

Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No. 1545-0047

2008

Open to Public Inspection

A For the 2008 calendar year, or tax year beginning _____, and ending _____

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

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

C Name of organization **YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF ST PAUL**
 Doing Business As _____
 Number and street (or P.O. box if mail is not delivered to street address) **375 SELBY AVENUE** Room/suite _____
 City or town, state or country, and ZIP + 4 **ST PAUL MN 55102-1822**

D Employer identification number **41-0693892**

E Telephone number **651-222-3741**

G Gross receipts \$ **4,595,390**

F Name and address of principal officer:
WILLIAM L. COLLINS, JR.
375 SELBY AVENUE
ST PAUL MN 55102

H(a) Is this a group return for affiliates? Yes No
H(b) Are all affiliates included? Yes No
 If "No," attach a list. (see instructions)

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

J Website: ▶ **WWW.YWCAOFSTPAUL.ORG**

K Type of organization: Corporation Trust Association Other ▶

L Year of formation: **1907** **M** State of legal domicile: **MN**

H(c) Group exemption number ▶

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: YWCA IS DEDICATED TO ELIMINATING RACISM, EMPOWERING WOMEN AND PROMOTING PEACE, JUSTICE, FREEDOM AND DIGNITY FOR ALL.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	11
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	11
	5 Total number of employees (Part V, line 2a)	5	170
	6 Total number of volunteers (estimate if necessary)	6	238
	7a Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	
b Net unrelated business taxable income from Form 990-T, line 34	7b	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	2,222,550	2,418,218
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,123,916	2,212,375
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	102,801	-206,083
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	91,310	170,880
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	4,540,577	4,595,390
	14 Benefits paid to or for members (Part IX, column (A), line 4)		
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		
	16a Professional fundraising fees (Part IX, column (A), line 11e)	3,137,815	3,246,111
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 283,271		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	1,690,574	1,931,703
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	4,828,389	5,177,814	
19 Revenue less expenses. Subtract line 18 from line 12	-287,812	-582,424	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Year	End of Year
	21 Total liabilities (Part X, line 26)	11,126,991	12,109,108
	22 Net assets or fund balances. Subtract line 21 from line 20	6,189,800	7,764,187
		4,937,191	4,344,921

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer _____ Date _____
 Type or print name and title _____

Paid Preparer's Use Only

Preparer's signature ▶ _____ Date **7/22/09** Check if self-employed Preparer's identifying number (see instructions) **P00543681**
 Firm's name (or yours if self-employed), address, and ZIP + 4 **LEWIS, KISCH & ASSOCIATES, LTD** EIN ▶ **41-1620961**
1303 SOUTH FRONTAGE ROAD SUITE 3 Phone no. ▶ **651-437-3356**
HASTINGS, MN 55033-2477

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

Part III Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission:

YWCA IS DEDICATED TO ELIMINATING RACISM, EMPOWERING WOMEN AND PROMOTING PEACE, JUSTICE, FREEDOM AND DIGNITY FOR ALL.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

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

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ **1,491,558** including grants of\$) (Revenue \$)

HEALTH & WELLNESS - PUTTING BETTER HEALTH WITHIN REACH:

SERVING PEOPLE OF ALL AGES AND FITNESS LEVELS, THE HEALTH & FITNESS CENTER (HFC) OFFERS A WIDE VARIETY OF INDIVIDUAL AND GROUP ACTIVITIES TO SUPPORT GOOD HEALTH. SCHOLARSHIPS HELP MAKE FITNESS ACCESSIBLE, AND PROGRAMMING IS ALSO MADE AVAILABLE TO THE YOUTH AND FAMILIES SERVED BY YWCA SOCIAL SERVICE PROGRAMS.

IN 2008, THE HFC SERVED MORE THAN 4500 MEMBERS, CLASS PARTICIPANTS, AND GUESTS. THROUGH FINANCIAL ASSISTANCE AND

4b (Code:) (Expenses \$ **1,111,804** including grants of\$) (Revenue \$)

TRANSITIONAL HOUSING PROGRAM - BUILDING NEW LIVES FOR HOMELESS WOMEN AND CHILDREN:

BY COMBINING SAFE, AFFORDABLE HOUSING AND ON-SITE SUPPORTIVE SERVICES, THE TRANSITIONAL HOUSING PROGRAM (THP) EMPOWERS HOMELESS FAMILIES TO TRANSFORM THEIR LIVES AND TO PUT HOMELESSNESS IN THE PAST. WORKING CLOSELY WITH CASE MANAGERS AND PROGRAM STAFF, FAMILIES SPEND UP TO 24 MONTHS BUILDING SKILLS AND STABILIZING THEIR LIVES WHILE LIVING IN ONE OF THREE YWCA-OWNED TRANSITIONAL HOUSING SITES.

4c (Code:) (Expenses \$ **522,083** including grants of\$) (Revenue \$)

YOUTH ACHIEVERS PROGRAM - PROMOTING POSITIVE LIFE CHOICES:

AFTER SCHOOL AND SUMMER PROGRAMMING EQUIPS AT-RISK GIRLS AND BOYS (AGES 8-14) TO MAKE GOOD CHOICES. PROGRAMMING INCLUDES LIFE SKILLS, ACADEMIC AND TECHNOLOGY ENRICHMENT, LEADERSHIP AND HEALTHY MINDS/BODIES. ACCESSIBLE TO FAMILIES IN NEED, YAP OFFERS PROGRAMMING 5 DAYS A WEEK, YEAR ROUND AND DOES NOT CHARGE WEEKLY PROGRAM FEES.

