STEVEN NELL BOARD MEMBER	0 00	X						0	0	0
ELLIOT NELSON BOARD MEMBER	0 00	X						0	0	0
PAUL SAMUELS BOARD MEMBER	0 00	X						0	0	0
NANCY MCDONALD BOARD MEMBER	0 00	X						0	0	0
WILL SMITH BOARD MEMBER	0 00	X						0	0	0
HETTY FORE BOARD MEMBER	0 00	X						0	0	0
SUZANN STEWART BOARD MEMBER	0 00	X						0	0	0
MARK MUSSER BOARD MEMBER	0 00	X						0	0	0
DOUG WALKER BOARD MEMBER	0 00	X						0	0	0
JOSEPH NICHOLSON III BOARD MEMBER	0 00	X						0	0	0
REX WOODS BOARD MEMBER	0 00	X						0	0	0
LAURIE TILLEY BOARD MEMBER	0 00	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)						(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			
SANDI PELLOW BOARD MEMBER	0 00	X						0	0	0
RACHEL MATHIS BOARD MEMBER	0 00	X						0	0	0
SUSAN PLANK CHIEF EXECUTIVE OFFICER	40 00			X				159,458	0	20,837
SAM CARROLL CHIEF OPERATING OFFICER	40 00			X				97,735	0	27,533
RONDA JENKINS-THOMPSON CHIEF FINANCIAL OFFICER	40 00			X				86,700	0	11,411