

Form **990****Return of Organization Exempt From Income Tax**

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

OMB No. 1545-0047

2006

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

A For the 2006 calendar year, or tax year beginning **JUL 1, 2006** and ending **JUN 30, 2007**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	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) Room/suite 1608 WOODMONT BLVD. 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: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) ▶
		H and I are not applicable to section 527 organizations. H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) If "Yes," enter number of affiliates ▶ N/A H(c) Are all affiliates included? N/A <input type="checkbox"/> Yes <input type="checkbox"/> No (If "No," attach a list.) H(d) Is this a separate return filed by an organization covered by a group ruling? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No I Group Exemption Number ▶ N/A

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

G Website: ▶ **WWW.YWCANASHVILLE.COM****J** Organization type (check only one) ▶ ☒ 501(c) (3) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527**K** Check here ☐ if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.**L** Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **3,954,832.****M** Check ☐ if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances**

Revenue	1 Contributions, gifts, grants, and similar amounts received:				
	a Contributions to donor advised funds	1a			
	b Direct public support (not included on line 1a)	1b		968,399.	
	c Indirect public support (not included on line 1a)	1c		309,507.	
	d Government contributions (grants) (not included on line 1a)	1d		1,482,029.	
	e Total (add lines 1a through 1d) (cash \$ 2,759,935. noncash \$)	1e		2,759,935.	
	2 Program service revenue including government fees and contracts (from Part VII, line 93)	2		32,892.	
	3 Membership dues and assessments	3			
	4 Interest on savings and temporary cash investments	4		103,519.	
	5 Dividends and interest from securities	5			
	6a 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				
Revenue	8a Gross amount from sales of assets other than inventory	(A) Securities		(B) Other	
		825,174.	8a		
	b Less: cost or other basis and sales expenses	813,769.	8b		
	c Gain or (loss) (attach schedule)	11,405.	8c		
	d Net gain or (loss). Combine line 8c, columns (A) and (B) STMT 2	8d		11,405.	
	9 Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>				
	a Gross revenue (not including \$ 416,477. of contributions reported on line 1b)	9a		53,400.	
	b Less: direct expenses other than fundraising expenses	9b		162,302.	
	c Net income or (loss) from special events. Subtract line 9b from line 9a SEE STATEMENT 3	9c		<108,902.>	
	10a 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		179,912.		
12 Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12		2,978,761.		
Expenses	13 Program services (from line 44, column (B))	13		2,341,594.	
	14 Management and general (from line 44, column (C))	14		437,378.	
	15 Fundraising (from line 44, column (D))	15		328,597.	
	16 Payments to affiliates (attach schedule)	16			
	17 Total expenses. Add lines 16 and 44, column (A)	17		3,107,569.	
	18 Excess or (deficit) for the year. Subtract line 17 from line 12	18		<128,808.>	
Net Assets	19 Net assets or fund balances at beginning of year (from line 73, column (A))	19		5,656,624.	
	20 Other changes in net assets or fund balances (attach explanation) SEE STATEMENT 4	20		233,863.	
	21 Net assets or fund balances at end of year. Combine lines 18, 19, and 20	21		5,761,679.	

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01-18-07

LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2006)