DURING 2008, YAP SERVED 110 CHILDREN FROM 83 FAMILIES. 91% OF YAP PARTICIPANTS HAD NO TRUANCY PETITIONS FILED WHILE

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

(Expenses \$ **1,403,188** including grants of\$) (Revenue \$)4e Total program service expenses ▶ \$ **4,528,633** (Must equal Part IX, Line 25, column (B).)

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		X
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	X	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	X	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III		X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I		X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		X
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25.		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III		X

Part IV Checklist of Required Schedules (continued)

		Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:		
a	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	X	
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV		X
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	X	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	X	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable		
	1a 23		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
	1b 0		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	2a 170		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
4b	If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
6a	Did the organization solicit any contributions that were not tax deductible?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?		X
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7d	If "Yes," indicate the number of Forms 8282 filed during the year		
7e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		X
7h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		X
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		X
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		
9a	Did the organization make any taxable distributions under section 4966?		X
9b	Did the organization make a distribution to a donor, donor advisor, or related person?		X
10	Section 501(c)(7) organizations. Enter:		
10a	Initiation fees and capital contributions included on Part VIII, line 12		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
11a	Gross income from members or shareholders		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Governing Body and Management

		Yes	No
For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.			
1a	Enter the number of voting members of the governing body	1a	11
b	Enter the number of voting members that are independent	1b	11
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?		X
6	Does the organization have members or stockholders?	X	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	X	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9a	Does the organization have local chapters, branches, or affiliates?	X	
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	X	
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	X	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

Section B. Policies

		Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	X	
13	Does the organization have a written whistleblower policy?	X	
14	Does the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:		
a	The organization's CEO, Executive Director, or top management official?	X	
b	Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions)		X
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17	List the states with which a copy of this Form 990 is required to be filed MN
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. <input type="checkbox"/> Own website <input checked="" type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ORGANIZATION 375 SELBY AVENUE ST. PAUL MN 55102 651-222-3741

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

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

Check this box if the organization did not compensate any officer, director, trustee, or key employee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
RENEE TYLER DIRECTOR	1	X						0	0	0
DEBORAH MONTGOMERY PRESIDENT	1	X						0	0	0
ROBIN HICKMAN VICE PRES.	1	X						0	0	0
THERESA NEAL SECRETARY	1	X						0	0	0
SUSAN AULT DIRECTOR	1	X						0	0	0
KATHY CLEMENTS DIRECTOR	1	X						0	0	0
TONI DUBERRY DIRECTOR	1	X						0	0	0
JOYCE EYERLY DIRECTOR	1	X						0	0	0
LAURA HELMUELLER DIRECTOR	1	X						0	0	0
NANCY WATSON DIRECTOR	1	X						0	0	0
MELISSA WELDON DIRECTOR	1	X						0	0	0
WILLIAM COLLINS JR EXC DIRECTOR	40					X		113,278	0	21,442

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	953,128				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	1,465,090				
	g Noncash contributions included in lines 1a-1f: \$		143,686				
	h Total. Add lines 1a-1f		2,418,218				
Program Service Revenue			Busn. Code				
	2a HEALTH AND FITNESS		1,610,169	1,610,169			
	b PROGRAM SERVICE FEES		602,206	602,206			
	c						
	d						
	e						
	f All other program service revenue						
g Total. Add lines 2a-2f		2,212,375					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			-206,083		-206,083	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6a Gross Rents	(i) Real	(ii) Personal				
	b Less: rental exps.						
	c Rental inc. or (loss)						
	d Net rental income or (loss)						
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	b Less: cost or other basis & sales exps.						
	c Gain or (loss)						
	d Net gain or (loss)						
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18						
		a					
b Less: direct expenses							
c Net income or (loss) from fundraising events							
9a Gross income from gaming activities. See Part IV, line 19							
	a						
	b Less: direct expenses						
c Net income or (loss) from gaming activities							
10a Gross sales of inventory, less returns and allowances							
	a						
	b Less: cost of goods sold						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue		Busn. Code					
11a OTHER REVENUE			170,880		170,880		
b							
c							
d All other revenue							
e Total. Add lines 11a-11d			170,880				
12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e			4,595,390	2,212,375	0	-35,203	

Part IX Statement of Functional Expenses

**Section 501(c)(3) and 501(c)(4) organizations must complete all columns.
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).**

