

PUBLIC DISCLOSURE COPY

Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

2019**Open to Public Inspection**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2019 calendar year, or tax year beginning , 2019, and ending , 20																									
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2">C Name of organization <u>YOUNG MEN'S CHRISTIAN ASSOCIATION OF METROPOLITAN LOS ANGELES</u></td> <td>D Employer identification number <u>95-1644052</u></td> </tr> <tr> <td colspan="2">Doing business as</td> <td rowspan="3">E Telephone number <u>(213) 351-2254</u></td> </tr> <tr> <td>Number and street (or P.O. box if mail is not delivered to street address)</td> <td>Room/suite</td> </tr> <tr> <td colspan="2"><u>625 S NEW HAMPSHIRE AVE</u></td> </tr> <tr> <td colspan="2">City or town, state or province, country, and ZIP or foreign postal code <u>LOS ANGELES, CA 90005-1342</u></td> <td rowspan="2">G Gross receipts \$ <u>180,346,193</u></td> </tr> <tr> <td colspan="2">F Name and address of principal officer: <u>ALAN C HOSTRUP</u> <u>SAME AS C ABOVE</u></td> </tr> <tr> <td colspan="2">I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527</td> <td> H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶ </td> </tr> <tr> <td colspan="2">J Website: ▶ <u>WWW.YMCALA.ORG</u></td> <td></td> </tr> <tr> <td colspan="2">K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶</td> <td>L Year of formation: <u>1882</u> M State of legal domicile: <u>CA</u></td> </tr> </table>	C Name of organization <u>YOUNG MEN'S CHRISTIAN ASSOCIATION OF METROPOLITAN LOS ANGELES</u>		D Employer identification number <u>95-1644052</u>	Doing business as		E Telephone number <u>(213) 351-2254</u>	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	<u>625 S NEW HAMPSHIRE AVE</u>		City or town, state or province, country, and ZIP or foreign postal code <u>LOS ANGELES, CA 90005-1342</u>		G Gross receipts \$ <u>180,346,193</u>	F Name and address of principal officer: <u>ALAN C HOSTRUP</u> <u>SAME AS C ABOVE</u>		I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶	J Website: ▶ <u>WWW.YMCALA.ORG</u>			K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: <u>1882</u> M State of legal domicile: <u>CA</u>
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Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: <u>THE YMCA OF METROPOLITAN LOS ANGELES' MISSION IS TO PUT JUDEO-CHRISTIAN PRINCIPLES INTO PRACTICE THROUGH PROGRAMS THAT BUILD HEALTHY SPIRIT, MIND AND BODY FOR ALL.</u>
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.
	3	Number of voting members of the governing body (Part VI, line 1a) 3 <u>60</u>
	4	Number of independent voting members of the governing body (Part VI, line 1b) 4 <u>59</u>
	5	Total number of individuals employed in calendar year 2019 (Part V, line 2a) 5 <u>3,784</u>
	6	Total number of volunteers (estimate if necessary) 6 <u>11,000</u>
	7a	Total unrelated business revenue from Part VIII, column (C), line 12 7a <u>0</u>
b	Net unrelated business taxable income from Form 990-T, line 39 7b	
Revenue	8	Contributions and grants (Part VIII, line 1h) <u>24,561,334</u> Prior Year <u>18,255,928</u> Current Year
	9	Program service revenue (Part VIII, line 2g) <u>75,810,251</u> <u>80,586,268</u>
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d) <u>5,246,971</u> <u>18,516,962</u>
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) <u>1,442,059</u> <u>1,813,605</u>
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) <u>107,060,615</u> <u>119,172,763</u>
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3) <u>16,000</u> <u>21,000</u>
	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) <u>53,807,455</u> <u>57,563,035</u>
	16a	Professional fundraising fees (Part IX, column (A), line 11e) <u>193,215</u> <u>155,371</u>
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ <u>2,833,308</u>
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) <u>43,734,469</u> <u>45,899,859</u>
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) <u>97,751,139</u> <u>103,639,265</u>
19	Revenue less expenses. Subtract line 18 from line 12 <u>9,309,476</u> <u>15,533,498</u>	
Net Assets or Fund Balances	20	Total assets (Part X, line 16) <u>221,732,642</u> Beginning of Current Year <u>242,668,477</u> End of Year
	21	Total liabilities (Part X, line 26) <u>69,429,709</u> <u>60,227,021</u>
	22	Net assets or fund balances. Subtract line 21 from line 20 <u>152,302,933</u> <u>182,441,456</u>

