Form **990** | **Return of Organization Exempt From Income Tax** | OMB No. 1545-0047 **2005**

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

Department of the Treasury Internal Revenue Service ▶ The organization may have to use a copy of this return to satisfy state reporting requirements. **Open to Public Inspection**

A For the 2005 calendar year, or tax year beginning JUL 1, 2005 and ending JUN 30, 2006

B Check if applicable: Address change; Name change; Initial return; Final return; Amended return; Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization: NASHVILLE YOUNG WOMEN'S CHRISTIAN ASSOCIATION

Number and street (or P.O. box if mail is not delivered to street address): 1608 WOODMONT BLVD. Room/suite

City or town, state or country, and ZIP + 4: NASHVILLE, TN 37215

D Employer identification number: 62-0475702

E Telephone number: (615) 269-9922

F Accounting method: ☐ Cash ☒ Accrual ☐ Other (specify) ▶

● Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

H and I are not applicable to section 527 organizations.

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

H(b) If "Yes," enter number of affiliates ▶ N/A

H(c) Are all affiliates included? N/A ☐ Yes ☐ No (If "No," attach a list.)

H(d) Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☒ No

I Group Exemption Number ▶ N/A

G Website: ▶ WWW.THEYW.COM

J Organization type (check only one) ▶ ☒ 501(c) (3) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

K Check here ▶ ☐ if the organization's gross receipts are normally not more than $25,000. The organization need not file a return with the IRS; but if the organization chooses to file a return, be sure to file a complete return. Some states require a complete return.

M Check ▶ ☐ if the organization is **not** required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 5,531,398.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances

Revenue

1	Contributions, gifts, grants, and similar amounts received:				
a	Direct public support	1a	868,117.		
b	Indirect public support	1b	280,306.		
c	Government contributions (grants)	1c	1,427,888.		
d	Total (add lines 1a through 1c) (cash $ 2,514,411. noncash $ 61,900.)			1d	2,576,311.
2	Program service revenue including government fees and contracts (from Part VII, line 93)			2	35,253.
3	Membership dues and assessments			3	
4	Interest on savings and temporary cash investments			4	89,972.
5	Dividends and interest from securities			5	
6 a	Gross rents	6a			
b	Less: rental expenses	6b			
c	Net rental income or (loss) (subtract line 6b from line 6a)			6c	
7	Other investment income (describe ▶)			7	

		(A) Securities		(B) Other		
8 a	Gross amount from sales of assets other than inventory	2,342,483.	8a			
b	Less: cost or other basis and sales expenses	2,320,606.	8b			
c	Gain or (loss) (attach schedule)	21,877.	8c			
d	Net gain or (loss) (combine line 8c, columns (A) and (B)) STMT 2				8d	21,877.

9	Special events and activities (attach schedule). If any amount is from gaming, check here ▶ ☐				
a	Gross revenue (not including $ 242,156. of contributions reported on line 1a)	9a	324,196.		
b	Less: direct expenses other than fundraising expenses	9b	129,589.		
c	Net income or (loss) from special events (subtract line 9b from line 9a) SEE STATEMENT 3			9c	194,607.
10 a	Gross sales of inventory, less returns and allowances	10a			
b	Less: cost of goods sold	10b			
c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)			10c	
11	Other revenue (from Part VII, line 103)			11	163,183.
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)			12	3,081,203.

Expenses

13	Program services (from line 44, column (B))	13	2,463,443.
14	Management and general (from line 44, column (C))	14	460,385.
15	Fundraising (from line 44, column (D))	15	318,520.
16	Payments to affiliates (attach schedule)	16	
17	Total expenses (add lines 16 and 44, column (A))	17	3,242,348.

Net Assets

18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	<161,145.>
19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	5,733,368.
20	Other changes in net assets or fund balances (attach explanation) SEE STATEMENT 4	20	84,401.
21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	5,656,624.

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Part II Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule) (cash $ 13,503. noncash $ 0.) If this amount includes foreign grants, check here ▶ ☐	22	13,503.	13,503.	STATEMENT 6	
23 Specific assistance to individuals (attach schedule)	23				
24 Benefits paid to or for members (attach schedule)	24				
25 Compensation of officers, directors, etc.**	25	401,493.	334,256.	41,115.	26,122.
26 Other salaries and wages	26	1,342,244.	1,115,331.	137,501.	89,412.
27 Pension plan contributions	27	32,000.	26,992.	3,368.	1,640.
28 Other employee benefits	28	101,560.	85,666.	10,690.	5,204.
29 Payroll taxes	29	148,662.	125,396.	15,648.	7,618.
30 Professional fundraising fees	30				
31 Accounting fees	31				
32 Legal fees	32				
33 Supplies	33	70,746.	57,632.	7,920.	5,194.
34 Telephone	34				
35 Postage and shipping	35				
36 Occupancy	36	196,887.	150,266.	31,581.	15,040.
37 Equipment rental and maintenance	37	107,682.	44,761.	21,089.	41,832.
38 Printing and publications	38	10,504.	3,761.	1,452.	5,291.
39 Travel	39	20,503.	17,223.	3,069.	211.
40 Conferences, conventions, and meetings	40	76,862.	17,123.	41,024.	18,715.
41 Interest	41	73,386.	73,386.		
42 Depreciation, depletion, etc. (attach schedule)	42	217,598.	133,442.	77,628.	6,528.
43 Other expenses not covered above (itemize): a PROFESSIONAL FEES	43a	143,529.	82,468.	18,634.	42,427.
b SPECIFIC ASSISTANCE	43b				
c ADMINISTRATION	43c	37,937.	27,059.	10,878.	0.
d INSURANCE	43d	45,657.	33,371.	6,707.	5,579.
e MISCELLANEOUS	43e	101,517.	37,242.	22,059.	42,216.
f GRANT EXPENSES	43f	46,838.	46,838.	0.	0.
g TELEPHONE & POSTAGE	43g	53,240.	37,727.	10,022.	5,491.
44 **Total functional expenses.** Add lines 22 through 43. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44	3,242,348.	2,463,443.	460,385.	318,520.