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	3,246,111	2,743,822	278,027	224,262
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 7				
f Investment management fees				
g Other				
12 Advertising and promotion	25,264	18,461	473	6,330
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy	366,878	358,018	5,439	3,421
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	563,175	543,547	13,862	5,766
23 Insurance	84,775	77,906	5,927	942
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a ACTIVITIES, SUPPLIES & EQUIPMENT	509,761	470,279	12,322	27,160
b CONTRACTED SERVICES	220,378	174,992	36,152	9,234
c DUES AND MEMBERSHIPS	44,609	42,174	926	1,509
d TRANSPORTATION	42,087	40,868	915	304
e TELEPHONE/PAGER	34,477	31,711	1,790	976
f All other expenses	40,299	26,855	10,077	3,367
25 Total functional expenses. Add lines 1 through 24f	5,177,814	4,528,633	365,910	283,271
26 Joint Costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest bearing		1
	2	Savings and temporary cash investments	1,400,077	2 921,839
	3	Pledges and grants receivable, net	508,008	3 455,287
	4	Accounts receivable, net	14,301	4 28,432
	5	Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L		5
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6
	7	Notes and loans receivable, net		7
	8	Inventories for sale or use	3,063	8 3,079
	9	Prepaid expenses and deferred charges	7,440	9 27,515
	10a	Land, buildings, and equipment: cost basis	10a 14,677,459	
	b	Less: accumulated depreciation. Complete Part VI of Schedule D	10b 4,977,848	10c 9,699,611
	11	Investments—publicly traded securities	867,726	11 850,834
	12	Investments—other securities. See Part IV, line 11		12
	13	Investments—program-related. See Part IV, line 11		13
	14	Intangible assets		14
	15	Other assets. See Part IV, line 11		15 122,511
16	Total assets. Add lines 1 through 15 (must equal line 34)	11,126,991	16 12,109,108	
Liabilities	17	Accounts payable and accrued expenses	252,811	17 322,085
	18	Grants payable		18
	19	Deferred revenue	76,419	19 62,421
	20	Tax-exempt bond liabilities		20
	21	Escrow account liability. Complete Part IV of Schedule D		21
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22
	23	Secured mortgages and notes payable to unrelated third parties	5,853,401	23 7,372,381
	24	Unsecured notes and loans payable		24
	25	Other liabilities. Complete Part X of Schedule D	7,169	25 7,300
	26	Total liabilities. Add lines 17 through 25	6,189,800	26 7,764,187
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27	Unrestricted net assets	4,071,045	27 3,304,239
	28	Temporarily restricted net assets	302,623	28 475,759
	29	Permanently restricted net assets	563,523	29 564,923
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30
	31	Paid-in or capital surplus, or land, building, or equipment fund		31
	32	Retained earnings, endowment, accumulated income, or other funds		32
	33	Total net assets or fund balances	4,937,191	33 4,344,921
	34	Total liabilities and net assets/fund balances	11,126,991	34 12,109,108

Part XI Financial Statements and Reporting

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		X
b Were the organization's financial statements audited by an independent accountant?	X	
c If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	X	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	X	
b If "Yes," did the organization undergo the required audit or audits?	X	

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2008

Open to Public Inspection

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

Attach to Form 990 or Form 990-EZ. See separate instructions.

Department of the Treasury Internal Revenue Service

Name of the organization YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF ST PAUL Employer identification number 41-0693892

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

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

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

Table with 2 columns: Yes, No. Rows for 11g(i), 11g(ii), 11g(iii).

h Provide the following information about the organizations the organization supports.

Table with 7 columns: (i) Name of supported organization, (ii) EIN, (iii) Type of organization, (iv) Is the organization in col. (i) listed in your governing document?, (v) Did you notify the organization in col. (i) of your support?, (vi) Is the organization in col. (i) organized in the U.S., (vii) Amount of support.

Total

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	4,778,710	3,824,234	4,566,689	4,346,466	4,630,593	22,146,692
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1-3	4,778,710	3,824,234	4,566,689	4,346,466	4,630,593	22,146,692
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						22,146,692

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4	4,778,710	3,824,234	4,566,689	4,346,466	4,630,593	22,146,692
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	23,904	22,673	107,211	102,801	-206,083	50,506
9 Net income from unrelated business activities, whether or not the business is regularly carried on	-1,070	6,567	-138	-162		5,197
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	46,334	13,347	6,758	91,472	170,880	328,791
11 Total support. Add lines 7 through 10						22,531,186
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	98.2935 %
15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15	96.4353 %
16a 33 1/3 % support test—2008. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input checked="" type="checkbox"/>		
b 33 1/3 % support test—2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/>		

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

(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1-5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	%

19a 33 1/3 % support tests—2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and **stop here**. The organization qualifies as a publicly supported organization ►

b 33 1/3 % support tests—2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and **stop here**. The organization qualifies as a publicly supported organization ►

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

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

PART II, LINE 10 - OTHER INCOME DETAIL

MISCELLANEOUS **\$ 328,791**

Schedule B
(Form 990, 990-EZ,
or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors
▶ Attach to Form 990, 990-EZ, and 990-PF.

OMB No. 1545-0047

2008

Name of the organization
YOUNG WOMEN'S CHRISTIAN ASSOCIATION
OF ST PAUL

Employer identification number
41-0693892

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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

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

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

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

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. (**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.)

General Rule

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

Special Rules

For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on Form 990, Part VIII, line 1h or 2% of the amount on Form 990-EZ, line 1. Complete Parts I and II.

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

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

Caution. Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they **must** answer "No" on Part IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. These instructions will be issued separately.

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)

Name of organization YOUNG WOMEN'S CHRISTIAN ASSOCIATION	Employer identification number 41-0693892
--	---

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	THE ST PAUL FOUNDATION 55 FIFTH STREET E SUITE 600 ST PAUL MN 55101	\$ 185,545	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	BED BATH AND BEYOND 60 COON RAPIDS BLVD #421 COON RAPIDS MN 55448	\$ 52,682	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3	MCKNIGHT FOUNDATION 710 SECOND ST S SUITE 400 MINNEAPOLIS MN 55401	\$ 170,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4	TARGET FOUNDATION 1000 NICOLLET MALL TPS-2688 MINNEAPOLIS MN 55403	\$ 60,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
5	HARDENBERGH FOUNDATION 5959 CENTERVILLE ROAD SUITE 260 NORTH OAKS MN 55127	\$ 50,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
6	DUSTY AND GEORGE MAIRS 1111 IVY HILL DR ST PAUL MN 55118	\$ 100,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No. 1545-0047

2008

Open to Public Inspection

Name of the organization: YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF ST PAUL; Employer identification number: 41-0693892

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

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

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

Questions 1-9 regarding conservation easements, including a table for 'Held at the End of the Year' with rows 2a-2d.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

Questions 1a-1b and 2a-2b regarding art and historical treasures, including dollar amounts for revenues and assets.

