

Forms 990 / 990-EZ Return Summary

For calendar year 2013, or tax year beginning _____, and ending _____

Young Men's Christian Association **58-2058795**
of Metropolitan Huntsville Alabama

Net Asset / Fund Balance at Beginning of Year		<u>6,518,158</u>
Revenue		
Contributions	<u>403,165</u>	
Program service revenue	<u>7,569,436</u>	
Investment income	<u>5,964</u>	
Capital gain / loss	<u>-8,761</u>	
Fundraising / Gaming:		
Gross revenue	<u>4,940</u>	
Direct expenses	<u>38,750</u>	
Net income	<u>-33,810</u>	
Other income	<u>0</u>	
Total revenue		<u>7,935,994</u>
Expenses		
Program services	<u>7,051,118</u>	
Management and general	<u>705,219</u>	
Fundraising	<u>210,038</u>	
Total expenses		<u>7,966,375</u>
Excess / (deficit)		<u>-30,381</u>
Changes		<u>-145,600</u>
Net Asset / Fund Balance at End of Year		<u>6,342,177</u>

Reconciliation of Revenue	
Total revenue per financial statements	<u>7,793,894</u>
Less:	
Unrealized gains	<u> </u>
Donated services	<u>3,500</u>
Recoveries	<u> </u>
Other	<u>-145,600</u>
Plus:	
Investment expenses	<u> </u>
Other	<u> </u>
Total revenue per return	<u>7,935,994</u>

Reconciliation of Expenses	
Total expenses per financial statements	<u>7,969,875</u>
Less:	
Donated services	<u>3,500</u>
Prior year adjustments	<u> </u>
Losses	<u> </u>
Other	<u> </u>
Plus:	
Investment expenses	<u> </u>
Other	<u> </u>
Total expenses per return	<u>7,966,375</u>

Balance Sheet			
	Beginning	Ending	Differences
Assets	<u>27,158,823</u>	<u>26,423,177</u>	
Liabilities	<u>20,640,665</u>	<u>20,081,000</u>	
Net assets	<u>6,518,158</u>	<u>6,342,177</u>	<u>-175,981</u>

Miscellaneous Information

Amended return _____
Return / extended due date 08/15/14
Failure to file penalty _____

Barnes, Blackwell & Company, P.C.
3309 Bob Wallace Ave
Huntsville, AL 35805
256-536-3513

July 3, 2014

CONFIDENTIAL

Young Men's Christian Association
of Metropolitan Huntsville Alabama
120 Holmes Avenue - Suite 405
Huntsville, AL 35801

Dear MR. MOUNTS:

We have prepared the following returns from information provided by you without verification or audit.

Return of Organization Exempt From Income Tax (Form 990)

We suggest that you examine these returns carefully to fully acquaint yourself with all items contained therein to ensure that there are no omissions or misstatements. Attached are instructions for signing and filing each return. Please follow those instructions carefully.

Enclosed is any material you furnished for use in preparing the returns. If the returns are examined, requests may be made for supporting documentation. Therefore, we recommend that you retain all pertinent records for at least seven years.

In order that we may properly advise you of tax considerations, please keep us informed of any significant changes in your financial affairs or of any correspondence received from taxing authorities.

If you have any questions, or if we can be of assistance in any way, please call.

Sincerely,

Barnes, Blackwell & Company, P.C.

Filing Instructions

Young Men's Christian Association of Metropolitan Huntsville Alabama

Exempt Organization Tax Return

Taxable Year Ended December 31, 2013

Date Due: August 15, 2014

Remittance: None is required. Your Form 990 for the tax year ended 12/31/13 shows no balance due.

Signature: You are using a Personal Identification Number (PIN) for signing your return electronically. Sign the IRS e-file Authorization and mail it as soon as possible to:

Barnes, Blackwell & Company, P.C.
3309 Bob Wallace Ave
Huntsville, AL 35805

Other: Initial and date the copies of the IRS e-file Signature Authorization and the Form 990. Retain them for your records. If previously signed and returned no further action is required for Form 8879-EO.

Your return is being filed electronically with the IRS and is not required to be mailed. Mailing a paper copy of your return to the IRS will delay the processing of your return.

Form **8879-EO**

IRS e-file Signature Authorization for an Exempt Organization

OMB No. 1545-1878

For calendar year 2013, or fiscal year beginning _____, 2013, and ending _____, 20_____

Department of the Treasury
Internal Revenue Service

Do not send to the IRS. Keep for your records.

2013

Information about Form 8879-EO and its instructions is at www.irs.gov/form8879eo.

Name of exempt organization

**Young Men's Christian Association
of Metropolitan Huntsville Alabama**

Employer identification number

58-2058795

Name and title of officer

**Scott Seeley
Board Chair**

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than 1 line in Part I.

1a	Form 990 check here	<input checked="" type="checkbox"/>	b Total revenue , if any (Form 990, Part VIII, column (A), line 12)	1b	7,935,994
2a	Form 990-EZ check here	<input type="checkbox"/>	b Total revenue , if any (Form 990-EZ, line 9)	2b	
3a	Form 1120-POL check here	<input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b	
4a	Form 990-PF check here	<input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	
5a	Form 8868 check here	<input type="checkbox"/>	b Balance Due (Form 8868, Part I, line 3c or Part II, line 8c)	5b	

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2013 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

I authorize **Barnes, Blackwell & Company, P.C.** to enter my PIN **12345** as my signature
ERO firm name Enter five numbers, but do not enter all zeros

on the organization's tax year 2013 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2013 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature } _____

Date } **06/26/14**

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

63589122451

do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2013 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature } **Randy Blackwell**

Date } **06/26/14**

**ERO Must Retain This Form—See Instructions
Do Not Submit This Form To the IRS Unless Requested To Do So**

For Paperwork Reduction Act Notice, see back of form.

Form **8879-EO** (2013)

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 private foundations)

Do not enter Social Security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013

Open to Public Inspection

A For the 2013 calendar year, or tax year beginning , and ending

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

C Name of organization **Young Men's Christian Association of Metropolitan Huntsville Alabama**

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
120 Holmes Avenue - Suite 405

City or town, state or province, country, and ZIP or foreign postal code
Huntsville AL 35801

D Employer identification number
58-2058795

E Telephone number
256-883-9622

G Gross receipts \$ **7,983,505**

F Name and address of principal officer:
Scott Seeley
120 Holmes Avenue-Suite 405
Huntsville AL 35801

H(a) Is this a group return for subordinates? Yes No

H(b) Are all subordinates included? Yes No

If "No," attach a list. (see instructions)

I Tax-exempt status: 501(c)(3) 501(c) () t (insert no.) 4947(a)(1) or 527

J Website: **www.ymcahuntsville.org**

H(c) Group exemption number **U**

K Form of organization: Corporation Trust Association Other **U**

L Year of formation: **1910** **M** State of legal domicile: **AL**

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: See Schedule O				
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.				
	3 Number of voting members of the governing body (Part VI, line 1a)	3	26		
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	25		
	5 Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5	590		
	6 Total number of volunteers (estimate if necessary)	6	400		
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a		0	
b Net unrelated business taxable income from Form 990-T, line 34	7b		0		
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	422,421	Current Year	403,165
	9 Program service revenue (Part VIII, line 2g)	7,837,588	7,569,436		
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	8,715	-2,797		
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	22,051	-33,810		
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	8,290,775	7,935,994		
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)				0
	14 Benefits paid to or for members (Part IX, column (A), line 4)				0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	3,667,292	3,542,539		
	16a Professional fundraising fees (Part IX, column (A), line 11e)				0
	b Total fundraising expenses (Part IX, column (D), line 25) U 210,038				
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	4,586,499	4,423,836			
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	8,253,791	7,966,375			
19 Revenue less expenses. Subtract line 18 from line 12	36,984	-30,381			
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	27,158,823	End of Year	26,423,177
	21 Total liabilities (Part X, line 26)		20,640,665		20,081,000
	22 Net assets or fund balances. Subtract line 21 from line 20		6,518,158		6,342,177