**NASHVILLE YOUNG WOMEN'S CHRISTIAN
ASSOCIATION**

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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
22a Grants paid from donor advised funds (attach schedule) (cash \$ <u>0</u> • noncash \$ <u>0</u>) If this amount includes foreign grants, check here <input type="checkbox"/>				
22b Other grants and allocations (attach schedule) (cash \$ <u>3,172</u> • noncash \$ <u>0</u>) If this amount includes foreign grants, check here <input type="checkbox"/>	3,172.	3,172.		
23 Specific assistance to individuals (attach schedule)				
24 Benefits paid to or for members (attach schedule)				
25a Compensation of current officers, directors, key employees, etc. listed in Part V-A	260,405.	216,104.	27,195.	17,106.
25b Compensation of former officers, directors, key employees, etc. listed in Part V-B	0.	0.	0.	0.
25c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
26 Salaries and wages of employees not included on lines 25a, b, and c	1,478,279.	1,218,880.	160,948.	98,451.
27 Pension plan contributions not included on lines 25a, b, and c	26,800.	21,738.	3,890.	1,172.
28 Employee benefits not included on lines 25a - 27	144,469.	117,183.	20,968.	6,318.
29 Payroll taxes	137,254.	111,331.	19,920.	6,003.
30 Professional fundraising fees				
31 Accounting fees	22,976.	17,629.	3,087.	2,260.
32 Legal fees				
33 Supplies	63,386.	40,455.	10,292.	12,639.
34 Telephone	50,758.	39,710.	9,707.	1,341.
35 Postage and shipping	10,287.	2,511.	1,375.	6,401.
36 Occupancy	185,463.	128,652.	48,341.	8,470.
37 Equipment rental and maintenance	78,657.	51,630.	22,567.	4,460.
38 Printing and publications	31,292.	5,254.	6,126.	19,912.
39 Travel	23,580.	20,005.	3,347.	228.
40 Conferences, conventions, and meetings	84,662.	9,694.	177.	74,791.
41 Interest	65,107.	65,107.		
42 Depreciation, depletion, etc. (attach schedule)	186,359.	111,608.	64,640.	10,111.
43 Other expenses not covered above (itemize):				
a PROFESSIONAL FEES	88,985.	34,157.	10,027.	44,801.
b SPECIFIC ASSISTANCE	23,739.	20,567.	3,172.	0.
c INSURANCE	45,536.	31,412.	8,868.	5,256.
d MISCELLANEOUS	40,067.	18,459.	12,731.	8,877.
e GRANT EXPENSES	56,336.	56,336.	0.	0.
f				
g				
44 Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	3,107,569.	2,341,594.	437,378.	328,597.

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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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.

What is the organization's primary exempt purpose? ► SEE STATEMENT 8	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
<p>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.)</p> <p>a SEE STATEMENT 6</p> <p>(Grants and allocations \$ 3,172.) If this amount includes foreign grants, check here ► <input type="checkbox"/></p>	753,613.
<p>b YOUTH SERVICES: YOUTH ADVANTAGE HELPS PREPARE YOUNG PEOPLE FOR INDEPENDENCE THROUGH JOB PREPARATION WORKSHOPS AND JOB PLACEMENT.</p> <p>(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/></p>	68,810.
<p>c SEE STATEMENT 7</p> <p>(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/></p>	1,519,171.
<p>d</p> <p>(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/></p>	
<p>e Other program services (attach schedule)</p> <p>(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/></p>	
f Total of Program Service Expenses (should equal line 44, column (B), Program services) ►	2,341,594.

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ASSOCIATION**

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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	177,251.	45	150,143.
	46 Savings and temporary cash investments	835,358.	46	1,021,116.
	47 a Accounts receivable			
	b Less: allowance for doubtful accounts		47c	
	48 a Pledges receivable	92,309.		
	b Less: allowance for doubtful accounts	1,128.	48c	91,181.
	49 Grants receivable	123,662.	49	102,973.
	50 a Receivables from current and former officers, directors, trustees, and key employees		50a	
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)		50b	
	51 a Other notes and loans receivable		51c	
	b Less: allowance for doubtful accounts		51b	
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges	68,239.	53	65,240.
	54 a Investments - publicly-traded securities <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54a	
	b Investments - other securities STMT 11 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	2,237,757.	54b	2,242,486.
55 a Investments - land, buildings, and equipment: basis		55a		
b Less: accumulated depreciation		55b	55c	
56 Investments - other SEE STATEMENT 9	34,838.	56	41,430.	
57 a Land, buildings, and equipment: basis	5,832,192.	57a		
b Less: accumulated depreciation	2,443,461.	57b	57c	
58 Other assets, including program-related investments (describe ▶		58		
59 Total assets (must equal line 74). Add lines 45 through 58	7,115,170.	59	7,103,300.	
Liabilities	60 Accounts payable and accrued expenses	127,142.	60	104,037.
	61 Grants payable	13,196.	61	5,846.
	62 Deferred revenue	13,647.	62	37,500.
	63 Loans from officers, directors, trustees, and key employees		63	
	64 a Tax-exempt bond liabilities		64a	
	b Mortgages and other notes payable STMT 10	1,304,561.	64b	1,194,238.
	65 Other liabilities (describe ▶		65	
66 Total liabilities. Add lines 60 through 65	1,458,546.	66	1,341,621.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted	3,689,362.	67	3,829,565.
	68 Temporarily restricted	192,668.	68	137,378.
	69 Permanently restricted	1,774,594.	69	1,794,736.
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> 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 and column (B) must equal line 21)	5,656,624.	73	5,761,679.
	74 Total liabilities and net assets/fund balances. Add lines 66 and 73	7,115,170.	74	7,103,300.