Joint Costs. Check ▶ ☐ if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ▶ ☐ Yes ☒ No

If "Yes," enter (i) the aggregate amount of these joint costs $ N/A ; (ii) the amount allocated to Program services $ N/A ;

(iii) the amount allocated to Management and general $ N/A ; and (iv) the amount allocated to Fundraising $ N/A

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** SEE STATEMENT 5

523011
02-03-06

Part III Statement of Program Service Accomplishments *(See the instructions.)*

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
What is the organization's primary exempt purpose? ▶ SEE STATEMENT 9	
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	
a SEE STATEMENT 7	
(Grants and allocations $ 12,112.) If this amount includes foreign grants, check here ▶ ☐	767,786.
b YOUTH SERVICES: YOUTH ADVANTAGE HELPS PREPARE YOUNG PEOPLE FOR INDEPENDENCE THROUGH JOB PREPARATION WORKSHOPS AND JOB PLACEMENT. THE SERVICES ARE PROVIDED ON A SLIDING SCALE FEE.	
(Grants and allocations $) If this amount includes foreign grants, check here ▶ ☐	95,639.
c SEE STATEMENT 8	
(Grants and allocations $ 1,391.) If this amount includes foreign grants, check here ▶ ☐	1,600,018.
d	
(Grants and allocations $) If this amount includes foreign grants, check here ▶ ☐	
e Other program services (attach schedule)	
(Grants and allocations $) If this amount includes foreign grants, check here ▶ ☐	
f Total of Program Service Expenses (should equal line 44, column (B), Program services) ▶	2,463,443.

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Part IV Balance Sheets *(See the instructions.)*

Note: *Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.*			(A) Beginning of year		(B) End of year
Assets					
45 Cash - non-interest-bearing			199,456.	45	177,251.
46 Savings and temporary cash investments			1,061,678.	46	835,358.
47 a Accounts receivable	47a				
b Less: allowance for doubtful accounts	47b			47c	
48 a Pledges receivable	48a	100,913.			
b Less: allowance for doubtful accounts	48b	7,530.	161,780.	48c	93,383.
49 Grants receivable			137,728.	49	123,662.
50 Receivables from officers, directors, trustees, and key employees				50	
51 a Other notes and loans receivable	51a				
b Less: allowance for doubtful accounts	51b			51c	
52 Inventories for sale or use				52	
53 Prepaid expenses and deferred charges			74,964.	53	68,239.
54 Investments - securities STMT 12 ▶ ☐ Cost ☒ FMV			2,910,585.	54	2,237,757.
55 a Investments - land, buildings, and equipment: basis	55a				
b Less: accumulated depreciation	55b			55c	
56 Investments - other SEE STATEMENT 10			0.	56	34,838.
57 a Land, buildings, and equipment: basis	57a	5,805,115.			
b Less: accumulated depreciation	57b	2,260,433.	3,717,791.	57c	3,544,682.
58 Other assets (describe ▶)				58	
59 **Total assets** (must equal line 74). Add lines 45 through 58			8,263,982.	59	7,115,170.
Liabilities					
60 Accounts payable and accrued expenses			114,095.	60	127,142.
61 Grants payable			16,884.	61	13,196.
62 Deferred revenue			7,647.	62	13,647.
63 Loans from officers, directors, trustees, and key employees				63	
64 a Tax-exempt bond liabilities				64a	
b Mortgages and other notes payable STMT 11			2,391,988.	64b	1,304,561.
65 Other liabilities (describe ▶)				65	
66 **Total liabilities.** Add lines 60 through 65			2,530,614.	66	1,458,546.
Net Assets or Fund Balances					
Organizations that follow SFAS 117, check here ▶ ☒ and complete lines 67 through 69 and lines 73 and 74.					
67 Unrestricted			3,390,033.	67	3,689,362.
68 Temporarily restricted			570,048.	68	192,668.
69 Permanently restricted			1,773,287.	69	1,774,594.
Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 70 through 74.					
70 Capital stock, trust principal, or current funds				70	
71 Paid-in or capital surplus, or land, building, and equipment fund				71	
72 Retained earnings, endowment, accumulated income, or other funds				72	
73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21)			5,733,368.	73	5,656,624.
74 **Total liabilities and net assets/fund balances.** Add lines 66 and 73			8,263,982.	74	7,115,170.

Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions.)

a	Total revenue, gains, and other support per audited financial statements			a	3,192,958.
b	Amounts included on line a but not on Part I, line 12:				
1	Net unrealized gains on investments	b1	84,401.		
2	Donated services and use of facilities	b2	27,354.		
3	Recoveries of prior year grants	b3			
4	Other (specify):	b4			
	Add lines b1 through b4			b	111,755.
c	Subtract line b from line a			c	3,081,203.
d	Amounts included on Part I, line 12, but not on line a:				
1	Investment expenses not included on Part I, line 6b	d1			
2	Other (specify):	d2			
	Add lines d1 and d2			d	0.
e	**Total revenue** (Part I, line 12). Add lines c and d ▶			e	3,081,203.

Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

a	Total expenses and losses per audited financial statements			a	3,269,702.
b	Amounts included on line a but not on Part I, line 17:				
1	Donated services and use of facilities	b1	27,354.		
2	Prior year adjustments reported on Part I, line 20	b2			
3	Losses reported on Part I, line 20	b3			
4	Other (specify):	b4			
	Add lines b1 through b4			b	27,354.
c	Subtract line b from line a			c	3,242,348.
d	Amounts included on Part I, line 17, but not on line a:				
1	Investment expenses not included on Part I, line 6b	d1			
2	Other (specify):	d2			
	Add lines d1 and d2			d	0.
e	**Total expenses** (Part I, line 17). Add lines c and d ▶			e	3,242,348.