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: **Scott Seeley** Date: _____

Type or print name and title: **Board Chair**

Paid Preparer Use Only

Print/Type preparer's name: **Randy Blackwell** Preparer's signature: **Randy Blackwell** Date: **07/03/14** Check if self-employed PTIN: **P00075826**

Firm's name: **Barnes, Blackwell & Company, P.C.** Firm's EIN: **63-0861852**

Firm's address: **3309 Bob Wallace Ave Huntsville, AL 35805** Phone no.: **256-536-3513**

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

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III

1 Briefly describe the organization's mission:

See Schedule O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes No

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the 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 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 \$ **3,233,976** including grants of \$) (Revenue \$ **5,155,711**)

Membership/Fitness: The Y is a leading voice on health and well-being. We bring families closer together, encourage good health, and foster connections through fitness, sports, fun, and shared interests. As a result, 25,728 people in our community are receiving the support, guidance, and resources they need to achieve greater health in sprit, mind, and body through membership. Over 10,000 more reach their fullest potential through participation in the YMCA programs. This is particularly important as our nation struggles with an obesity crisis, families struggle with work/life balance, and individuals search for personal fulfillment. Our programs are accessible, affordable, and open to all faiths, backgrounds, abilities, and income levels. In 2013, the Y provided over \$1,093,000 in local financial

4b (Code:) (Expenses \$ **2,124,613** including grants of \$) (Revenue \$ **1,789,636**)

Childcare:
Our YMCA is committed to 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. That's why we help young people cultivate the values, skills, and relationships that lead to positive behaviors, better health, and educational achievement. Our YMCA programs, such as preschool, out of school camps, home school enrichment, leaders clubs, youth sports, and afterschool, serve over 600 kids per day and offer a range of experiences that enrich cognitive, social, physical, and emotional growth. The YMCA is the only United Way agency in Madison County that provides a sliding fee scale and subsidy dollars to make the Child Development program

4c (Code:) (Expenses \$ **1,518,385** including grants of \$) (Revenue \$ **551,849**)

Athletics/Aquatics:
Make A Splash: Each year, an estimated 5,000 children ages 14 and under are hospitalized due to near drowning situations. Drowning is the third leading cause of death for children under five. Many of these tragedies can be prevented if children are taught water safety techniques. The YMCA and Madison City Schools teamed up to meet this important community need. In addition to safety, learning to swim will give children a feeling of pride and accomplishment. The YMCA and the Madison City School District's "Make a Splash" program is an aquatic safety training program for all Madison City School 3rd graders. During several sessions, certified YMCA swim instructors introduce 3rd grade students to the water, teach basic swim

4d Other program services. (Describe in Schedule O.)

(Expenses \$ **174,144** including grants of \$) (Revenue \$ **72,240**)

4e Total program service expenses **7,051,118**

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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	X	
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		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		X
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		X
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; 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		X
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		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	X	
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		X
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		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	X	
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		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	X	
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 and XII is optional		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
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, Parts I and IV		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		X
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	X	
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		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part IV Checklist of Required Schedules (continued)

		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		X
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, or IV, and Part V, line 1		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
3b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
4b	If "Yes," enter the name of the foreign country: U See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	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?	X	
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7d	If "Yes," indicate the number of Forms 8282 filed during the year		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		X
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		X
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the organization make any taxable distributions under section 4966?		
9b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
10a	Initiation fees and capital contributions included on Part VIII, line 12		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
11a	Gross income from members or shareholders		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
13b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		
13c	Enter the amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line 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 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
	26		
b	Enter the number of voting members included in line 1a, above, who are independent		
	25		
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?		X
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?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
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?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
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		X

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?		X
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			
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12b			
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
12c			
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
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	X	
b	Other officers or key employees of the organization	X	
15b	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
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 u None
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input checked="" type="checkbox"/> Own website <input checked="" type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain in Schedule O)
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 during the tax year.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization: u DENISE SMITH CFO OF YMCA 120 Holmes Ave Ste 405 HUNTSVILLE AL 35801 256-428-9622

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

Check if Schedule O contains a response or note to any line in this Part VII

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
 - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
 - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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) John Baggette	0.00									
Board of Dir	0.00	X					0	0	0	
(2) Joe Cosumano	0.00									
Board of Dir	0.00	X					0	0	0	
(3) Steve Burcham	0.00									
Board of Dir	0.00	X					0	0	0	
(4) Sheila Cummings	0.00									
Board of Dir	0.00	X					0	0	0	
(5) Jim Caudle	0.00									
Board of Dir	0.00	X					0	0	0	
(6) Steuart A. Evans, Jr.	0.00									
Board of Dir	0.00	X					0	0	0	
(7) Nansi Clark	0.00									
Board of Dir	0.00	X					0	0	0	
(8) John Hamilton	0.00									
Board of Dir	0.00	X					0	0	0	
(9) Sean Currie	0.00									
Board of Dir	0.00	X					0	0	0	
(10) Jennifer Geist	0.00									
Board of Dir	0.00	X					0	0	0	
(11) Joe Collazo	0.00									
Board of Dir	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 (list any hours for related organizations below dotted line)	(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			
(12) Foster Perry	0.00									
Board of Dir	0.00	X					0	0	0	
(13) Ginger Harper	0.00									
Board of Dir	0.00	X					0	0	0	
(14) Scott Seeley	0.00									
Board of Dir	0.00	X					0	0	0	
(15) Byron Thomas	0.00									
Board of Dir	0.00	X					0	0	0	
(16) Jimmy Thornton, III	0.00									
Board of Dir	0.00	X					0	0	0	
(17) Nicole Jones	0.00									
Board of Dir	0.00	X					0	0	0	
(18) Joe Knoch	0.00									
Board of Dir	0.00	X					0	0	0	
(19) John Eyster	0.00									
Board of Dir	0.00	X					0	0	0	
1b Sub-total										
c Total from continuation sheets to Part VII, Section A							276,561		42,072	
d Total (add lines 1b and 1c)							276,561		42,072	

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

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

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
Jani-King of Huntsville Madison AL 35758	114 Arlington Drive Janitorial Serv	152,943
DAXKO Birmingham AL 35209	600 University Park Place Suite 500 Software suppor	121,952

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 **u 2**

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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			
(12) Irene Wisner	0.00									
Board of Dir	0.00	X					0	0	0	
(13) Gary Wolfe, Esq.	0.00									
Board of Dir	0.00	X					0	0	0	
(14) Dan Montgomery	0.00									
Board of Dir	0.00	X					0	0	0	
(15) Karen Peterson	0.00									
Board of Dir	0.00	X					0	0	0	
(16) David Thrasher	0.00									
Board of Dir	0.00	X					0	0	0	
(17) Sally Warden	0.00									
Board of Dir	0.00	X					0	0	0	
(18) Scott Mounts	50.00									
CEO	0.00			X			126,270	0	18,222	
(19) James Gossett	50.00									
COO	0.00			X			82,000	0	12,803	
1b Sub-total							208,270		31,025	
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	3	
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5	

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

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 **0**

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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			
(12) Denise Smith CFO	40.00 0.00			X				68,291	0	11,047
(13)										
(14)										
(15)										
(16)										
(17)										
(18)										
(19)										
1b Sub-total								68,291		11,047
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		