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

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange programs
- e Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

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

Part IV Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

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

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

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

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

b If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	563,523				
b Contributions	1,400				
c Investment earnings or losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	564,923				

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

- a Board designated or quasi-endowment _____ %
- b Permanent endowment 100.00 %
- c Term endowment _____ %

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

	Yes	No
(i) unrelated organizations	<input type="checkbox"/>	<input checked="" type="checkbox"/>
(ii) related organizations	<input type="checkbox"/>	<input checked="" type="checkbox"/>

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? Yes No

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

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land		275,632		275,632
b Buildings		13,480,754	4,374,083	9,106,671
c Leasehold improvements				
d Equipment		921,073	603,765	317,308
e Other				

Total. Add lines 1a–1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c).) **9,699,611**

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	4,595,390
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	5,177,814
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	-582,424
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-24,864
9	Total adjustments (net). Add lines 4-8	9	-24,864
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	-607,288

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	4,595,390
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	4,595,390
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part 1, line 12.)	5	4,595,390

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

1	Total expenses and losses per audited financial statements	1	5,202,678
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Losses reported on Form 990, Part IX, line 25	2c	
d	Other (Describe in Part XIV)	2d	24,864
e	Add lines 2a through 2d	2e	24,864
3	Subtract line 2e from line 1	3	5,177,814
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)	5	5,177,814

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.

PART V, LINE 4 - INTENDED USES FOR ENDOWMENT FUNDS

THE ASSOCIATION'S PERMANENTLY RESTRICTED ENDOWMENT FUNDS ARE INTENDED TO
GENERATE INCOME FOR USE IN CURRENT PROGRAMS, WITH THE CONTRIBUTIONS
MAINTAINED PERMANENTLY.

PART XI, LINE 8 - RECONCILIATION OF CHANGES - OTHER

CAPITAL CAMPAIGN EXPENSES \$ -24,864

Part XIV Supplemental Information (continued)

PART XIII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN FINANCIALS - OTHER
CAPITAL CAMPAIGN EXPENSES \$ 24,864

**SCHEDULE M
(Form 990)**

NonCash Contributions

OMB No. 1545-0047

2008

**Open To Public
Inspection**

▶To be completed by organizations that answered "Yes"
on Form 990, Part IV, lines 29 or 30.

▶Attach to Form 990.

Department of the Treasury
Internal Revenue Service

Name of the organization **YOUNG WOMEN'S CHRISTIAN ASSOCIATION
OF ST PAUL**

Employer identification number
41-0693892

Part I Types of Property

	(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods	X		82,202	EST. FAIR MARKET VALUE
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded				
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution (historic structures)				
14 Qualified conservation contribution (other)				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶(PROGRAM GOODS)	X	200	61,484	EST. FAIR MARKET VALUE
26 Other ▶()				
27 Other ▶()				
28 Other ▶()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29** 0

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?	X	
b If "Yes," describe in Part II.		
33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II.		

Part II **Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

**PART I, LINE 32B - THIRD PARTY USED TO PROCESS NONCASH CONTRIBUTIONS
DONATIONS OF INVESTMENTS ARE CONVERTED TO CASH BY A THIRD PARTY INVESTMENT
COMPANY.**

SCHEDULE O
(Form 990)Department of the Treasury
Internal Revenue Service**Supplemental Information to Form 990**▶ Attach to Form 990. To be completed by organizations to provide
additional information for responses to specific questions for the
Form 990 or to provide any additional information.

OMB No. 1545-0047

2008Open to Public
InspectionName of the organization **YOUNG WOMEN'S CHRISTIAN ASSOCIATION
OF ST PAUL**Employer identification number
41-0693892**FORM 990 - ORGANIZATION'S MISSION**

LOCALLY, THE YWCA OF ST. PAUL IS CHANGING MINDS, BODIES AND LIVES THROUGH PROGRAMS AND SERVICES IN: HOUSING & SUPPORTIVE SERVICES, YOUTH DEVELOPMENT, HEALTH & WELLNESS AND SKILLS FOR LIFE AND WORK.

FORM 990, PART III, LINE 2

BEGINNING 9/8/08, THE YWCA'S ACADEMIC ENRICHMENT SERVICES PROJECT BEGAN OFFERING TUTORING IN MATH AND LANGUAGE ARTS TO ELIGIBLE STUDENTS FROM ST. PAUL PUBLIC SCHOOLS. SERVICES ARE AVAILABLE AT NO-COST TO THE PARTICIPANTS TO ENSURE THAT YOUTH ARE MEETING MINIMUM ACADEMIC PROGRESS STANDARDS.

IN 2008, YWCA OF ST. PAUL EXPANDED HOUSING AND SUPPORTIVE SERVICES TO INCLUDE PERMANENT SUPPORTIVE HOUSING. THE NEW BUILDING, LOCATED IN HIGHLAND PARK, CONSISTS OF 11 UNITS AND WILL PROVIDE HOUSING AND SERVICES FOR FAMILIES WHO HAVE EXPERIENCED LONG-TERM HOMELESSNESS.

FORM 990, PART III, LINE 3

IN SEPTEMBER 2007, THE APPRENTICE OPPORTUNITY PILOT PROJECT (AOPP) TRANSITIONED FROM THE YWCA OF ST. PAUL TO ST. PAUL TRADE AND LABOR STUDIES RESOURCE CENTER, THE NON-PROFIT ARM OF THE ST. PAUL BUILDING TRADES. 2008 EXPENSES WERE THE FINAL EXPENSES RELATED TO AOPP.