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
PATRICIA SHEA 1608 WOODMONT BLVD NASHVILLE, TN 37215	PRESIDENT & CEO 50.00	107,000.	13,577.	0.
PATRICIA MERRITT 1608 WOODMONT BLVD NASHVILLE, TN 37215	CFO 50.00	78,000.	10,909.	0.
LINDA BALLEW 1608 WOODMONT BLVD NASHVILLE, TN 37215	VP - DEVELOPMENT 50.00	65,000.	8,231.	0.
JAN SHIPP 1608 WOODMONT BLVD NASHVILLE, TN 37215	VP - HUMAN RESOURCES 50.00	56,787.	11,860.	0.
SEE ATTACHED LIST OF NONCOMPENSATED BOARD OF DIRECTORS	0.00	0.	0.	0.

Part V-A Current Officers, Directors, Trustees, and Key Employees *(continued)*

			Yes	No
75 a	Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings ▶ 33			
b	Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s)	75b		X
c	Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to this organization through common supervision or common control?	75c		X
	Note. Related organizations include section 509(a)(3) supporting organizations. If "Yes," attach a statement that identifies the individuals, explains the relationship between this organization and the other organization(s), and describes the compensation arrangements, including amounts paid to each individual by each related organization.			
d	Does the organization have a written conflict of interest policy?	75d	X	

Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

(A) Name and address	(B) Loans and Advances	(C) Compensation	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
JANE PATE 1608 WOODMONT BLVD NASHVILLE, TN 37215	0.	45,573.	4,556.	0.

Part VI Other Information *(See the instructions.)*

			Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.	77		X
78 a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?	78a		X
b	If "Yes," has it filed a tax return on **Form 990-T** for this year? N/A	78b		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79		X
80 a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a		X
b	If "Yes," enter the name of the organization ▶ N/A and check whether it is ☐ exempt or ☐ nonexempt			
81 a	Enter direct or indirect political expenditures. (See line 81 instructions.) 81a 0.			
b	Did the organization file **Form 1120-POL** for this year?	81b		X

Part VI Other Information *(continued)*

			Yes	No
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X	
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.) 82b 27,354.			
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? N/A	84b		
85	*501(c)(4), (5), or (6) organizations.* a Were substantially all dues nondeductible by members? N/A	85a		
b	Did the organization make only in-house lobbying expenditures of $2,000 or less? N/A	85b		
	If "Yes" was answered to either 85a or 85b, **do not** complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.			
c	Dues, assessments, and similar amounts from members 85c N/A			
d	Section 162(e) lobbying and political expenditures 85d N/A			
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e N/A			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f N/A			
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? N/A	85g		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? N/A	85h		
86	*501(c)(7) organizations.* Enter: a Initiation fees and capital contributions included on line 12 86a N/A			
b	Gross receipts, included on line 12, for public use of club facilities 86b N/A			
87	*501(c)(12) organizations.* Enter: a Gross income from members or shareholders 87a N/A			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 87b N/A			
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88		X
89 a	*501(c)(3) organizations.* Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ 0. ; section 4912 ▶ 0. ; section 4955 ▶ 0.			
b	*501(c)(3) and 501(c)(4) organizations.* Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b		X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ 0.			
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization ▶ 0.			

90 a List the states with which a copy of this return is filed ▶ TN

b Number of employees employed in the pay period that includes March 12, 2005 90b 71

91 a The books are in care of ▶ PATRICIA A. MERRITT Telephone no. ▶ (615)269-3180

Located at ▶ 1608 WOODMONT BLVD, NASHVILLE, TN ZIP + 4 ▶ 37215

			Yes	No
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	91b		X
	If "Yes," enter the name of the foreign country ▶ N/A See the instructions for exceptions and filing requirements for **Form TD F 90-22.1**, Report of Foreign Bank and Financial Accounts.			
c	At any time during the calendar year, did the organization maintain an office outside of the United States?	91c		X
	If "Yes," enter the name of the foreign country ▶ N/A			

92 *Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of* **Form 1041** - Check here ▶ ☐
and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 92 N/A

Part VII Analysis of Income-Producing Activities (See the instructions.)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income (A) Business code	Unrelated business income (B) Amount	Excluded by section 512, 513, or 514 (C) Exclusion code	Excluded by section 512, 513, or 514 (D) Amount	(E) Related or exempt function income
93 Program service revenue:					
a EXERCISE CLASS FEES					27,865.
b COUNSELING FEES					7,388.
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	89,972.	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	21,877.	
101 Net income or (loss) from special events			05	194,607.	
102 Gross profit or (loss) from sales of inventory					
103 Other revenue:					
a MISCELLANEOUS REVENUE			01	163,183.	
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0.		469,639.	35,253.

105 Total (add line 104, columns (B), (D), and (E)) ▶ 504,892.

Note: *Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.*

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)

Line No. ▼	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
93A	PROVIDES FACILITIES IN ORDER TO PROMOTE PHYSICAL DEVELOPMENT OF WOMEN
93B	THE CLASSES AND CASE MANAGEMENT ACTIVITIES PROVIDE JOB READINESS AND
	LIFE SKILLS.

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
N/A	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

Note: *If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).*

Please Sign Here

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. Declar[ation of preparer (other than officer) is b]ased on all information of which preparer has any knowledge.

▶ Signature of officer Patricia A. Merritt | Date | ▶ Type or print name and title.

Paid Preparer's Use Only

Preparer's signature ▶ Kent Harrell	Date 12/28/06	Check if self-employed ▶ ☒	Preparer's SSN or PTIN
Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ KRAFTCPAS PLLC 555 GREAT CIRCLE ROAD, SUITE 200 NASHVILLE, TN 37228-1310		EIN ▶ Phone no. ▶ (615)242-7351	

523163 02-03-06

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information-(See separate instructions.)

▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

OMB No. 1545-0047

2005

Name of the organization: NASHVILLE YOUNG WOMEN'S CHRISTIAN ASSOCIATION

Employer identification number: 62 0475702

Part I **Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**
(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than $50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
ROBYN MINTON 1608 WOODMONT BOULEVARD, NASHVILLE, T	PROGRAM DIRECTOR 50.00	50,152.	10,910.	0.
Total number of other employees paid over $50,000 ▶	0			

Part II-A **Compensation of the Five Highest Paid Independent Contractors for Professional Services**
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than $50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over $50,000 for professional services ▶ 0		

Part II-B **Compensation of the Five Highest Paid Independent Contractors for Other Services**
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than $50,000	(b) Type of service	(c) Compensation
NONE		
Total number of other contractors receiving over $50,000 for other services ▶ 0		

Part III Statements About Activities (See page 2 of the instructions.)

		Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ $ ______ $ ______ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)	1		X
Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.			
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? *(If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)*			
a Sale, exchange, or leasing of property?	2a		X
b Lending of money or other extension of credit?	2b		X
c Furnishing of goods, services, or facilities?	2c		X
d Payment of compensation (or payment or reimbursement of expenses if more than $1,000)?	2d	X	
e Transfer of any part of its income or assets?	2e		X
3 a Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.)	3a		X
b Do you have a section 403(b) annuity plan for your employees?	3b		X
c During the year, did the organization receive a contribution of qualified real property interest under section 170(h)?	3c		X
4 a Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?	4a		X
b Do you provide credit counseling, debt management, credit repair, or debt negotiation services?	4b		X

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)

The organization is not a private foundation because it is: (Please check only ONE applicable box.)

5 ☐ A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
6 ☐ A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
7 ☐ A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
8 ☐ A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
9 ☐ A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). **Enter the hospital's name, city, and state** ▶ ______
10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
11a ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
11b ☐ A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
12 ☐ 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 charitable, etc., 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). (Also complete the **Support Schedule** in Part IV-A.)
13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: **(1)** lines 5 through 12 above; or **(2)** sections 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). Check the box that describes the type of supporting organization: ▶ ☐ Type 1 ☐ Type 2 ☐ Type 3

Provide the following information about the supported organizations. (See page 6 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Line number from above

14 ☐ An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instructions.)

Part IV-A **Support Schedule** (Complete only if you checked a box on line 10, 11, or 12.) **Use cash method of accounting.**
Note: *You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.*

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	2,791,935.	3,882,211.	3,348,009.	4,172,263.	14,194,418.
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	22,880.	10,695.	9,778.	20,729.	64,082.
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	79,962.	30,096.	49,642.	81,566.	241,266.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	79,089.	36,484.	SEE STATEMENT 13 5,013.	3,509.	124,095.
23 Total of lines 15 through 22	2,973,866.	3,959,486.	3,412,442.	4,278,067.	14,623,861.
24 Line 23 minus line 17	2,950,986.	3,948,791.	3,402,664.	4,257,338.	14,559,779.
25 Enter 1% of line 23	29,739.	39,595.	34,124.	42,781.	

26 **Organizations described on lines 10 or 11:** a Enter 2% of amount in column (e), line 24 ▶ 26a 291,196.

b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2001 through 2004 exceeded the amount shown in line 26a. **Do not file this list with your return.** Enter the total of all these excess amounts ▶ 26b 103,608.

c Total support for section 509(a)(1) test: Enter line 24, column (e) ▶ 26c 14,559,779.

d Add: Amounts from column (e) for lines: 18 241,266. 19 ______ 22 124,095. 26b 103,608. ▶ 26d 468,969.

e Public support (line 26c minus line 26d total) ▶ 26e 14,090,810.

f **Public support percentage (line 26e (numerator) divided by line 26c (denominator))** ▶ 26f 96.7790 %

27 **Organizations described on line 12:** a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." **Do not file this list with your return.** Enter the sum of such amounts for each year: N/A

(2004) ________ (2003) ________ (2002) ________ (2001) ________

b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the **larger** of **(1)** the amount on line 25 for the year or **(2)** $5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) **Do not file this list with your return.** After computing the difference between the amount received and the larger amount described in **(1)** or **(2)**, enter the sum of these differences (the excess amounts) for each year: N/A

(2004) ________ (2003) ________ (2002) ________ (2001) ________

c Add: Amounts from column (e) for lines: 15 ______ 16 ______ 17 ______ 20 ______ 21 ______ ▶ 27c N/A

d Add: Line 27a total ______ and line 27b total ______ ▶ 27d N/A

e Public support (line 27c total minus line 27d total) ▶ 27e N/A

f Total support for section 509(a)(2) test: Enter amount on line 23, column (e) ▶ 27f N/A

g **Public support percentage (line 27e (numerator) divided by line 27f (denominator))** ▶ 27g N/A %

h **Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))** ▶ 27h N/A %

28 **Unusual Grants:** For an organization described in line 10, 11, or 12 that received any unusual grants during 2001 through 2004, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. **Do not file this list with your return.** Do not include these grants in line 15.