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

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 **U**

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c 43,073				
	d Related organizations	1d				
	e Government grants (contributions)	1e 73,426				
	f All other contributions, gifts, grants, and similar amounts not included above	1f 286,666				
	g Noncash contributions included in lines 1a-1f: \$					
	h Total. Add lines 1a-1f	u 403,165				
Program Service Revenue	2a Fitness center	Busn. Code	5,155,711	5,155,711		
	b Childcare		1,308,551	1,308,551		
	c Athletics/Aquatics Programs		551,849	551,849		
	d Childcare program-state		481,085	481,085		
	e Camp Activities		46,736	46,736		
	f All other program service revenue		25,504	25,504		
	g Total. Add lines 2a-2f	u 7,569,436				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)	u 5,964			5,964	
	4 Income from investment of tax-exempt bond proceeds	u				
	5 Royalties	u				
	6a Gross rents	(i) Real				
		(ii) Personal				
	b Less: rental exps.					
	c Rental inc. or (loss)					
	d Net rental income or (loss)	u				
	7a Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other				
	b Less: cost or other basis & sales exps.		8,761			
	c Gain or (loss)		-8,761			
	d Net gain or (loss)	u	-8,761	-8,761		
	8a Gross income from fundraising events (not including \$ 43,073 of contributions reported on line 1c). See Part IV, line 18	a 4,940				
b Less: direct expenses		b 38,750				
c Net income or (loss) from fundraising events		u	-33,810			
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	u				
10a Gross sales of inventory, less returns and allowances	a					
	b Less: cost of goods sold	b				
	c Net income or (loss) from sales of inventory	u				
Miscellaneous Revenue		Busn. Code				
11a						
b						
c						
d All other revenue						
e Total. Add lines 11a-11d	u					
12 Total revenue. See instructions.	u	7,935,994	7,560,675	0	5,964	

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).

Check if Schedule O contains a response or note to any line 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 U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	318,633	47,859	184,079	86,695
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	2,788,995	2,576,553	128,560	83,882
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	150,996	136,873	3,611	10,512
9 Other employee benefits	54,591	51,966		2,625
10 Payroll taxes	229,324	202,596	14,316	12,412
11 Fees for services (non-employees):				
a Management				
b Legal	12,307		12,307	
c Accounting	17,500		17,500	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12 Advertising and promotion	24,317		24,317	
13 Office expenses	85,653	46,292	37,872	1,489
14 Information technology				
15 Royalties				
16 Occupancy	691,072	652,178	37,337	1,557
17 Travel	18,136	9,795	2,225	6,116
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	26,806	11,184	15,622	
20 Interest	888,426	888,426		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,078,166	1,073,474	4,511	181
23 Insurance	146,861	146,425	373	63
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a Supplies	414,887	407,306	7,277	304
b Repairs & Maint	373,412	359,368	12,309	1,735
c Contract Services	268,942	254,307	12,168	2,467
d Bank Charges	111,750		111,750	
e All other expenses	265,601	186,516	79,085	
25 Total functional expenses. Add lines 1 through 24e	7,966,375	7,051,118	705,219	210,038
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

		(A) Beginning of year		(B) End of year	
Assets	1 Cash—non-interest bearing	79,158	1	100,141	
	2 Savings and temporary cash investments	2,524,546	2	2,919,823	
	3 Pledges and grants receivable, net	525,225	3	261,597	
	4 Accounts receivable, net	49,851	4	29,506	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L			5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L			6	
	7 Notes and loans receivable, net			7	
	8 Inventories for sale or use			8	
	9 Prepaid expenses and deferred charges	153,937	9		96,266
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 28,962,738			
	b Less: accumulated depreciation	10b 6,141,290	23,680,698	10c	22,821,448
	11 Investments—publicly traded securities	103,597	11		102,993
	12 Investments—other securities. See Part IV, line 11			12	
	13 Investments—program-related. See Part IV, line 11			13	
	14 Intangible assets			14	
	15 Other assets. See Part IV, line 11	41,811	15		91,403
16 Total assets. Add lines 1 through 15 (must equal line 34)	27,158,823	16		26,423,177	
Liabilities	17 Accounts payable and accrued expenses	317,803	17	400,791	
	18 Grants payable		18		
	19 Deferred revenue	60,660	19	62,067	
	20 Tax-exempt bond liabilities		20		
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21		
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L			22	
	23 Secured mortgages and notes payable to unrelated third parties	19,307,301	23		18,773,194
	24 Unsecured notes and loans payable to unrelated third parties	606,165	24		529,691
	25 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	348,736	25		315,257
	26 Total liabilities. Add lines 17 through 25	20,640,665	26		20,081,000
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27 Unrestricted net assets	6,404,106	27	6,226,522	
	28 Temporarily restricted net assets	114,052	28	115,655	
	29 Permanently restricted net assets		29		
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
	30 Capital stock or trust principal, or current funds		30		
	31 Paid-in or capital surplus, or land, building, or equipment fund		31		
	32 Retained earnings, endowment, accumulated income, or other funds		32		
33 Total net assets or fund balances	6,518,158	33		6,342,177	
34 Total liabilities and net assets/fund balances	27,158,823	34		26,423,177	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	7,935,994
2	Total expenses (must equal Part IX, column (A), line 25)	2	7,966,375
3	Revenue less expenses. Subtract line 2 from line 1	3	-30,381
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	6,518,158
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-145,600
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	6,342,177

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line 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? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited 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 separate basis	X	
2c	If "Yes" to line 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.	X	
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?		X
3b	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 990-EZ)

Public Charity Status and Public Support
Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

2013

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization

**Young Men's Christian Association
of Metropolitan Huntsville Alabama**

Employer identification number

58-2058795

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

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

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state:
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I
 - b Type II
 - c Type III—Functionally integrated
 - d Type III—Non-functionally integrated
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
 - (ii) A family member of a person described in (i) above?
 - (iii) A 35% controlled entity of a person described in (i) or (ii) above?

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

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(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 monetary support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2013

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) \cup	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(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) \cup	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						

12 Gross receipts from related activities, etc. (see instructions) 12

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) 14 %

15 Public support percentage from 2012 Schedule A, Part II, line 14 15 %

16a **33 1/3% support test—2013.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support test—2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

17a **10%-facts-and-circumstances test—2013.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

b 10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) <input type="checkbox"/>	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	568,144	787,487	444,355	422,421	403,165	2,625,572
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	4,190,921	4,543,775	7,163,351	7,845,038	7,574,376	31,317,461
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	4,759,065	5,331,262	7,607,706	8,267,459	7,977,541	33,943,033
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	25,000	10,000	16,000	30,246	32,854	114,100
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		455,286	496,123	421,103	401,250	1,773,762
c Add lines 7a and 7b	25,000	465,286	512,123	451,349	434,104	1,887,862
8 Public support (Subtract line 7c from line 6.)						32,055,171

Section B. Total Support

Calendar year (or fiscal year beginning in) <input type="checkbox"/>	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6	4,759,065	5,331,262	7,607,706	8,267,459	7,977,541	33,943,033
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	116,110	21,397	18,648	9,397	5,964	171,516
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	116,110	21,397	18,648	9,397	5,964	171,516
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.)		39,218	37,506	53,462		130,186
13 Total support. (Add lines 9, 10c, 11, and 12.)	4,875,175	5,391,877	7,663,860	8,330,318	7,983,505	34,244,735

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	93.61 %
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	92.93 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	1 %
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18	1 %

19a **33 1/3% support tests—2013.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

b **33 1/3% support tests—2012.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

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

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

Part III, Line 12 - Other Income Detail

\$ 130,186

Supplemental Information

Other income for 2010 was the receipt of an insurance settlement.