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		09/15/20	
	Signature of officer	Date	
	<u>JENNY CHAN, EVP / CFO</u>		
	Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	Firm's name ▶	Firm's EIN ▶	
	Firm's address ▶	Phone no.	
	Check <input type="checkbox"/> if self-employed		

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

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 11282Y

Form **990** (2019)

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☐ Yes ☒ No

- 1** Briefly describe the organization's mission:
THE YMCA OF METROPOLITAN LOS ANGELES ("YMCA" OR "LA Y" OR "THE Y") IS COMMITTED TO STRENGTHENING COMMUNITIES THROUGH YOUTH DEVELOPMENT, HEALTHY LIVING, AND SOCIAL RESPONSIBILITY. THE LA Y IS ONE OF THE OLDEST, LARGEST, AND HIGHEST-IMPACT Y ASSOCIATIONS IN THE WORLD. FOUNDED IN 1882 - WHEN LA HAD
 (CONTINUED ON SCHEDULE O)
- 2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No
 If "Yes," describe these new services on Schedule O.
- 3** Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No
 If "Yes," describe these changes on Schedule O.
- 4** Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 50,421,203 including grants of \$) (Revenue \$ 53,879,961)

PROGRAMS FOR HEALTHY LIVING:

BY EMPOWERING ALL PEOPLE TO LEAD FULLER LIVES, THE LA Y OFFERS THE RESOURCES, SUPPORT AND GUIDANCE TO IMPROVE THE HEALTH AND WELLNESS OF EVERY MEMBER OF THE COMMUNITY.

THE LA Y OFFERS AN ARRAY OF PROGRAMS THAT ENCOURAGE GOOD HEALTH AND FOSTER CONNECTIONS THROUGH FITNESS, SPORTS AND SHARED INTERESTS, INCLUDING:

* HEALTH, WELL-BEING AND WELLNESS PROGRAMS WITH 2,000 GROUP EXERCISE CLASSES, PERSONAL ASSISTANCE FROM CERTIFIED PERSONAL TRAINERS, ARTHRITIS CLASSES AND WEIGHT LOSS PROGRAMS THAT SUPPORT OUR COMMUNITIES THROUGHOUT LA COUNTY IN LIVING HEALTHIER LIVES. THE Y IS ON THE FRONT LINES OF PREVENTATIVE HEALTH ASSISTING COMMUNITY MEMBERS IN THEIR FIGHT AGAINST UNDERLYING HEALTH CONDITIONS.
 (CONTINUED ON SCHEDULE O)

4b (Code:) (Expenses \$ 25,747,421 including grants of \$) (Revenue \$ 19,454,063)

PROGRAMS FOR YOUTH DEVELOPMENT:

COMMITTED TO CULTIVATING THE GROWTH AND DEVELOPMENT OF OUR YOUNGEST MEMBERS, THE LA Y OFFERS AFFORDABLE, QUALITY PROGRAMS THAT SUPPORT AND NURTURE THE POTENTIAL OF EVERY INFANT, CHILD AND TEEN. IN A SAFE AND STRUCTURED ENVIRONMENT, CHILDREN LEARN SKILLS AND DEVELOP RELATIONSHIPS THAT LEAD TO POSITIVE BEHAVIOR, BUILD ON EDUCATIONAL ACHIEVEMENT AND DEVELOP HEALTHY HABITS THAT WILL CARRY THEM THROUGHOUT THEIR LIVES.

WITH SO MANY DEMANDS ON TODAY'S FAMILIES, PARENTS NEED ALL THE SUPPORT THEY CAN GET. THE Y'S INFANT, TODDLER, PRESCHOOL AND AFTER SCHOOL PROGRAMS ARE ABOUT MORE THAN LOOKING AFTER KIDS, BUT PROVIDING RESOURCES IN THE CHILD'S DEVELOPMENT AND GROWTH. THE Y'S SWIM, SPORTS AND PLAY, YOUTH AND LEADERSHIP AND YOUTH CAMPS PROVIDE A FUN EXPERIENCE WHILE SUPPORTING A HEALTHY AND ACTIVE LIFESTYLE ALONG WITH
 (CONTINUED ON SCHEDULE O)