NONE

Part V Private School Questionnaire (See page 7 of the instructions.) N/A
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

			Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31		
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
32	Does the organization maintain the following:			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d		
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			
33	Does the organization discriminate by race in any way with respect to:			
a	Students' rights or privileges?	33a		
b	Admissions policies?	33b		
c	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
e	Educational policies?	33e		
f	Use of facilities?	33f		
g	Athletic programs?	33g		
h	Other extracurricular activities?	33h		
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b	Has the organization's right to such aid ever been revoked or suspended?	34b		
	If you answered "Yes" to either 34a or b, please explain using an attached statement.			
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35		

Part VI-A **Lobbying Expenditures by Electing Public Charities** (See page 9 of the instructions.) N/A
(To be completed ONLY by an eligible organization that filed Form 5768)

Check ▶ a ☐ if the organization belongs to an affiliated group. Check ▶ b ☐ if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
		N/A	
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36		
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37		
38 Total lobbying expenditures (add lines 36 and 37)	38		
39 Other exempt purpose expenditures	39		
40 Total exempt purpose expenditures (add lines 38 and 39)	40		
41 Lobbying nontaxable amount. Enter the amount from the following table -			
If the amount on line 40 is - / The lobbying nontaxable amount is -			
Not over $500,000 ... 20% of the amount on line 40			
Over $500,000 but not over $1,000,000 ... $100,000 plus 15% of the excess over $500,000			
Over $1,000,000 but not over $1,500,000 ... $175,000 plus 10% of the excess over $1,000,000	41		
Over $1,500,000 but not over $17,000,000 ... $225,000 plus 5% of the excess over $1,500,000			
Over $17,000,000 ... $1,000,000			
42 Grassroots nontaxable amount (enter 25% of line 41)	42		
43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43		
44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44		

Caution: *If there is an amount on either line 43 or line 44, you must file Form 4720.*

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 11 of the instructions.)

	Lobbying Expenditures During 4-Year Averaging Period				N/A
Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
45 Lobbying nontaxable amount					0.
46 Lobbying ceiling amount (150% of line 45(e))					0.
47 Total lobbying expenditures					0.
48 Grassroots nontaxable amount					0.
49 Grassroots ceiling amount (150% of line 48(e))					0.
50 Grassroots lobbying expenditures					0.

Part VI-B **Lobbying Activity by Nonelecting Public Charities**
(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.) N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines c through h.)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (Add lines c through h.)			0.

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 12 of the instructions.)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

		Yes	No
a Transfers from the reporting organization to a noncharitable exempt organization of:			
(i) Cash	51a(i)		X
(ii) Other assets	a(ii)		X
b Other transactions:			
(i) Sales or exchanges of assets with a noncharitable exempt organization	b(i)		X
(ii) Purchases of assets from a noncharitable exempt organization	b(ii)		X
(iii) Rental of facilities, equipment, or other assets	b(iii)		X
(iv) Reimbursement arrangements	b(iv)		X
(v) Loans or loan guarantees	b(v)		X
(vi) Performance of services or membership or fundraising solicitations	b(vi)		X
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	c		X

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received: N/A

(a) Line no.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

52 a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ▶ ☐ Yes ☒ No

b If "Yes," complete the following schedule: N/A

(a) Name of organization	(b) Type of organization	(c) Description of relationship

523151
02-03-06

FOOTNOTES STATEMENT 1

LAND, BUILDINGS AND EQUIPMENT ARE STATED AT COST. DEPRECIATION IS CALCULATED USING THE STRAIGHT-LINE METHOD TO ALLOCATE THE COST OF THE DEPRECIABLE ASSETS OVER THEIR ESTIMATED USEFUL LIVES.

PROPERTY, PLANT, AND EQUIPMENT:	
LAND	405,763.
BUILDINGS AND IMPROVEMENTS	4,607,338.
OFFICE EQUIPMENT	710,415.
PROGRAM EQUIPMENT	36,598.
AUTOMOBILE	30,606.
CONSTRUCTION IN PROCESS	14,395.
TOTAL	5,805,115.
LESS: ACCUMULATED DEPRECIATION	<2,260,433.>
NET BOOK VALUE	3,544,682.

FORM 990 GAIN (LOSS) FROM PUBLICLY TRADED SECURITIES STATEMENT 2

DESCRIPTION	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	NET GAIN OR (LOSS)
VARIOUS SECURITIES	2,342,483.	2,320,606.	0.	21,877.
TO FORM 990, PART I, LINE 8	2,342,483.	2,320,606.	0.	21,877.

FORM 990 SPECIAL EVENTS AND ACTIVITIES STATEMENT 3

DESCRIPTION OF EVENT	GROSS RECEIPTS	CONTRIBUT. INCLUDED	GROSS REVENUE	DIRECT EXPENSES	NET INCOME
SPRING BREAKFAST	130,029.	36,804.	93,225.	15,189.	78,036.
CELEBRITY AUCTION	141,583.	0.	141,583.	18,282.	123,301.
AWA	294,740.	205,352.	89,388.	96,118.	<6,730.>
TO FM 990, PART I, LINE 9	566,352.	242,156.	324,196.	129,589.	194,607.

FORM 990 OTHER CHANGES IN NET ASSETS OR FUND BALANCES STATEMENT 4

DESCRIPTION	AMOUNT
UNREALIZED GAINS ON INVESTMENTS	84,401.
TOTAL TO FORM 990, PART I, LINE 20	84,401.

FORM 990 OFFICER COMPENSATION ALLOCATION STATEMENT 5
PART II, LINE 25

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
PATRICIA SHEA	107,000.	13,577.	0.	120,577.
A. PROGRAM SERVICES	88,917.	11,452.		100,369.
B. MANAGEMENT AND GENERAL	10,914.	1,430.		12,344.
C. FUNDRAISING	7,169.	695.		7,864.

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
PATRICIA MERRITT	78,000.	10,909.	0.	88,909.
A. PROGRAM SERVICES	64,818.	9,202.		74,020.
B. MANAGEMENT AND GENERAL	7,956.	1,149.		9,105.
C. FUNDRAISING	5,226.	558.		5,784.

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
LINDA BALLEW	65,000.	8,231.	0.	73,231.
A. PROGRAM SERVICES	54,015.	6,943.		60,958.
B. MANAGEMENT AND GENERAL	6,630.	867.		7,497.
C. FUNDRAISING	4,355.	421.		4,776.

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
JAN SHIPP	56,787.	11,860.	0.	68,647.
A. PROGRAM SERVICES	47,190.	10,004.		57,194.
B. MANAGEMENT AND GENERAL	5,792.	1,249.		7,041.
C. FUNDRAISING	3,805.	607.		4,412.