Other income for 2011 was the receipt of a refund of city & state rental taxes paid.

Other income for 2012 was the receipt of a refund of city & state rental taxes paid in the amount of \$4,975 and the receipt of a refund for overpayment of dues paid in the prior year to the national YMCA in the amount of \$48,487.

Schedule B
(Form 990, 990-EZ,
or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

U Attach to Form 990, Form 990-EZ, or Form 990-PF.

U Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013

Name of the organization

**Young Men's Christian Association
of Metropolitan Huntsville Alabama**

Employer identification number

58-2058795

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33¹/₃ % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year ► \$

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization Young Men's Christian Association	Employer identification number 58-2058795
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	United Way Serivces 701 Andrew Jackson Way Huntsville AL 35807-0095	\$ 111,749	Person <input type="checkbox"/> Payroll <input checked="" type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	Boeing Alabama Employees Community Fund P.O. Box 240002 Huntsville AL 35824-6402	\$ 10,926	Person <input type="checkbox"/> Payroll <input checked="" type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	City of Madison Municipal Building 100 Hughes Road Madison AL 35756	\$ 50,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	David/Ann Hogan 134 Willow Lane Alexander City AL 35010	\$ 9,400	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	City of Huntsville P.O. Box 308 Huntsville AL 35804	\$ 13,140	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	YMCA State Alliance 120 Holmes Avenue, Suite 405 Huntsville AL 35801	\$ 10,286	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization Young Men's Christian Association	Employer identification number 58-2058795
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	John Hamilton 212 Avian lane Madison AL 35758	\$ 13,980	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization

Young Men's Christian Association of Metropolitan Huntsville Alabama

Employer identification number

58-2058795

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.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Includes questions 1-6 regarding donor advised funds.

Part II Conservation Easements.

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Includes questions 1-8 regarding 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.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Includes questions 1a-1b and 2a-2b regarding art and historical treasures.

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

3 Using the organization's acquisition, 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 XIII.

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

Part IV Escrow and Custodial Arrangements.

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

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

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

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

	Amount
1c	
1d	
1e	
1f	

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

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII Yes No

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					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment %
 - b Permanent endowment %
 - c Temporarily restricted endowment %
- The percentages in lines 2a, 2b, and 2c should equal 100%.

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

- (i) unrelated organizations
- (ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

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

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. 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		2,742,641		2,742,641
b Buildings		22,289,907	4,191,328	18,098,579
c Leasehold improvements		1,361,624	506,827	854,797
d Equipment		2,437,690	1,371,203	1,066,487
e Other		130,876	71,932	58,944
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)			u	22,821,448

Part VII Investments—Other Securities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) u		

Part VIII Investments—Program Related.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) u		

Part IX Other Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) u	

Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
(2) Lease incentive liability	315,257	
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) u	315,257	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	7,793,894
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b	3,500	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d	-145,600	
e	Add lines 2a through 2d		2e	-142,100
3	Subtract line 2e from line 1		3	7,935,994
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 XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	7,935,994

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	7,969,875
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a	3,500	
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	3,500
3	Subtract line 2e from line 1		3	7,966,375
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 XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	7,966,375

Part XIII Supplemental Information

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

Part XI, Line 2d - Revenue Amounts Included in Financials - Other

Losses from uncollectible pledges from prior years \$ -145,600

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

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

2013

Department of the Treasury
Internal Revenue Service

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

Ⓛ Attach to Form 990 or Form 990-EZ.

Ⓛ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization

**Young Men's Christian Association
of Metropolitan Huntsville Alabama**

Employer identification number

58-2058795

Part I

Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

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

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

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

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
			Yes	No			
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total							

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

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Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		<u>Over-the-Edge</u> (event type)	<u>Golf Tournament</u> (event type)	<u>None</u> (total number)	(add col. (a) through col. (c))
Revenue	1	Gross receipts	25,161	22,852	48,013
	2	Less: Contributions	25,161	17,912	43,073
	3	Gross income (line 1 minus line 2)		4,940	4,940
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs			
	7	Food and beverages			
	8	Entertainment			
	9	Other direct expenses	31,064	7,686	38,750
	10	Direct expense summary. Add lines 4 through 9 in column (d)			
11	Net income summary. Subtract line 10 from line 3, column (d)				-33,810

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

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))	
Revenue	1	Gross revenue				
Direct Expenses	2	Cash prizes				
	3	Noncash prizes				
	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	<input type="checkbox"/> Yes % <input type="checkbox"/> No	<input type="checkbox"/> Yes % <input type="checkbox"/> No	<input type="checkbox"/> Yes % <input type="checkbox"/> No	
	7	Direct expense summary. Add lines 2 through 5 in column (d)				
	8	Net gaming income summary. Subtract line 7 from line 1, column (d)				

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

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

b If "No," explain: _____

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

b If "Yes," explain: _____

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

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

2013

Department of the Treasury
Internal Revenue Service

Attach to Form 990 or 990-EZ.

**Open to Public
Inspection**

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization

**Young Men's Christian Association
of Metropolitan Huntsville Alabama**

Employer identification number

58-2058795

Form 990 - Organization's Mission

The Mission of the YMCA of Metropolitan Huntsville is to put Christian principles into practice through programs that build healthy spirit, mind, and body for all.

At the YMCA, our cause is Strengthening Communities and we strive to make a positive impact by offering programs that focus on nurturing the potential in kids, promoting healthy living for all and fostering social responsibility. Through all of our programming we promote our four character values of caring, honesty, respect and responsibility.

The purpose of the corporation is, as a non-profit charity, to serve the Huntsville and Madison area, and areas including Madison, Marshall, Morgan, Limestone and Jackson Counties by promoting and carrying out the Mission of the YMCA, supporting the Cause of Strengthening Community with focus on Youth Development, Healthy Living and Social Responsibility.

The Y is a diverse organization of men, women and children joined together by a shared commitment to nurturing the potential of kids, promoting healthy living and fostering a sense of social responsibility.

The YMCA of Metropolitan Huntsville d/b/a Heart of the Valley YMCA has been serving our community since 1910, as a leader in Youth Development, Healthy Living and Social Responsibility within Madison, Morgan, Marshall,

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Limestone and Jackson Counties. The mission of the YMCA of Metropolitan Huntsville is to put Christian principles into practice through programs that build healthy spirit, mind and body for all. The YMCA continues to develop and tailor programs specifically for the youth and adults we serve. The YMCA embraces the charitable mission, 'no one is turned away due to the inability to pay'. Our three focus areas coupled with our charitable mission ensures all members of our community can benefit from the YMCA's many and varied programs.

At the YMCA, our cause is Strengthening Communities and we strive to make a positive impact by offering programs that focus on Youth Development, Healthy Living, and Social Responsibility. Through all of our programming we promote our four character values of caring, honesty, respect and responsibility.

A healthy YMCA capable of making a significant impact in the community is a gift we have received from prior generations. It is a gift we should pass along to future generations. In a world in which so much comes and goes so quickly, the YMCA movement lasts. It is stable, values-based, professionally managed, in touch with public issues, and capable of meeting the changing conditions and needs of the future.

We advance our mission of putting Christian principles into practice through programs that build Spirit, Mind and Body for all. We seek to improve the quality of life, be a resource for continued community growth, help raise future community leaders and build memories by serving people of all ages in the Huntsville and Madison area and the surrounding five

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counties. We will accomplish this through ever evolving programs and services such as child care, personalized wellness, aquatics, camps, etc. and by emphasizing our current competitive mission advantage of offering new and distinctively high quality facilities and programs. We sustain our mission focus through membership and program revenue and through contributions of donors to our annual and capital campaigns.