FORM 990, PART III, LINE 4A - FIRST ACHIEVEMENT

COMMUNITY OUTREACH THE HFC REACHED OUT TO NEIGHBORS AND THE GREATER COMMUNITY.

Name of the organization

YOUNG WOMEN'S CHRISTIAN ASSOCIATION

Employer identification number

41-0693892

FORM 990, PART III, LINE 4B - SECOND ACHIEVEMENT

DURING 2008, THP SERVED 65 FAMILIES (65 MOTHERS; 145 CHILDREN). UPON EXITING THE PROGRAM, 91% OF FAMILIES SECURED STABLE HOUSING IN THE COMMUNITY.

FORM 990, PART III, LINE 4C - THIRD ACHIEVEMENT

ENROLLED IN YAP.

FORM 990, PART III, LINE 4D - ALL OTHER ACHIEVEMENTS

FAMILY INTERVENTION PROGRAM - BREAKING THE CYCLE OF HOMELESSNESS FOR ONE AND TWO-PARENT FAMILIES:

THE FAMILY INTERVENTION PROGRAM (FIP) EMPOWERS FAMILIES TO OVERCOME MULTIPLE CHALLENGES, REDUCE THEIR DEPENDENCE ON EMERGENCY SHELTERS AND SECURE/MAINTAIN HOUSING IN THE COMMUNITY. WORKING WITH CASE MANAGERS, FAMILIES ADDRESS ISSUES INCLUDING DOMESTIC VIOLENCE, CHEMICAL DEPENDENCY, CRIMINAL HISTORY AND MENTAL ILLNESS. INTENSIVE AND COMPREHENSIVE STABILIZATION ACTIONS EMPOWER FAMILIES TO SECURE AND MAINTAIN SAFE, AFFORDABLE HOUSING.

DURING 2008, FIP HELPED 52 FAMILIES (57 ADULTS; 92 CHILDREN) TO OVERCOME CHALLENGES AND SECURE HOUSING IN THE COMMUNITY. 92% OF THE FAMILIES SECURED HOUSING WITHIN 45 DAYS OF ENROLLMENT, AND OF THOSE FAMILIES THAT SECURED HOUSING, 93% MAINTAINED HOUSING FOR A MINIMUM OF SIX MONTHS.

Name of the organization

YOUNG WOMEN'S CHRISTIAN ASSOCIATION

Employer identification number

41-0693892

PROGRAM SERVICE EXPENSE: \$351,788

Y'S KIDS CLUB - CARING FOR THE CHILDREN OF WORKING-CLASS

FAMILIES:

Y'S KIDS CLUB (YKC) PROVIDES LICENSED CHILDCARE THAT SUPPORTS THE ACADEMIC AND SOCIAL GROWTH OF CHILDREN IN GRADES K-6. OFFERING FAMILIES FLEXIBLE PAYMENT OPTIONS AND A SLIDING FEE SCALE, YKC IS AVAILABLE BEFORE AND AFTER SCHOOL AND DURING SCHOOL HOLIDAYS. LICENSED BY THE MINNESOTA DEPARTMENT OF HUMAN SERVICES, YKC ALSO SERVES AS AN ALTERNATIVE SUMMER SCHOOL SITE FOR ST. PAUL PUBLIC SCHOOLS.

DURING 2008, YKC SERVED 135 CHILDREN (95 FAMILIES). APPROXIMATELY 50% OF FAMILIES SERVED WERE ENROLLED IN THE CHILDCARE ASSISTANCE PROGRAM ADMINISTERED BY RAMSEY COUNTY. AN ADDITIONAL 43% OF FAMILIES QUALIFIED FOR REDUCED RATES BASED ON A SLIDING SCALE.

PROGRAM EXPENSE \$322,965

IMPACT PROGRAM - KEEPING TEENS AND YOUNG ADULTS IN SCHOOL AND FOCUSED ON THE FUTURE:

Name of the organization

YOUNG WOMEN'S CHRISTIAN ASSOCIATION

Employer identification number

41-0693892

IMPACT IMPROVES THE LIFE CHANCES OF AT-RISK YOUTH AGES 15 TO 22. BY BUILDING THEIR EDUCATIONAL ASPIRATIONS AND SKILLS, FOSTERING PERSONAL AND SOCIAL RESPONSIBILITY AND IMPROVING WORK READINESS AND HABITS - THE PROGRAM EXPANDS THE ASPIRATIONS OF YOUTH AND HELPS PREPARE THEM FOR POST SECONDARY EDUCATION, TRAINING AND WORK.

DURING 2008, IMPACT SERVED 122 YOUTH. 80% OF ELIGIBLE YOUTH ENTERED POST SECONDARY EDUCATION, ENROLLED IN A TRAINING PROGRAM OR OTHER ACTIVITY THAT WILL LEAD TO SELF-SUFFICIENCY.

PROGRAM EXPENSE \$303,975

GIRLS LEAD - EMPOWERING GIRLS TO GROW INTO STRONG, INDEPENDENT WOMEN:

GIRLS LEAD IS A GENDER-SPECIFIC COMPONENT OF THE YOUTH ACHIEVERS PROGRAM THAT EQUIPS AT-RISK GIRLS WITH THE SKILLS, ATTITUDES AND EXPERIENCES THEY WILL NEED TO SUCCEED AND GROW. BY FOCUSING ON HEALTHY LIVING, GOOD DECISION MAKING, CAREER EXPLORATION, AND MATH AND SCIENCE, GIRLS LEARN THEY CAN DO ANYTHING THEY SET THEIR MIND TO.