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
JAN PATE	45,573.	4,556.	0.	50,129.
A. PROGRAM SERVICES	37,872.	3,843.		41,715.
B. MANAGEMENT AND GENERAL	4,648.	480.		5,128.
C. FUNDRAISING	3,053.	233.		3,286.

TOTAL PROGRAM SERVICES	334,256.
TOTAL MANAGEMENT AND GENERAL	41,115.
TOTAL FUNDRAISING	26,122.
TOTAL OFFICER, ETC., COMPENSATION INCLUDED ON PARTS V-A AND V-B	401,493.

FORM 990 CASH GRANTS AND ALLOCATIONS STATEMENT 6

CLASSIFICATION	DONEE'S NAME	DONEE'S ADDRESS	DONEE'S RELATIONSHIP	AMOUNT
DISCRETIONARY	CLARINDA MOORE	AVAILABLE UPON REQUEST	NONE	1,000.
EDUCATIONAL	KIMBERLY BASSHAM	AVAILABLE UPON REQUEST	NONE	6,322.
EDUCATIONAL	LATONYA BASSHAM	AVAILABLE UPON REQUEST	NONE	6,181.
TOTAL INCLUDED ON FORM 990, PART II, LINE 22				13,503.

FORM 990 STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS STATEMENT 7

DESCRIPTION OF PROGRAM SERVICE ONE

EMPLOYEE TRAINING: WORKFORCE DEVELOPMENT PROGRAM THAT IDENTIFIES AND ADDRESSES THE NEEDS OF INDIVIDUALS WHO ARE WORKING TOWARD SELF-RELIANCE. FOR WOMEN TRANSITIONING FROM PUBLIC ASSISTANCE OR INCARCERATION, THIS PROGRAM PROVIDES CAREER ASSESSMENT/PLANNING AND WORK PREPARATION CLASSES INCLUDING LIFE SKILLS DEVELOPMENT. THE PROGRAM ALSO INCLUDES ADULT EDUCATION CLASSES WITH GED PREPARATION, REFERRAL TO JOB SKILLS TRAINING, APPRENTICESHIPS AND POST-SECONDARY EDUCATION. EACH JOB PLACEMENT IS FOLLOWED UP WITH SUPPORT TO HELP INDIVIDUALS RETAIN AND ADVANCE IN THE JOB. THE PROGRAM GIVES SPECIAL ATTENTION TO CAREER OPTIONS THAT ARE CONSIDERED "NON-TRADITIONAL" (OCCUPATIONS WHERE WOMEN MAKE UP LESS THAN 25% OF THE WORKFORCE).

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE A	12,112.	767,786.

FORM 990 STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS STATEMENT 8

DESCRIPTION OF PROGRAM SERVICE THREE

DOMESTIC VIOLENCE: THE DOMESTIC VIOLENCE CENTER PROVIDES A 24-HOUR CRISIS LINE, A COMPREHENSIVE EMERGENCY SHELTER PROGRAM, CHILDREN'S THERAPEUTIC PROGRAMMING, AN ON-SITE CLINIC, LEGAL ADVOCACY, INDIVIDUALIZED CASE MANAGEMENT, SUPPORT GROUPS IN THE COMMUNITY AND IN SHELTER, AND OUTREACH AND COMMUNITY EDUCATION. OVER THE PAST TWO YEARS, THE YWCA HAS HELPED THOUSANDS IN TIMES OF CRISIS BY SHELTERING THEM AND GUIDING THEM THROUGH THE CIVIL LEGAL PROCESS. THE YWCA ALSO INCREASES DOMESTIC VIOLENCE AWARENESS IN THE COMMUNITY.

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE C	1,391.	1,600,018.

FORM 990 STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE PART III STATEMENT 9

EXPLANATION

NASHVILLE YOUNG WOMEN'S CHRISTIAN ASSOCIATION (THE "YWCA") IS A TENNESSEE NOT-FOR-PROFIT CORPORATION CHARTERED TO FOCUS ON WOMEN AND GIRLS WHO DESIRE TO CREATE A BETTER QUALITY OF LIFE FOR THEMSELVES AND/OR THEIR FAMILIES; TO ACHIEVE SELF-SUFFICIENCY; AND TO INCREASE THEIR FINANCIAL STRENGTH.

FORM 990 OTHER INVESTMENTS STATEMENT 10

DESCRIPTION	VALUATION METHOD	AMOUNT
BENEFICIAL INTEREST IN CHARITABLE REMAINDER TRUST	MARKET VALUE	34,838.
TOTAL TO FORM 990, PART IV, LINE 56, COLUMN B		34,838.

FORM 990 OTHER NOTES AND LOANS PAYABLE STATEMENT 11

LENDER'S NAME	TERMS OF REPAYMENT
INDUSTRIAL DEVELOPMENT BOARD OF METRO NASHVILLE/AMSOUTH BANK	MONTHLY PRINCIPAL & INTEREST PMTS

DATE OF NOTE	MATURITY DATE	ORIGINAL LOAN AMOUNT	INTEREST RATE
07/01/99	07/01/06	2,750,000.	2.45%

SECURITY PROVIDED BY BORROWER	PURPOSE OF LOAN
CERTAIN LAND & BUILDINGS	CONSTRUCTION OF DOMESTIC VIOLENCE CENTER

RELATIONSHIP OF LENDER

NONE

DESCRIPTION OF CONSIDERATION	FMV OF CONSIDERATION	BALANCE DUE
CASH FROM SALE OF BONDS	2,750,000.	0.