Locally we serve over 35,000 members program participants. In 2013 we provided over \$1,093,000 in scholarships touching the lives of over 7,100 people including \$179,000 to deployed military family members, and \$30,000 to laid off workers.

Since no two communities are exactly alike, no two Ys are exactly alike. We bring men, women and children and our shared commitment to our communities ensures the opportunities to learn, grow and thrive that we create for all are ones that endure.

While our programs and facilities are always based on the unique needs and interests of our communities, every Y has one thing in common: our people. The volunteers, staff, members and donors of the Y are all united by a deep commitment to strengthening our communities.

Every Y is created by the community and is controlled by a Board of Directors, made up of community volunteers responsible for our Y's planning and policy decisions, financial development, and the monitoring and sanction of its operations and programs. These individuals rally behind the Mission of the YMCA to ensure the Y remains dedicated to building healthy,

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confident, connected and secure children, adults, families and communities. They do this by attending Board meetings, serving on/chairing committees, being well informed of policy matters, advocating for the YMCA in the community at large, and assuring that the Y is sound in operation. The board is the Y's ultimate governing body and legal entity and the connection between the staff and community.

The YMCA is a unique charity, unique in service and Mission with a commitment to nurturing the potential of kids, promoting healthy living, and fostering a sense of social responsibility, the Y ensures that every individual has access to the essentials needed to learn, grow and thrive. Staff and volunteers spend countless hours volunteering in the community to help strengthen and meet needs.

In 2013 our Y received 5% of its total support from contributions.

In 2013 our Y served 35,000 children and adults through the following programs:

-Membership

-Health and well-being

-Preschool Child care

-Resident camp

-Youth Sports

-Aquatics

-Day Camp

-After School Care

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Key ways in which the Heart of the Valley YMCA makes a difference in our community is by affecting the following aspects of community life:

-Water Safety - We teach every third grader in Madison City and three schools in Huntsville City Schools introductory water safety and swimming as a part of their curriculum.

-Education - The Preschool Program is a curriculum based program. All three sites are also Alabama First Class Pre-K programs designated by the Alabama Office of School Readiness.

-Economic Well-being - The Y has provided over \$165,000 for 360 employees who have been laid off and for active duty deployed military families for participation in programs and memberships. The YMCA employs over 350 full and part time staff aiding in the reduction of the unemployment rate.

As a busy mom juggling career and family, Beth needed a child care provider to whom she could trust her young daughter. She had previously had poor experiences with directors and overall she was disappointed in not finding a strong educational component in the programs she had looked into. That is until she came to the YMCA's Child Development Center. "Other centers didn't have a learning curriculum or much structure" Beth said, "but when I visited the YMCA preschool, I finally felt I had found the right place and the right people for my baby." Beth praises the staff and the Director of the center with providing a structured environment conducive to learning and "being on top of things". "Abby has really learned a lot in the short

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time she has been there and I know she likes her teacher because as soon as we arrive she runs and gives her a hug", Beth added. As any concerned mother would do, the first few days she would call and check in on her daughter to be assured that Abby was settling in. Beth went on to say " I was very impressed by how much the Director knew about Abby's day and I know each morning when I drop her off she is being loved and cared for and that means the world to me."

All kids deserve the opportunity to discover who they are and what they can achieve. Under the guidance of adults who care about them and believe in their potential we see every interaction with young people as an opportunity for learning and development.

-Health - Three of the best fitness centers in the area available to members, an on site athletic trainer, personal trainers, and 75 of the best trained and educated fitness professionals around. We also manage the Teledyne Brown company fitness center and program as well as the ADTRAN company fitness center and programs. Provide corporate discounts to companies willing to invest in their employees' health.

-Social Responsibility - The Y provided care for more than 230 children enrolled in YMCA Preschool and more than 1,000 school-age children enrolled in Afterschool and Camp programs. The YMCA was once again selected to provide the State of Alabama's First Class Pre-K program by the Office of School Readiness through its Downtown, Northwest and Southeast Preschools. Y Preschools collaborated with the North Alabama Medical Reserve Corps to offer the 8-week program, "Healthy Families on the Go". Children received

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enrichment through the Creative Arts Mentoring Program and Huntsville Public Library Ready Readers.

GO! Kids, a youth health initiative designed to combat childhood obesity, was offered in spring and fall at both Hogan and Southeast Family Ys. The 8-week program is free to children 7 to 12 years of age, and membership in the Y was not required. So far, more than 320 children have participated.

The Downtown Express Y launched a successful Functional Assessment program that allowed members to have their current level of activity assessed by a personal trainer prior to beginning an exercise program which was then tailored specifically to address each participating member's goals.

The Southeast Family Y built its first Community Garden in cooperation with Eagle Scout Nathan Lawson, members and local businesses and the Hogan Family YMCA harvested more than 100 lbs. of organic vegetables and fruit from its chemical-free Community Garden. More than 500 Summer Campers helped plant and harvest the bounty. The Hogan Y collaborated with the Madison Chamber of Commerce to host the 21st Annual Madison Business Expo hosting over 2,500 guests and hosted the CP3 study through the Cancer Society in 2013.

The Y provided scholarships to 33 children of military families at camp Cha-La-Kee which also hosted numerous church and civic groups including U.S. Special Sportsmen camp for children with life threatening disease and Camp Sugar-free at Chalakee for children with diabetes.

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-Quality of life - The YMCA brings a quality of life to the area with service to over 8% of the available market, provides services that are not being met by others, provides over \$34,000,000 in facilities and properties that aimed at improving quality of life, is open to all no matter their race, religion, economic status, etc. and never turns anyone away from service due to lack of resources. The Heart of the Valley YMCA is comprised of three program centers, Southeast Huntsville, Downtown Huntsville, and Madison as well as three licensed preschool centers in Southeast, Downtown and Northwest Huntsville, and 64 acre Camp Chalakee on Lake Guntersville in Marshall County.

Each Year the YMCA hosts a number of events aimed at community awareness and fundraising activities for the YMCA programs.

Soggy Seals Outdoor Triathlon

Back to School Bash!

Southeast YMCA Indoor Mini-Triathlon

Healthy Kids Day

Heart of the Valley YMCA Golf Tournament

The Heart of the Valley YMCA collaborates with many community based organizations including governmental agencies, non-profits, some for profits and foundations.

United Way - The YMCA is a United Way Agency

Food Bank - for the Nutrition on Weekends program and for Child development Services meals

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City of Madison - Hogan YMCA, Splash Program, Chamber of Commerce

City of Huntsville - Downtown YMCA, Chamber of Commerce, Healthy Kids Day

Madison and Huntsville City Schools - After School programs, Splash

Program, Sports sponsorships, teacher development program for Y preschool teachers

PNC Bank - Adopted our preschool programs and provides volunteers, needed supplies and equipment as well as grant support

Iberia Bank - Child Development Golf Tournament

Dept. of Defense and related groups - Military aquatic training facilities, Deployed memberships, deployment meetings, Veterans Prayer Breakfast, recognitions

Hope Place - referrals, facility use, child care

Huntsville Hospital & Juvenile Diabetes - Sugar Free at Chalakee - camp for kids with diabetes

United Southern Sportsman Association - Camp for kids with cancer

Boy Scouts, Boys and Girls Club, Native Sons and Daughters, Autism Society - camp and facility use

Life's Journey Church - Hosted at Southeast YMCA

Boeing, Teledyne Brown, Adtran, Northrop Grumman - fitness programs and facility/program management, Scholarship Event sponsors

HEALS - Support of kids without access to medical care

Junior League, Veterans Coalition, Margarita Society and similar organizations - Christmas gift program for Child Care, golf tournament for scholarships, Christmas Bear program, Veteran's Prayer Breakfast

Form 990, Part III, Line 4a - First Accomplishment

assistance to people who otherwise would have faced economic barriers to

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participation.