DURING 2008, GIRLS LEAD SERVED 48 GIRLS. 86% OF THE GIRLS

Name of the organization

YOUNG WOMEN'S CHRISTIAN ASSOCIATION

Employer identification number

41-0693892

INDICATED THAT AS A RESULT OF THE PROGRAM THEY ARE MORE
LIKELY TO AVOID HIGH RISK BEHAVIORS.

PROGRAM EXPENSE \$135,721

ACADEMIC ENRICHMENT SERVICES PROJECT - BREAKING THE CYCLE
OF POVERTY BY BUILDING BASIC SKILLS:

THE ACADEMIC ENRICHMENT SERVICES PROJECT STRENGTHENS YWCA
ST. PAUL'S ABILITY TO ADDRESS PROGRAM PARTICIPANTS'
BARRIERS TO EDUCATION AND EMPLOYMENT -- AND EQUIP THEM TO
MOVE BEYOND POVERTY TOWARD A MORE PRODUCTIVE FUTURE. THE
PROJECT REINFORCES YWCA'S COMMITMENT TO TRANSFORMING LIVES
THROUGH SUCCESS IN SCHOOL VIA A RANGE OF SERVICES
INCLUDING TUTORING AND OTHER EDUCATIONAL SERVICES THAT
SUPPORT ACADEMIC ACHIEVEMENT AND EXPAND POST-SECONDARY
OPTIONS.

THE NEW ACADEMIC ENRICHMENT FRAMEWORK AND SERVICES,
INCLUDING AGE-BASED CURRICULUM AND INSTRUCTIONAL METHODS,
ACADEMIC ASSESSMENTS AND TUTORING WILL ENHANCE THE
EDUCATIONAL EXPERIENCE AND COMPETENCIES OF YOUTH
PARTICIPATING IN YWCA PROGRAMS AND SUPPORT OUR VISION TO
DEVELOP ENGAGED, EMPOWERED PEOPLE.

PROGRAM EXPENSE \$129,829

Name of the organization

YOUNG WOMEN'S CHRISTIAN ASSOCIATION

Employer identification number

41-0693892

FAMILY PRESERVATION PROGRAM - KEEPING AND BRINGING**FAMILIES TOGETHER:**

THE FAMILY PRESERVATION PROGRAM PREVENTS FAMILIES FROM LOSING THEIR CHILDREN TO FOSTER CARE AND WORKS TO REUNITE FAMILIES WHO ALREADY HAVE CHILDREN IN OUT-OF-HOME PLACEMENTS. WORKING WITH CASE MANAGERS, FAMILIES SECURE HOUSING AND ADDRESS ANY ISSUES NEGATIVELY IMPACTING THEIR ABILITY TO PROVIDE A SAFE, HEALTHY HOME FOR THEIR CHILDREN.

DURING 2008, FPP SERVED 28 FAMILIES (30 ADULTS; 45 CHILDREN). 93% OF FAMILIES WHO HAD CUSTODY OF THEIR CHILDREN AT PROGRAM ENTRY WERE ABLE TO RETAIN CUSTODY. 57% OF FAMILIES WHO ENTERED THE PROGRAM WITH CHILDREN IN OUT-OF-HOME PLACEMENTS WERE REUNIFIED THROUGH THE STABILIZATION SERVICES OFFERED BY FPP.

PROGRAM SERVICE EXPENSE \$125,796

PERMANENT SUPPORTIVE HOUSING - POSITIONING FAMILIES FOR STABILITY AND SUCCESS:

PERMANENT SUPPORTIVE HOUSING COUPLES AFFORDABLE HOUSING

Name of the organization

YOUNG WOMEN'S CHRISTIAN ASSOCIATION

Employer identification number

41-0693892

WITH SERVICES THAT HELP PEOPLE TO LIVE MORE STABLE,
PRODUCTIVE LIVES. A SUCCESSFUL, COST-EFFECTIVE MODEL,
SUPPORTIVE HOUSING WORKS WELL FOR PEOPLE WHO FACE SOME OF
LIFE'S MOST COMPLEX CHALLENGES.

PERMANENT SUPPORTIVE HOUSING, IS AN EXCITING ADDITION TO
THE YWCA'S CONTINUUM OF SERVICES. THE NEW BUILDING,
LOCATED IN ST. PAUL'S HIGHLAND PARK NEIGHBORHOOD, FEATURES
11 UNITS AND WILL PROVIDE HOUSING AND SERVICES FOR
FAMILIES WHO HAVE EXPERIENCED LONG-TERM HOMELESSNESS.
UNTIL NOW, YWCA HOUSING SITES HAVE EXCLUSIVELY BEEN HOME
TO FAMILIES ENROLLED IN OUR TRANSITIONAL HOUSING PROGRAM -
A PROGRAM THAT, BY DESIGN, SERVES FAMILIES FOR A MAXIMUM
PERIOD OF TWO YEARS.

THE NEW BUILDING WAS PURCHASED IN LATE NOVEMBER 2008 IN
PREPARATION FOR WELCOMING FAMILIES EARLY IN 2009.