LENDER'S NAME	TERMS OF REPAYMENT
AMSOUTH LEASING CORPORATION	MONTHLY PRINCIPAL & INTEREST PMTS

DATE OF NOTE	MATURITY DATE	ORIGINAL LOAN AMOUNT	INTEREST RATE
12/06/05	12/06/15	1,366,327.	5.19%

SECURITY PROVIDED BY BORROWER	PURPOSE OF LOAN
NEGATIVE PLEDGE AGAINST DOMESTIC VIOLENCE CENTER	REFINANCE BOND ISSUE LOAN

RELATIONSHIP OF LENDER

NONE

DESCRIPTION OF CONSIDERATION	FMV OF CONSIDERATION	BALANCE DUE
CASH FROM LOAN	1,366,327.	1,304,561.

TOTAL INCLUDED ON FORM 990, PART IV, LINE 64, COLUMN B 1,304,561.

FORM 990 OTHER SECURITIES STATEMENT 12

SECURITY DESCRIPTION	COST/FMV	OTHER SECURITIES
CERTIFICATES OF DEPOSIT	FMV	730,000.
COMMON STOCK	FMV	468,579.
MUTUAL FUNDS	FMV	1,039,178.
TO FORM 990, LINE 54, COL B		2,237,757.

SCHEDULE A OTHER INCOME STATEMENT 13

DESCRIPTION	2004 AMOUNT	2003 AMOUNT	2002 AMOUNT	2001 AMOUNT
VARIOUS	79,089.	36,484.	5,013.	3,509.
TOTAL TO SCHEDULE A, LINE 22	79,089.	36,484.	5,013.	3,509.

Policy

The YW expects employees and volunteers to scrupulously avoid any conflict, direct or indirect, between their own respective individual, professional or business interests and the interests of the YW or its clients. Therefore the agency asks each staff member to agree to:

< enter into no business action or relationship that compromises, or appears to compromise, the best interests of the YW and its standing in the community

< accept no gift, entertainment, service, special favor, or promise of future benefit from any person or firm doing business with the YW of anything of more than nominal value

< not use or make available for benefit or advantage, except in conformity with YW policy, the property, records, services, name, emblem, or endorsement of the YW affiliation of the employee or volunteer.

< safeguard the privacy of YW volunteers and donors

While individual employees are encouraged to be politically involved as responsible citizens, the YW takes a non-partisan role relating to political issues and unequivocally forbids the use of its funds for the support of political parties or candidates. No employee is authorized to make or approve such a contribution on behalf of the organization.

Procedure

Where a staff member believes compromise may exist or arise, that staff member must disclose in writing all salient facts to the CEO. The CEO will decide if any conflict of interest exists. Any staff member violating the YW's conflict of interest policy may be disciplined up to and including dismissal.

YWCA BOARD OF DIRECTORS
July 2005 – June 2006
(*Denotes Executive Committee)

NAME OFFICE or COMMITTEE	ADDRESS	HOME PHONE BUSINESS PHONE	FAX EMAIL
* Brenda Wynn *Board Chair*	105 Cima Drive Goodlettsville, TN 37072	736-5295 (o)	736-7479 brenda.wynn@mail.house.gov
Grace Awh	250 Ensworth Place Nashville, TN 37205	370-9665	gawh@comcast.net
Sallie Bailey	700 Timber Lane Nashville, TN 37215	298-2249 (h)	salliebailey@bellsouth.net
*Vicki Bagwell *Co-Chair, Marketing/PR*	508 Colony Trace Court Madison, TN 37115	259-4000 (o)	vbagwell@mpf.com
Cathy Stewart Brown	208 Craighead Avenue Nashville, TN 37205	298-5511 (h)	cathystewart@comcast.net
Sigourney Cheek	4404 Honeywood Drive Nashville, TN 37205	292-4576 (h)	Fax: 292-5735 sigourneycheek@comcast.net
Mary Cohn	Louisiana Pacific 414 Union Street, Ste-2000 Nashville, TN 37219-1709	986-5618	mary.cohn@LPCorp.com
Carly Culbertson	Verizon Wireless P.O. Box 18000 Greenville, SC 29606-9000	(864) 987-2006	(864) 254-1521 carolyn.culbertson@verizonwireless.com

Dan Eisenstein	Metro General Sessions Court 501 Great Circle Rd. First Image Bldg., S-142 Nashville, TN 37228	880-3683 (o)	880-3682 daneisenstein@jis.nashville.org
*Rev. Clare Eschmann Fisher *Chair, Public Policy*	5867 Fredricksburg Dr. Nashville, TN 37215	665-1546	clare.fisher@comcast.net
Barbara Estrin Garrett	5300 Virginia Way, S-200 Brentwood, TN 37027	231-6348	bestrin@tcco.com
*Kathy Greene *Board Treasurer* *Chair, Finance/Property/ Technology*	Stephens Inc. Investment Bankers 3100 West End Ave. Nashville, TN 37203	279-4372	279-4365 kgreene@stephens.com
Nicole Herndon	4805 Manassas Dr. Brentwood, TN 37027	342-3916 (h) 221-4122 (o)	Nicole.Herndon@hcahealthcare.com
Sherry Howell	1128 Traveler's Ridge Dr. Nashville, TN 37220	309-1854 (h)	s.w.howell@comcast.net
*Susan Huggins *Chair, Development*	Direct Link, Inc. 3643 Trousdale Dr. Nashville, TN 37204	665-0599 (h) 255-0888 (o)	dirlnksah@aol.com
Christine Karbowiak	Bridgestone American Holdings, Inc. 535 Marriott Drive Nashville, TN 37214	937-1556 (o) 937-1410 (o)	937-1414 karbowiakchr@bfusa.com or cunninghamja@bfusa.com
Julie May	Bytes of Knowledge 4515 Harding Rd. Nashville, TN 37205	383-9005 (o)	julie.may@bytesofknowledge.com
Barbara Mendel Mayden	Bass, Berry & Sims AmSouth Center S-2700 Nashville, TN 37238	742-6208 (o)	bmayden@bassberry.com