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Part IV-A

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

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.)

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	Yes	No
--	-----	----

31

75h

X

750

X

75d

4 3 2 1 0

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.)

SEE ATTACHED LIST OF NONCOMPENSATED
BOARD OF DIRECTORS

Yes	No
-----	----

75

X

77

X

78a

X

N/A

78b

100

79

X

80a

X

N/A

11

813

•

0

813

811

V

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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	113,268.
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?	84b	N/A
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a	N/A
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? 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.	85b	N/A
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?	85g	N/A
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?	85h	N/A
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 a	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	88a	X
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI	88b	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	89c	0.
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization	89d	0.
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e	X
f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f	X
g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g	X
90 a	List the states with which a copy of this return is filed TN	90b	64
b	Number of employees employed in the pay period that includes March 12, 2006		
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		
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)? If "Yes," enter the name of the foreign country	91b	X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		

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Part VI Other Information (continued)		Yes No
c At any time during the calendar year, did the organization maintain an office outside of the United States? If "Yes," enter the name of the foreign country N/A		91c <input type="checkbox"/> <input checked="" type="checkbox"/>
92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here <input type="checkbox"/> 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		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue:					
a EXERCISE CLASS FEES					26,862.
b COUNSELING FEES					6,030.
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	103,519.	
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	11,405.	
101 Net income or (loss) from special events			05	<108,902.>	
102 Gross profit or (loss) from sales of inventory					
103 Other revenue:					
a MISCELLANEOUS REVENUE			01	179,912.	
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0.		185,934.	32,892.
105 Total (add line 104, columns (B), (D), and (E))					218,826.

Note: Line 105 plus line 1e, 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).

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Part X Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13). N/A

106 Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

Yes	No

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	-----			
b	-----			
c	-----			
Totals				

107 Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

Yes	No

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	-----			
b	-----			
c	-----			
Totals				

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

Yes	No

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.

Please Sign Here

Signature of Officer: Patricia A. Merritt Date: 11/14/07

Type or print name and title: Patricia A. Merritt, CFO

Paid Preparer's Use Only

Preparer's signature: [Signature] Date: 11/13/07 Check if self-employed: ☒ Preparer's SSN or PTIN (See Gen. Inst. X): _____

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

Form 990 (2006)

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

2006

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 2 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 BLVD., NASHVILLE, TN 37	VP 50.00	51,093.	7,489.	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	

NASHVILLE YOUNG WOMEN'S CHRISTIAN

Schedule A (Form 990 or 990-EZ) 2006 ASSOCIATION

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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 1 \$ _____ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.) 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.		X
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 Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.)	3a	X
b Did the organization have a section 403(b) annuity plan for its employees?	3b	X
c Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement	3c	X
d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d	X
4 a Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g	4a	X
b Did the organization make any taxable distributions under section 4966?	4b	N/A
c Did the organization make a distribution to a donor, donor advisor, or related person?	4c	N/A
d Enter the total number of donor advised funds owned at the end of the tax year		N/A
e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year		N/A
f Enter the total number of separate funds or accounts owned at the end of the year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts		0.
g Enter the aggregate value of assets in all funds or accounts included on line 4f at the end of the tax year		0.

Schedule A (Form 990 or 990-EZ) 2006

Part IV Reason for Non-Private Foundation Status (See pages 4 through 7 of the instructions.)I certify that 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 otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization:
☐ Type I ☐ Type II ☐ Type III-Functionally Integrated ☐ Type III-Other

Provide the following information about the supported organizations. (See page 7 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	
Total ▶					

- 14
- ☐
- An organization organized and operated to test for public safety. Section 509(a)(4). (See page 7 of the instructions.)