Form 990, Part III, Line 4b - Second Accomplishment

available to all. Expenses include subsidies and direct financial assistance that make participation possible for 80 percent of the young people we engage.

Form 990, Part III, Line 4c - Third Accomplishment

strokes, and train them in the use of basic rescue equipment and techniques during the school day as a part of the third grade curriculum. The program's mission is to decrease the number of water accidents, provide access to minority students, and support a healthy lifestyle through physical activities like swimming. The vision is that all 3rd grade students will learn how to swim, identify and safely respond to a drowning incident. We integrate literacy components into the swimming lessons, to reduce out-of-class time and to maximize learning during travel time. Classes meet the state requirements for Physical Education standards. (K-6 students receive 30 minutes a day.)

Youth Programs which includes youth sports, out of school activities and home school programs as well is a mainstay at the YMCA. We have over 4000 kids a year that participate in sports, swimming, child watch, health and fitness, youth obesity prevention and many other programs for kids.

The Catch Kids program is a targeted program to reduce and ultimately eliminate youth obesity in Alabama. Working with other YMCAs in the Alabama Alliance of YMCA focus on exercise, proper diet and education in

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the area of general health is provided through the schools, on site at the YMCA and in churches.

All program content strives to better develop the whole child and includes activities that instill the values of caring, honesty, respect and responsibility in children.

Form 990, Part III, Line 4d - All Other Accomplishment

Camp Chalakee is a residential designed camp for weeklong summer programs as well as off season retreats and activities by church groups, other community service agencies, and the Native Sons and Daughters program for children and their dads to build a closer relationship.

The goal of every person who participates in any way at Camp Chalakee is to gain a spiritual awareness of themselves, other participants and nature, develop a strong sense of character especially in the areas of honest, respect, responsibility and caring, and leave camp a little better person than when they first arrived.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990

The YMCA Finance Committee and Executive committee met on June 26, 2014 to review and approve the Form 990 Tax Return for the 2013 return.

The final approval for the Form 990 was by the Board of Directors meeting on June 30, 2014 using guidelines established by Practitioners Publishing Company.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

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The Organization monitors and enforces compliance with the conflict of interest policy by the annual completion of a Conflict of Interest Questionnaire by all Board members which is then reviewed.

Form 990, Part VI, Line 15a - Compensation Process for Top Official

The YMCA of the USA Human Resources and Talent Management Task Force, a subcommittee of the YMCA of the USA Board of Directors, annually establishes recommended salary administration guidelines for YMCAs to use in budget planning. The Task Force bases its guidelines on a review of current salary trends in YMCAs and other organizations. One key responsibility of the Task Force is to identify methods for volunteers and staff to consider in the development and maintenance of effective salary administration programs in their respective associations. The Task Force reviews current salary administration trends in YMCAs and in other organizations throughout the country in both the for-profit and nonprofit sectors. Those trends are then applied to establish recommended guidelines for YMCAs to use in budget planning. The group is assisted in this task by external consultants from a leading public accounting firm, RSM McGladrey, Inc. The task force develops a merit pool increase and guidelines for implementation based on the Hay Plan utilizing job descriptions and point values as well as the utilization of YMCA budget size and responsibility for positions from CEO level to other pointed professional positions. The YMCA of Metropolitan Huntsville staff and volunteers use these guidelines in the budgeting process, then, recommendations are made in the budget and discussed among the Executive and Finance Committee then approved by the full Board of Directors.

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Form 990, Part VI, Line 15b - Compensation Process for Officers

See 15a

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

Financial Statements are available on Guidestar and by request. Governing documents and conflict of interest and other policies are available by request.

Form 990, Part XI, Line 9 - Reconciliation of Changes - Other

Losses from uncollectible pledges from prior years \$ -145,600

Form **990****Two Year Comparison Report****2012 & 2013**

For calendar year 2013, or tax year beginning , ending

Name

Taxpayer Identification Number

**Young Men's Christian Association
of Metropolitan Huntsville Alabama****58-2058795**

		2012	2013	Differences
Revenue	1. Contributions, gifts, grants	1. 349,161	329,739	-19,422
	2. Membership dues and assessments	2.		
	3. Government contributions and grants	3. 73,260	73,426	166
	4. Program service revenue	4. 7,837,588	7,569,436	-268,152
	5. Investment income	5. 9,397	5,964	-3,433
	6. Proceeds from tax exempt bonds	6.		
	7. Net gain or (loss) from sale of assets other than inventory	7. -682	-8,761	-8,079
	8. Net income or (loss) from fundraising events	8. -31,411	-33,810	-2,399
	9. Net income or (loss) from gaming	9.		
	10. Net gain or (loss) on sales of inventory	10.		
	11. Other revenue	11. 53,462		-53,462
	12. Total revenue. Add lines 1 through 11	12. 8,290,775	7,935,994	-354,781
Expenses	13. Grants and similar amounts paid	13.		
	14. Benefits paid to or for members	14.		
	15. Compensation of officers, directors, trustees, etc.	15. 293,220	318,633	25,413
	16. Salaries, other compensation, and employee benefits	16. 3,216,736	3,223,906	7,170
	17. Professional fundraising fees	17.		
	18. Other professional fees	18. 20,095	29,807	9,712
	19. Occupancy, rent, utilities, and maintenance	19. 695,592	691,072	-4,520
	20. Depreciation and Depletion	20. 1,109,616	1,078,166	-31,450
	21. Other expenses	21. 2,761,196	2,624,791	-136,405
	22. Total expenses. Add lines 13 through 21	22. 8,096,455	7,966,375	-130,080
	23. Excess or (Deficit). Subtract line 22 from line 12	23. 194,320	-30,381	-224,701
Other Information	24. Total exempt revenue	24. 8,290,775	7,935,994	-354,781
	25. Total unrelated revenue	25.		
	26. Total excludable revenue	26. 8,290,775	7,935,994	-354,781
	27. Total assets	27. 27,158,823	26,423,177	-735,646
	28. Total liabilities	28. 20,640,665	20,081,000	-559,665
	29. Retained earnings	29. 6,518,158	6,342,177	-175,981
	30. Number of voting members of governing body	30. 29	26	
	31. Number of independent voting members of governing body	31. 27	25	
	32. Number of employees	32. 575	590	
	33. Number of volunteers	33. 368	400	

Form 990T	Two Year Comparison Report	2012 & 2013
For calendar year 2013, or tax year beginning _____, ending _____		