4c (Code:) (Expenses \$ 15,453,872 including grants of \$) (Revenue \$ 7,252,244)

PROGRAMS FOR SOCIAL RESPONSIBILITY:

THE LA Y ACTS AS A LEADER IN CREATING POSITIVE CHANGES IN OUR NEIGHBORHOODS AND RESPONDING TO ISSUES THAT AFFECT THE QUALITY OF LIFE FOR KIDS AND FAMILIES. THE Y BELIEVES IN GIVING BACK AND PROVIDING SUPPORT TO OUR NEIGHBORS BY DEVELOPING VOLUNTEER LEADERS THROUGH FUNDRAISING ACTIVITIES, COMMUNITY PARTNERSHIPS AND COLLABORATING WITH POLICYMAKERS, COMMUNITY LEADERS AND PRIVATE AND PUBLIC ORGANIZATION TO BUILD HEALTHIER COMMUNITIES THROUGHOUT LOS ANGELES.

THE LA Y ALSO OFFERS EDUCATION AND LEADERSHIP PROGRAMS THAT DEVELOP KNOWLEDGE AND CHARACTER, WHILE GIVING GUIDANCE AND ENCOURAGEMENT TO HELP REALIZE THEIR POTENTIAL AND GIVING BACK TO THEIR COMMUNITY.

(CONTINUED ON SCHEDULE O)

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

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses **91,622,496**

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	1 ✓	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2 ✓	
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	3	✓
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4 ✓	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	✓
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	✓
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	7	✓
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	✓
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9 ✓	
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	10 ✓	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a ✓	
b Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	✓
c Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	✓
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	✓
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e ✓	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f ✓	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	✓
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b ✓	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	✓
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	✓
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b ✓	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15 ✓	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16	✓
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17 ✓	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18 ✓	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19 ✓	
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	✓
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	✓

Part IV Checklist of Required Schedules (continued)

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

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

	Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	280
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	✓

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

		Yes	No		
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	3,784		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	✓		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	✓		
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	✓		
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)?	4a	✓		
b	If "Yes," enter the name of the foreign country ▶ VI, CJ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		✓	
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓	
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		✓	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
7	Organizations that may receive deductible contributions under section 170(c).				
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	✓		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	✓		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		✓	
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		✓	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		✓	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h			
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8			
9	Sponsoring organizations maintaining donor advised funds.				
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a			
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b			
10	Section 501(c)(7) organizations. Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		✓	
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b			
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15		✓	
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		✓	

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI ☒

Section A. Governing Body and Management

	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year 1a 60 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
b Enter the number of voting members included on line 1a, above, who are independent 1b 59		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 2		✓
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? 3		✓
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4		✓
5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5		✓
6 Did the organization have members or stockholders? 6		✓
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a		✓
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b		✓
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body? 8a	✓	
b Each committee with authority to act on behalf of the governing body? 8b	✓	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O 9		✓

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10a Did the organization have local chapters, branches, or affiliates? 10a	✓	
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b	✓	
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a	✓	
b Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a	✓	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b	✓	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c	✓	
13 Did the organization have a written whistleblower policy? 13	✓	
14 Did the organization have a written document retention and destruction policy? 14	✓	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official 15a	✓	
b Other officers or key employees of the organization 15b	✓	
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a		✓
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ► CA

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☒ Own website ☐ Another's website ☒ Upon request ☐ Other (explain on Schedule O)

19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records ►
JENNY CHAN, 625 S NEW HAMPSHIRE AVE, LOS ANGELES, CA 90005-1342, (213) 351-2254, FAX: (213) 251-9724