NASHVILLE YOUNG WOMEN'S CHRISTIAN

Schedule A (Form 990 or 990-EZ) 2006 ASSOCIATION

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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) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	2,645,984.	2,782,935.	3,854,505.	3,379,009.	12,662,433.
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	359,449.	22,880.	10,695.	9,778.	402,802.
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	89,972.	79,962.	30,096.	49,642.	249,672.
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	163,183.	79,089.	SEE STATEMENT 12 36,484.	5,013.	283,769.
23 Total of lines 15 through 22	3,258,588.	2,964,866.	3,931,780.	3,443,442.	13,598,676.
24 Line 23 minus line 17	2,899,139.	2,941,986.	3,921,085.	3,433,664.	13,195,874.
25 Enter 1% of line 23	32,586.	29,649.	39,318.	34,434.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					263,917.
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 2002 through 2005 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					152,499.
c Total support for section 509(a)(1) test: Enter line 24, column (e)					13,195,874.
d Add: Amounts from column (e) for lines: 18 <u>249,672.</u> 19 <u> </u> 22 <u>283,769.</u> 26b <u>152,499.</u>					685,940.
e Public support (line 26c minus line 26d total)					12,509,934.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					94.8019%
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 (2005) (2004) (2003) (2002)					
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 (2005) (2004) (2003) (2002)					
c Add: Amounts from column (e) for lines: 15 <u> </u> 16 <u> </u> 17 <u> </u> 20 <u> </u> 21 <u> </u>					N/A
d Add: Line 27a total and line 27b total					N/A
e Public support (line 27c total minus line 27d total)					N/A
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)					N/A
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					N/A %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					N/A %
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2002 through 2005, 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					

NASHVILLE YOUNG WOMEN'S CHRISTIAN

Schedule A (Form 990 or 990-EZ) 2006 ASSOCIATION

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Part V Private School Questionnaire (See page 9 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? If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)	31	
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? If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)	32d	
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? If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)	33h	
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? If you answered "Yes" to either 34a or b, please explain using an attached statement.	34b	
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	

Schedule A (Form 990 or 990-EZ) 2006

NASHVILLE YOUNG WOMEN'S CHRISTIAN

Schedule A (Form 990 or 990-EZ) 2006 ASSOCIATION

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Part VI-A Lobbying Expenditures by Electing Public Charities (See page 10 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	
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 13 of the instructions.)

Calendar year (or fiscal year beginning in) ►	Lobbying Expenditures During 4-Year Averaging Period				N/A
	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(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 13 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.

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	4,635,908.
OFFICE EQUIPMENT	716,225.
PROGRAM EQUIPMENT	36,598.
AUTOMOBILE	30,606.
CONSTRUCTION IN PROCESS	7,092.

TOTAL	5,832,192.
LESS: ACCUMULATED DEPRECIATION	<2,443,461.>

NET BOOK VALUE	3,388,731.
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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	825,174.	813,769.	0.	11,405.
TO FORM 990, PART I, LINE 8	825,174.	813,769.	0.	11,405.

FORM 990 SPECIAL EVENTS AND ACTIVITIES STATEMENT 3

DESCRIPTION OF EVENT	GROSS RECEIPTS	CONTRIBUT. INCLUDED	GROSS REVENUE	DIRECT EXPENSES	NET INCOME
SPRING BREAKFAST	33,883.	33,883.		9,782.	<9,782.>
CELEBRITY AUCTION	131,253.	131,253.		9,901.	<9,901.>
AWA	292,737.	239,337.	53,400.	141,036.	<87,636.>
OTHER EVENTS	12,004.	12,004.		1,583.	<1,583.>
TO FM 990, PART I, LINE 9	469,877.	416,477.	53,400.	162,302.	<108,902.>

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

DESCRIPTION	AMOUNT
UNREALIZED GAINS ON INVESTMENTS	233,863.
TOTAL TO FORM 990, PART I, LINE 20	233,863.

FORM 990

CASH GRANTS AND ALLOCATIONS
TO INDIVIDUALS

STATEMENT 5

CLASS OF ACTIVITY/DONEE'S NAME AND ADDRESS	DONEE'S RELATIONSHIP	AMOUNT
DISCRETIONARY M. DAVIS 1608 WOODMONT BLVD NASHVILLE, TN 37215	NONE	1,000.
EDUCATIONAL K. BASSHAM 1608 WOODMONT BLVD NASHVILLE, TN 37215	NONE	1,172.
EDUCATIONAL L. BROOKS 1608 WOODMONT BLVD NASHVILLE, TN 37215	NONE	1,000.
TOTAL INCLUDED ON FORM 990, PART II, LINE 22B		3,172.