Name Young Men's Christian Association of Metropolitan Huntsville Alabama	Taxpayer Identification Number 58-2058795
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		2012	2013	Differences	
Revenue	1. Gross profit/loss on business activities	1.			
	2. Capital gains/losses	2.			
	3. Income/loss from partnerships and S corporations	3.			
	4. Rental income (net of expense)	4.			
	5. Unrelated debt-financed income (net of expense)	5.			
	6. Interest, and other income from controlled organizations (net of expense)	6.			
	7. Investment income of specific organizations (net of expense)	7.			
	8. Exploited exempt activity income (net of expense)	8.			
	9. Advertising income (net of expense)	9.			
	10. Other income	10.			
	11. Total trade or business income. Combine lines 1 through 10	11.			
Expenses	12. Compensation of officers, directors, and trustees	12.			
	13. Other salaries and wages	13.			
	14. Repairs and maintenance	14.			
	15. Bad debts	15.			
	16. Interest	16.			
	17. Taxes and licenses	17.			
	18. Charitable contributions	18.			
	19. Depreciation and Depletion	19.			
	20. Contributions to deferred compensation plans	20.			
	21. Employee benefit programs	21.			
	22. Other deductions	22.			
	23. Total deductions. Add lines 12 through 22	23.			
	24. Taxable income before NOL. Subtract line 23 from 11	24.			
	25. Net operating loss deduction	25.			
	26. Specific deduction	26.	1,000	1,000	
	27. Unrelated business taxable income.	27.	-1,000	-1,000	
	Tax & Credits	28. Income tax (corporate or trust)	28.		
29. Proxy tax		29.			
30. Alternative minimum tax		30.			
31. Total taxes		31.			
32. Other credits		32.			
33. General business credit		33.			
34. Credit for prior year minimum tax		34.			
35. Total credits		35.			
36. Net tax after credits		36.			
37. Recapture taxes		37.			
38. Total Taxes		38.			
Due/Refund	39. Prior year overpayment and estimated tax payments	39.			
	40. Payment made with extension	40.			
	41. Backup withholding and foreign withholding	41.			
	42. Other payments	42.			
	43. Total payments	43.			
	44. Balance due/(Overpayment)	44.			
	45. Overpayment applied to next year	45.			
	46. Penalties	46.			
	47. Total due/(Refund)	47.			

Form 990	Tax Return History	2013
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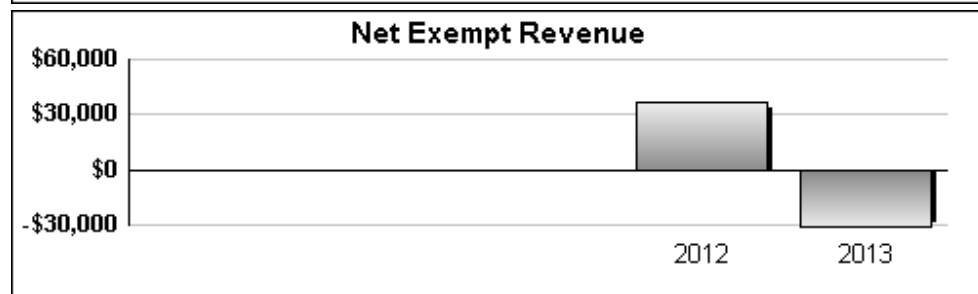
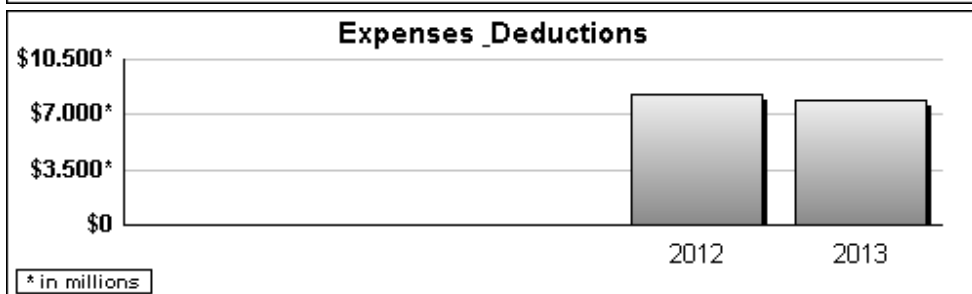
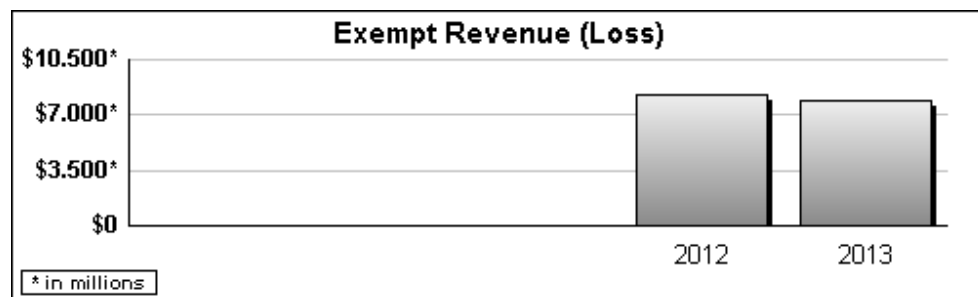
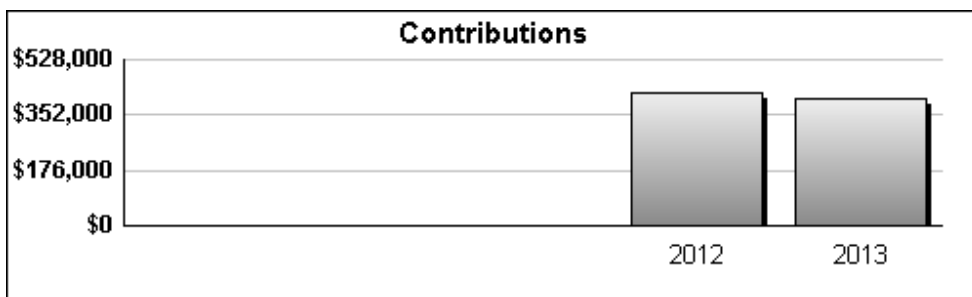
Name Young Men's Christian Association of Metropolitan Huntsville Alabama	Employer Identification Number 58-2058795
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	2009	2010	2011	2012	2013	2014
Contributions, gifts, grants				422,421	403,165	
Membership dues						
Program service revenue				7,837,588	7,569,436	
Capital gain or loss				-682	-8,761	
Investment income				9,397	5,964	
Fundraising revenue (income/loss)				-31,411	-33,810	
Gaming revenue (income/loss)						
Other revenue				53,462		
Total revenue				8,290,775	7,935,994	
Grants and similar amounts paid						
Benefits paid to or for members						
Compensation of officers, etc.				293,220	318,633	
Other compensation				3,374,072	3,223,906	
Professional fees					29,807	
Occupancy costs				695,592	691,072	
Depreciation and depletion				1,109,616	1,078,166	
Other expenses				2,781,291	2,624,791	
Total expenses				8,253,791	7,966,375	
Excess or (Deficit)				36,984	-30,381	
Total exempt revenue				8,290,775	7,935,994	
Total unrelated revenue						
Total excludable revenue				8,290,775	7,935,994	
Total Assets				27,158,823	26,423,177	
Total Liabilities				20,640,665	20,081,000	
Net Fund Balances				6,518,158	6,342,177	

Form 990T	Tax Return History	2013
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Name Young Men's Christian Association of Metropolitan Huntsville Alabama	Employer Identification Number 58-2058795
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	2009	2010	2011	2012	2013	2014
Business activity profit/loss						
Capital gains/losses						
Partner and S Corp gain/loss						
Rental income*						
Debt-financed income*						
Controlled organizations income/interest*						
Investment income, specific organizations*						
Exploited exempt activity income*						
Other income						
Total trade or business income.						
Compensation of officers, ect.						
Other salaries and wages						
Repairs and maintenance						
Bad debts						
Interest						
Taxes and licenses						
Charitable contributions						
Depreciation and Depletion						
Deferred compensation plans						
Employee benefit programs						