Louise McKenzie	1149 Balbade Dr. Nashville, TN 37215	665-9360	louise.mckenzie@comcast.net
*LaDonna McDaniel Merville *Board Secretary*	Hospital Alliance of Tenn. 211 Seventh Ave. N., S-400 Nashville, TN 37219	254-1941 (o)	254-1942 ladonna@hospitalalliancetn.com
*Barbara Moss *HR/Diversity*	Stites & Harbison 424 Church Street, Ste-1800 Nashville, TN 37219	782-2344 (o)	742-0713 barbara.moss@stites.com
Talia Lomax-O'dneal	Metro Finance Dept. 222 3rd Ave. North, Ste-550 Nashville, TN 37201	862-6120	880-2800 Talia.LomaxOdneal@nashville.gov
Lissa Perez	Deloitte & Touche, LLP 424 Church Street, Ste-2400 Nashville, TN 37219	259-1800	LPerez@deloitte.com
*Amy Poley *Chair, National Affairs* *Special Committee Liaison*	Healthcare Realty Services 3310 West End Ave., S-700 Nashville, TN 37203	599-5293 (h) 269-8241 (o)	269-8490 (f) apoley@healthcarerealty.com
Michelle Cummings Steele	Mayor's Office of Neighborhoods 225 Polk Ave., S-204 Nashville, TN 37203	862-6000	Michelle.Steele@nashville.gov
*Beth Stein *Co-Chair, Marketing/PR*	1659 Tyne Blvd. Nashville, TN 37215	665-9291	bswrites@aol.com 665-0545
Charles Story	5505 Saddlewood Lane Brentwood, TN 37027		cstory@ecsgrpinc.com
Katy Varney *Past Board Chair*	McNeely, Pigott & Fox 611 Commerce Street Nashville, TN 37203	259-4000 (o)	259-4040 kvarney@mpf.com

*Barbara Cannon Wall *President-Elect* *Chair, Nominating*	332 Lynwood Blvd. Nashville, TN 37205	292-7139 (h)	463-2973 bcwall@comcast.net
Betty Henderson Wingfield	6644 Sugar Valley Drive Nashville, TN 37211	941-4198	bwingfield@executivedevelopment.com
Saralee Terry Woods	3000 Medial Avenue Nashville, TN 37215	383-6555 (o)	saraleewoods@comcast.net

EX OFFICIO MEMBERS

Patricia Shea *President & CEO, The YW*	YWCA 1608 Woodmont Blvd. Nashville, TN 37215	269-9922 ext. 200	patricia.shea@YWCANashville.com
Torry Johnson *Advisory Board Chair*	Office of District Attorney 222 2nd Ave. North, Ste-500 Nashville, TN 37201	862-5507	torryjohnson@Jis.nashville.org
Deana Demonbreun *Young Leaders Council Intern*	HCA Healthcare One Park Plaza, Bldg II Nashville, TN 37202	344-5572	deana.demonbreun@HCAhealthcare.com
Sallye Wright	4709 A Dakota Ave Nashville, TN 37209	291-7039 ext.2419	sallye_w@hotmail.com

HONORARY BOARD MEMBERS

Harriet Foley	4400 Belmont Park Terrace #254 Nashville, TN 37215	383-4741	foleyh@bellsouth.net
Anne Gulley	4339 Belmont Park Terrace Nashville, TN 37215	298-1888 742-5422	fagulley4339@comcast.net
Linda Sims	22 Foxhall Close Nashville, TN 37215	297-1381	
Sue Spickard	2435 Bear Road Nashville, TN 37215	298-1815	sms325@juneau.com

YWCA STAFF CONTACTS
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269-9922 Fax 385-9754

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Sherry Goff
Executive Assistant
Ext 203
Sherry.Goff@YWCANashville.com

Form **8868** (Rev. December 2004) Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

OMB No. 1545-1709

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** and check this box ▶ [X]
- If you are filing for an **Additional (not automatic) 3-Month Extension, complete only Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Part I **Automatic 3-Month Extension of Time** - Only submit original (no copies needed)

Form 990-T corporations requesting an automatic 6-month extension - check this box and complete Part I only ▶ [ ]

All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs, and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041.

Electronic Filing (e-file). Form 8868 can be filed electronically if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for corporate Form 990-T filers). However, you cannot file it electronically if you want the additional (not automatic) 3-month extension, instead you must submit the fully completed signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit *www.irs.gov/efile.*

Type or print	Name of Exempt Organization: NASHVILLE YOUNG WOMEN'S CHRISTIAN ASSOCIATION	Employer identification number: 62-0475702
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 1608 WOODMONT BLVD.	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NASHVILLE, TN 37215	

Check type of return to be filed (file a separate application for each return):

[X] Form 990	[ ] Form 990-T (corporation)	[ ] Form 4720
[ ] Form 990-BL	[ ] Form 990-T (sec. 401(a) or 408(a) trust)	[ ] Form 5227
[ ] Form 990-EZ	[ ] Form 990-T (trust other than above)	[ ] Form 6069
[ ] Form 990-PF	[ ] Form 1041-A	[ ] Form 8870

- The books are in the care of ▶ PATRICIA A. MERRITT
  Telephone No. ▶ (615)269-3180 FAX No. ▶
- If the organization does **not** have an office or place of business in the United States, check this box ▶ [ ]
- If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN)______. If this is for the **whole** group, check this box ▶ [ ]. If it is for part of the group, check this box ▶ [ ] and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6-months for a **Form 990-T corporation**) extension of time until FEBRUARY 15, 2007 .
to file the exempt organization return for the organization named above. The extension is for the organization's return for:
▶ [ ] calendar year ______ or
▶ [X] tax year beginning JUL 1, 2005 , and ending JUN 30, 2006 .

2 If this tax year is for less than 12 months, check reason: [ ] Initial return [ ] Final return [ ] Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions $

b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit $

c **Balance Due.** Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions $ N/A

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA **For Privacy Act and Paperwork Reduction Act Notice, see instructions.** Form **8868** (Rev. 12-2004)

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05-01-05