FORM 990

STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

STATEMENT

6

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).

TO FORM 990, PART III, LINE A

GRANTS

3,172.

EXPENSES

753,613.

FORM 990	STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS	STATEMENT	7
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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 THREE 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		1,519,171.

FORM 990	STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE PART III	STATEMENT	8
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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	9
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DESCRIPTION	VALUATION METHOD	AMOUNT
BENEFICIAL INTEREST IN CHARITABLE REMAINDER TRUST	MARKET VALUE	41,430.
TOTAL TO FORM 990, PART IV, LINE 56, COLUMN B		41,430.

FORM 990	OTHER NOTES AND LOANS PAYABLE	STATEMENT 10
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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.	1,194,238.
TOTAL INCLUDED ON FORM 990, PART IV, LINE 64, COLUMN B		1,194,238.

FORM 990	OTHER SECURITIES	STATEMENT 11
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SECURITY DESCRIPTION	COST/FMV	OTHER SECURITIES
CERTIFICATES OF DEPOSIT	FMV	370,000.
COMMON STOCK	FMV	663,282.
MUTUAL FUNDS	FMV	1,209,204.
TO FORM 990, LINE 54B, COL B		2,242,486.

SCHEDULE A	OTHER INCOME			STATEMENT 12
DESCRIPTION	2005 AMOUNT	2004 AMOUNT	2003 AMOUNT	2002 AMOUNT
VARIOUS	163,183.	79,089.	36,484.	5,013.
TOTAL TO SCHEDULE A, LINE 22	163,183.	79,089.	36,484.	5,013.

YWCA BOARD OF DIRECTORS

July 2006 – June 2007

(*Denotes Executive Committee)

NAME OFFICE or COMMITTEE	ADDRESS	HOME PHONE BUSINESS PHONE	FAX EMAIL
*Barbara Cannon Wall <i>Board Chair</i>	332 Lynwood Blvd. Nashville, TN 37205	292-7139 (h)	Fax: 463-2973 bcwall@comcast.net
Grace Awh	250 Ensworth Place Nashville, TN 37205	385-5565	gawh@comcast.net
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Sigourney Cheek	4404 Honeywood Drive Nashville, TN 37205	292-4576 (h)	Fax: 292-5735 sigourneycheek@comcast.net
Tom Church	Caterpillar Financial 2120 West End Ave. P.O. Box 340001 Nashville, TN 37203	341-1215 (o)	Fax: 341-1635 Tom.Church@CAT.com
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*Kathy Greene <i>Board Treasurer Chair, Finance/Property/ Investments</i>	Stephens Inc. Investment Bankers 3100 West End Ave. Nashville, TN 37203	279-4372	Fax: 279-4365 kgreene@stephens.com
Joann Ettien	Administrator Women's Hospital at Centennial Medical Center 2300 Patterson Street Nashville, TN 37203	342-5023 (o)	Fax: 615-372-6541 Joann.Ettien@HCAHealthcare.com
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Julie May	Bytes of Knowledge 4515 Harding Rd. Nashville, TN 37205	383-9005 (o)	julie.may@bytesofknowledge.com
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Barbara Moss	Stites & Harbison 424 Church Street, Ste-1800 Nashville, TN 37219	782-2344 (o)	Fax: 742-0713 barbara.moss@stites.com
Lissa Perez	Deloitte & Touche, LLP 424 Church Street, Ste-2400 Nashville, TN 37219	259-1800	LPerez@deloitte.com
*Amy Poley <i>Board Secretary Chair, National Affairs</i>	Healthcare Realty Services 3310 West End Ave., S-700 Nashville, TN 37203	414-6087 (h/c) 269-8241 (o)	Fax: 690-8410 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 <i>Co-Chair, Marketing/PR</i>	1659 Tyne Blvd. Nashville, TN 37215	665-9291	Fax: 665-0545 bswrites@aol.com
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CONFLICT OF INTEREST

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.