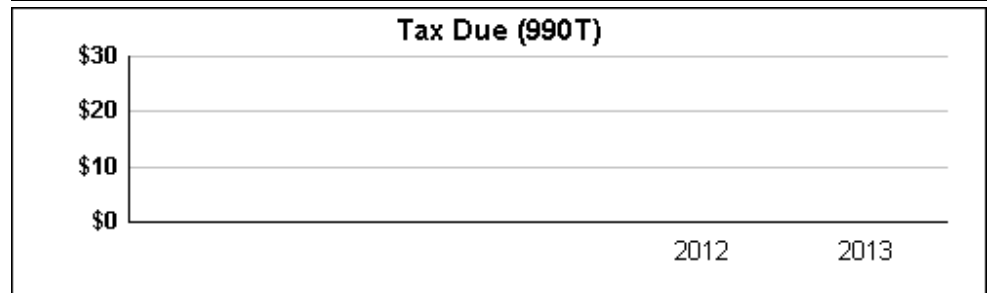
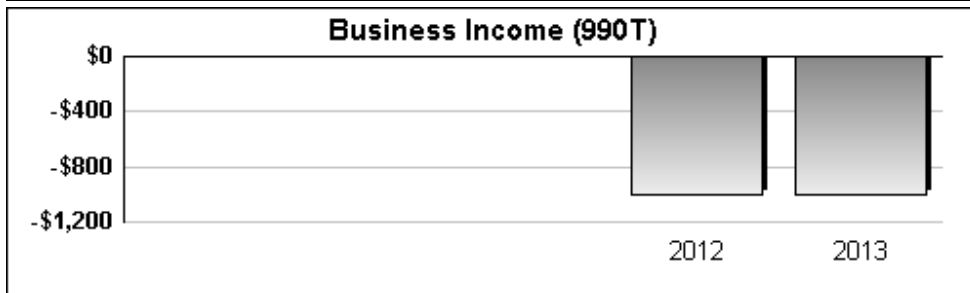
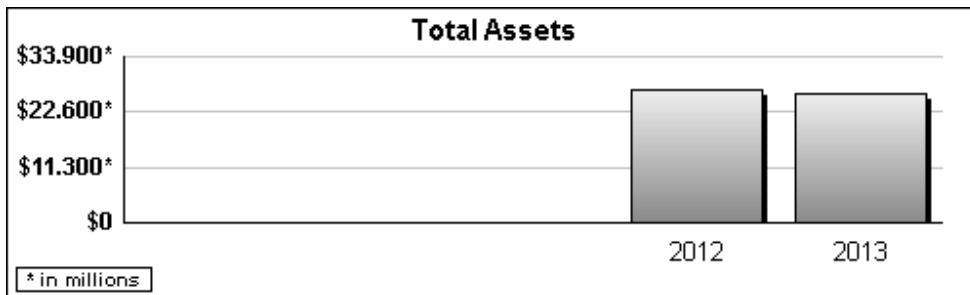


Form 990T	Tax Return History	2013
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Name Young Men's Christian Association of Metropolitan Huntsville Alabama	Employer Identification Number 58-2058795
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	2009	2010	2011	2012	2013	2014
Other deductions						
Net operating loss deduction						
Specific deduction				1,000	1,000	
Income after expense and deductions				-1,000	-1,000	
Income tax (corporate or trust)						
Other taxes						
Total taxes						
General business credit						
Other credits						
Net tax after credits						
Estimated tax payments						
Other payments						
Balance due/Overpayment						

* Income shown net of expenses



Federal Statements**Taxable Interest on Investments**

<u>Description</u>	<u>Amount</u>	<u>Unrelated Business Code</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>Acquired after 6/30/75</u>	<u>US Obs (\$ or %)</u>
Savings interest	\$ 5,964		14			
Total	<u>\$ 5,964</u>					

Federal Statements

Form 990, Part IX, Line 24e - All Other Expenses

<u>Description</u>	<u>Total Expenses</u>	<u>Program Service</u>	<u>Management & General</u>	<u>Fund Raising</u>
National Dues	\$ 104,040	\$ 100,469	\$ 3,571	\$
Transport-camp&child care	67,163	67,163		
Provision for Bad Debt	62,835		62,835	
Miscellaneous	18,303	12,142	6,161	
Dues & Subscriptions	7,715	1,197	6,518	
Licenses & Permits	5,545	5,545		
Total	<u>\$ 265,601</u>	<u>\$ 186,516</u>	<u>\$ 79,085</u>	<u>\$ 0</u>

Federal Statements

Schedule A, Part III, Line 1(e)

<u>Description</u>	<u>Amount</u>
Other	\$ 140,611
United Way Serivces	
Cash Contribution	111,749
Boeing Alabama	
Cash Contribution	10,926
Enfinger Steele Development, Inc.	
Forgiveness of mortgage debt	
Forgiveness of accrued interest	
City of Madison	
Cash Contribution	50,000
Waiver of building permit fees	
David/Ann Hogan	
Cash Contribution	9,400
City of Huntsville	
Cash Contribution	13,140
YMCA State Alliance	
Cash Contribution	10,286
John Hamilton	
Cash Contribution	13,980
Golf Tournament	
Cash Contribution	17,912
Over-the-Edge	
Cash Contribution	25,161
Total	<u>\$ 403,165</u>

Federal Statements

Schedule A, Part III, Line 2(e)

Description	Amount
Athletics/Aquatics Programs	\$ 551,849
Childcare	1,308,551
Camp Activities	46,736
Activity Room	25,504
Childcare program-state	481,085
Fitness center	5,155,711
Golf Tournament	4,940
Car raffle	
Over-the-Edge	
Facility Weatherly Rd	
Total	<u>\$ 7,574,376</u>

Schedule A, Part III, Line 7a - Support from Disqualified Persons

Donor Name	2009	2010	2011	2012	2013
David & Ann Hogan	\$ 25,000		\$ 6,000	\$ 4,500	\$ 9,400
Enfinger& Steele Developement					
Julie & David Herbert					
Tony & Deone Keane					
Stephanie Hogan					
Gary Wolfe, BOD		10,000			
Steve Brown, BOD			5,000		
Brett Crain, BOD			5,000		
Hamilton, John, BOD				9,000	9,580
Sanderford, Howard, BOD				7,000	
Mathis, David, BOD				1,496	
Burcham, Steve, BOD				1,000	1,500
Seeley, Scott, BOD				1,000	1,000
Wagoner, Brian, BOD				1,000	
Caudle, Jim, BOD				1,000	1,000
Wolfe, Gary, BOD				500	
Adcox, Lee, BOD				500	
Evans, Steuart, BOD				500	2,500
McAdams, Todd, BOD				500	
Thrasher, David, BOD				250	500

Federal Statements

Schedule A, Part III, Line 7a - Support from Disqualified Persons (continued)

Donor Name	2009	2010	2011	2012	2013
Perry, Foster, BOD	\$	\$	\$	\$	\$ 1,200
Wisner, Michael, BOD					1,000
Eyster, John, BOD					2,000
Thornton, Jimmy, BOD					1,700
Mounts, Scott, CEO					504
Gossett, James, COO					720
Smith, Denise, CFO					250
Total	\$ 25,000	\$ 10,000	\$ 16,000	\$ 30,246	\$ 32,854

Federal Statements**Schedule A, Part III, Line 7b - Excess Gross Receipts**

<u>Donor Name</u>	<u>Total</u>	<u>Excess</u>
State of Alabama	\$	\$
2013	481,085	401,250
2012	504,406	421,103
2011	572,762	496,123
2010	509,205	455,286
Total	\$ <u>2,067,458</u>	\$ <u>1,773,762</u>

Federal Statements

Schedule A, Part III, Line 10a(e)

<u>Description</u>	<u>Amount</u>
Savings interest	\$ 5,964
Camp Cha-la-kee	
Total	<u>\$ 5,964</u>

Schedule A, Part III, Line 11

<u>Description</u>	<u>Amount</u>
Rental tax refund	\$
YMCA National Dues Credit	
Total	<u>\$ 0</u>