PROGRAM SERVICE EXPENSE \$18,528

FAMILY ASSESSMENT & FAMILY COMMUNITY PARTNERSHIP PROGRAMS
- WORKING TO KEEP CHILDREN SAFE:

FAMILY ASSESSMENT (FA - FORMERLY KNOWN AS FAMILY
ALTERNATIVE RESPONSE OR FAR) REDUCES THE RISK OF CHILD
ABUSE AND NEGLECT BY HELPING FAMILIES TO MEET BASIC NEEDS,

Name of the organization

YOUNG WOMEN'S CHRISTIAN ASSOCIATION

Employer identification number

41-0693892

BUILD STRENGTHS AND MANAGE STRESSORS. FAMILY COMMUNITY PARTNERSHIP (FCP) PREVENTS CHILD ABUSE AND NEGLECT AMONG HIGH RISK FAMILIES BY CONNECTING THEM TO SERVICES AND RESOURCES THAT SUPPORT HEALTHY FAMILY DEVELOPMENT AND BUILD THEIR CAPACITY TO ADEQUATELY CARE FOR THEIR CHILDREN.

BOTH FAR AND FCP ARE PROGRAMS OF RAMSEY COUNTY HUMAN SERVICES. YWCA ST. PAUL IS A SERVICE PROVIDER (FA) AND CONSULTING AGENCY (FCP).

PROGRAM SERVICE EXPENSE \$12,412

APPRENTICESHIP OPPORTUNITY PILOT PROJECT - BUILDING SUCCESS:

THE APPRENTICESHIP OPPORTUNITY PILOT PROJECT (AOPP) EQUIPS WOMEN, PEOPLE OF COLOR AND LOW-INCOME INDIVIDUALS TO ACCESS LIVING WAGE JOBS IN THE CONSTRUCTION TRADES AND TO ENTER APPRENTICESHIP PROGRAMS. IN SEPTEMBER 2007, THE APPRENTICE OPPORTUNITY PILOT PROJECT (AOPP) TRANSITIONED FROM THE YWCA ST. PAUL TO ST. PAUL TRADE AND LABOR STUDIES RESOURCE CENTER, THE NON-PROFIT ARM OF THE ST. PAUL BUILDING TRADES.

PROGRAM EXPENSES FOR 2008 WERE RELATED TO WRAPPING UP THE

Name of the organization

YOUNG WOMEN'S CHRISTIAN ASSOCIATION

Employer identification number

41-0693892

PROGRAM AND TRANSITIONING STAFF AND EQUIPMENT TO ST. PAUL

BUILDING TRADES.

PROGRAM SERVICE EXPENSE \$2,174

FORM 990, PART VI, LINE 6 - CLASSES OF MEMBERS OR STOCKHOLDERS

THE ORGANIZATION HAS MEMBERS.

FORM 990, PART VI, LINE 7A - ELECTION OF MEMBERS AND THEIR RIGHTS

THE ORGANIZATION HAS MEMBERS THAT MAY ELECT ONE OR MORE MEMBERS OF THE
GOVERNING BODY.

FORM 990, PART VI, LINE 9B - POLICIES AND PROCEDURES GOVERNING CHAPTERS

THE YWCA OF ST PAUL IS AN AFFILIATE OF THE NATIONAL AND REGIONAL YWCA.

FORM 990, PART VI, LINE 10 - ORGANIZATION'S PROCESS USED TO REVIEW FORM 990

THE 990 IS DISTRIBUTED TO BOARD MEMBERS FOR REVIEW AND APPROVAL BEFORE IT
IS FILED.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

BOARD MEMBERS ARE REQUIRED TO COMPLETE ANNUAL DISCLOSURES OF POTENTIAL
CONFLICTS OF INTEREST.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL

REVIEW AND APPROVAL BY INDEPENDENT PERSONS, COMPARABILITY DATA, AND
DELIBERATION METHODS ARE USED TO DETERMINE EXECUTIVE DIRECTOR COMPENSATION.

Name of the organization

YOUNG WOMEN'S CHRISTIAN ASSOCIATION

Employer identification number

41-0693892

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
THE ORGANIZATION'S GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE
AVAIABLE UPON REQUEST.

SCHEDULE R
(Form 990)

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

2008

Open to Public Inspection

▶ Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

▶ See separate instructions.

Department of the Treasury
Internal Revenue Service

Name of the organization **YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF ST PAUL** Employer identification number **41-0693892**

Part I Identification of Disregarded Entities

(A) Name, address, and EIN of disregarded entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Total income	(E) End-of-year assets	(F) Direct controlling entity
LEXINGTON SUPPORTIVE HOUSING, LLC 375 SELBY AVENUE ST PAUL MN 55102	HOUSING	MN	180,837	1,677,742	YWCA ST. P
GROTTO SUPPORTIVE HOUSING, LLC 375 SELBY AVENUE ST PAUL MN 55102	HOUSING	MN	107,545	973,284	YWCA ST. P
OXFORD SUPPORTIVE HOUSING, LLC 375 SELBY AVENUE ST PAUL MN 55102	HOUSING	MN	112,476	821,294	YWCA ST. P
CLEVELAND SAUNDERS SUPP HOUSING LLC 375 SELBY AVENUE ST PAUL MN 55102	HOUSING	MN	284	1,726,196	YWCA ST. P

Part II Identification of Related Tax-Exempt Organizations

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	(E) Public charity status (if section 501(c)(3))	(F) Direct controlling entity

Part III Identification of Related Organizations Taxable as a Partnership

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Predominant income (related, investment, unrelated)	(F) Share of total income	(G) Share of end-of-year assets	(H) Dispro- portionate alloc.?		(I) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(J) General or managing partner?	
							Yes	No		Yes	No

Part IV Identification of Related Organizations Taxable as a Corporation or Trust

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Type of entity (C corp, S corp, or trust)	(F) Share of total income	(G) Share of end-of-year assets	(H) Percentage ownership

Part V Transactions With Related Organizations

Note. Complete line 1 if any entity is listed in Parts II, III, or IV.

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a	
b Gift, grant, or capital contribution to other organization(s)	1b	
c Gift, grant, or capital contribution from other organization(s)	1c	
d Loans or loan guarantees to or for other organization(s)	1d	
e Loans or loan guarantees by other organization(s)	1e	
f Sale of assets to other organization(s)	1f	
g Purchase of assets from other organization(s)	1g	
h Exchange of assets	1h	
i Lease of facilities, equipment, or other assets to other organization(s)	1i	
j Lease of facilities, equipment, or other assets from other organization(s)	1j	
k Performance of services or membership or fundraising solicitations for other organization(s)	1k	
l Performance of services or membership or fundraising solicitations by other organization(s)	1l	
m Sharing of facilities, equipment, mailing lists, or other assets	1m	
n Sharing of paid employees	1n	
o Reimbursement paid to other organization for expenses	1o	
p Reimbursement paid by other organization for expenses	1p	
q Other transfer of cash or property to other organization(s)	1q	
r Other transfer of cash or property from other organization(s)	1r	

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(A) Name of other organization(s)	(B) Transaction type (a-r)	(C) Amount involved
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		

Forms 990 / 990-PF	Mortgages and Other Notes Payable	2008
For calendar year 2008, or tax year beginning _____, and ending _____		

Name YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF ST PAUL	Employer Identification Number 41-0693892
---	---

FORM 990, PART X, LINE 23 - ADDITIONAL INFORMATION

Name of lender	Relationship to disqualified person
(1) HRA CITY OF ST. PAUL #3270400	
(2) MHFA #3270600	
(3) MPLS/ST. PAUL FAMILY HOUSING	
(4) FAMILY FUND NOTE	
(5) HRA CITY OF ST. PAUL #3271000	
(6) MHFA #3270700	
(7) HUD #3270800	
(8) CITY OF ST. PAUL STAR LOAN	
(9) BREMER BANK	
(10) CITY OF ST PAUL STAR LOAN	

Original amount borrowed	Date of loan	Maturity date	Repayment terms	Interest rate
(1) 336,963	12/31/87	12/31/17		
(2) 150,180	5/21/90	5/21/20		
(3) 418,000	12/31/87	12/31/18		
(4) 65,000	3/26/93	3/26/23		
(5) 30,000	1/31/91			
(6) 218,450	9/18/92	9/18/22		
(7) 150,180	8/29/89	5/01/20		
(8) 350,000				4.000
(9) 1,000,000		6/11/09		4.700
(10) 364,000				4.000

Security provided by borrower	Purpose of loan
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	

Consideration furnished by lender	Balance due at beginning of year	Balance due at end of year
(1)	336,963	336,963
(2)	150,180	150,180
(3)	418,000	418,000
(4)	53,100	53,100
(5)	30,000	30,000
(6)	218,450	218,450
(7)	35,042	20,024
(8)	350,000	350,000
(9)	324,826	
(10)	330,508	320,490
Totals	2,247,069	1,897,207

Forms 990 / 990-PF	Mortgages and Other Notes Payable	2008
For calendar year 2008, or tax year beginning _____, and ending _____		

Name YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF ST PAUL	Employer Identification Number 41-0693892
---	---

FORM 990, PART X, LINE 23 - ADDITIONAL INFORMATION

Name of lender	Relationship to disqualified person
(1) MN HOUSING FINANCE AGENCY	
(2) FAMILY HOUSING FUND	
(3) MINNESOTA HOUSING FINANCE AGENCY	
(4) HOUSING AND REDEVELOPMENT	
(5) FAMILY HOUSING FUND	
(6) FEDERAL HOME LOAN BANK	
(7) FEDERAL HOME LOAN BANK	
(8) FAMILY HOUSING FUND	
(9) MN HOUSING FINANCE AGENCY	
(10) HRA CITY OF ST PAUL	

Original amount borrowed	Date of loan	Maturity date	Repayment terms	Interest rate
(1)		3/17/33		
(2)		3/31/33		
(3)		11/01/34		
(4)		11/01/34		
(5)		11/01/34		
(6)				
(7)	64,000			
(8)	200,000			
(9)	400,000			
(10)				

Security provided by borrower	Purpose of loan
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	

Consideration furnished by lender	Balance due at beginning of year	Balance due at end of year
(1)	1,170,000	1,170,000
(2)	580,000	580,000
(3)	295,532	295,532
(4)	274,500	274,500
(5)	184,500	184,500
(6)	60,000	60,000
(7)	64,000	64,000
(8)	200,000	200,000
(9)	400,000	400,000
(10)	377,800	377,800
Totals	3,606,332	3,606,332

Mortgages and Other Notes Payable

Forms
990 / 990-PF

2008

For calendar year 2008, or tax year beginning , and ending

Name
**YOUNG WOMEN'S CHRISTIAN ASSOCIATION
OF ST PAUL**

Employer Identification Number
41-0693892

FORM 990, PART X, LINE 23 - ADDITIONAL INFORMATION

Name of lender	Relationship to disqualified person
(1) MINNESOTA HOUSING FINANCE AGENCY	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	

Original amount borrowed	Date of loan	Maturity date	Repayment terms	Interest rate
(1) 1,868,842	11/01/08	11/01/38		0.000
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

Security provided by borrower	Purpose of loan
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	

Consideration furnished by lender	Balance due at beginning of year	Balance due at end of year
(1)		1,868,842
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Totals		1,868,842