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

See instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ALAN C HOSTRUP PRESIDENT & CEO	50.0 1.0	✓		✓				503,300	0	43,596
(2) M DENGLE EVP COO	50.0 1.0			✓				346,291	0	38,212
(3) D LIPMAN EVP HUMAN RESOURCES	50.0			✓				274,975	0	59,700
(4) J CHAN EVP CFO	50.0 1.0			✓				242,660	0	45,267
(5) V DOMINGUEZ EVP CHIEF MISSION ADVANCEMENT OFFICER	50.0			✓				207,755	0	24,375
(6) R CORONA SVP BRANCH OPERATIONS	50.0				✓			194,908	0	38,000
(7) D POWELL SVP BRANCH OPERATIONS	50.0				✓			182,435	0	22,599
(8) S MARASCO SVP BRANCH OPERATIONS	50.0				✓			172,081	0	27,088
(9) J STANTON EXECUTIVE DIRECTOR AND VP	50.0				✓			185,989	0	26,456
(10) S MACALLER EXECUTIVE DIRECTOR	50.0				✓			162,477	0	39,783
(11) J DE LA CRUZ SVP COMMUNITY DEVELOPMENT	50.0					✓		162,011	0	24,117
(12) D PRICE SVP INFORMATION TECHNOLOGY	50.0					✓		150,803	0	34,726
(13) L VAN INGEN POPE SVP BRANCH FINANCIAL DEVELOPMENT	50.0					✓		148,609	0	37,993
(14) P RUTHERFORD VP PROPERTIES & FACILITIES	50.0					✓		147,165	0	21,118

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) W MENCHACA VP MISSION ADVANCEMENT	50.0					✓		138,958	0	26,571
(16) MARK HELM CHAIRMAN OF THE BOARD	1.0 1.0	✓		✓				0	0	0
(17) CRISTINA ROSE IMMEDIATE PAST CHAIRMAN	1.0 1.0	✓		✓				0	0	0
(18) W. J. ELLISON PAST CHAIRMAN	1.0	✓		✓				0	0	0
(19) ROBERT J LOWE PAST CHAIRMAN	1.0	✓		✓				0	0	0
(20) BRYAN PALBAUM TREASURER	1.0 1.0	✓		✓				0	0	0
(21) JOHN W ALDEN, JR SECRETARY	1.0	✓		✓				0	0	0
(22) KELLY CHEESEMAN VICE CHAIRMAN	1.0	✓		✓				0	0	0
(23) ANDREW E CROWELL VICE CHAIRMAN	1.0	✓		✓				0	0	0
(24) TODD M KATZ VICE CHAIRMAN	1.0	✓		✓				0	0	0
(25) (SEE STATEMENT)										
1b Subtotal								3,220,417	0	509,601
c Total from continuation sheets to Part VII, Section A								0	0	0
d Total (add lines 1b and 1c)								3,220,417	0	509,601

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **▶** 30

3 Did the organization list any **former** officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual **3** Yes No

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual **4** Yes No

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person **5** Yes No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
PRONTO JANITORIAL SVCS INC, 12561 PERSING DRIVE, WHITTIER, CA 90606	BUILDING MAINTENANCE	2,994,496
AQUARIUM CONCRETE COMPANY, 19201 STRATHEN STREET, RESEDA, CA 91335	CONSTRUCTION	728,865
OPTIMA RPM INC, 17945 SKY PARK CIRCLE, IRVINE, CA 92614	CONSTRUCTION	624,370
AIR SERVICE HVAC, 211 S. STATE COLLEGE SUITE 126, ANAHEIM, CA 92806	BUILDING MAINTENANCE	550,620
ACTIVE NETWORK LLC, PO BOX 744932, ATLANTA, CA 30384-4932	IT SERVICES	499,000

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **▶** 32

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a	9,532			
	b	Membership dues	1b	0			
	c	Fundraising events	1c	2,047,739			
	d	Related organizations	1d	0			
	e	Government grants (contributions)	1e	3,572,211			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	12,626,446			
	g	Noncash contributions included in lines 1a-1f	1g	\$ 3,737,135			
	h	Total. Add lines 1a-1f		18,255,928			
	Program Service Revenue	Business Code					
2a		HEALTHY LIVING		53,879,961	53,879,961		
b		YOUTH DEVELOPMENT		19,454,063	19,454,063		
c		SOCIAL RESPONSIBILITY		7,252,244	7,252,244		
d							
e							
f		All other program service revenue		0	0	0	0
g		Total. Add lines 2a-2f		80,586,268			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		1,396,843			1,396,843
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6a	Gross rents	(i) Real	854,249			
	b	Less: rental expenses	(ii) Personal				
	c	Rental income or (loss)		854,249	0		
	d	Net rental income or (loss)		854,249			854,249
	7a	Gross amount from sales of assets other than inventory	(i) Securities	62,319,496	15,060,000		
	b	Less: cost or other basis and sales expenses	(ii) Other	59,579,859	679,518		
	c	Gain or (loss)		2,739,637	14,380,482		
	d	Net gain or (loss)		17,120,119			17,120,119
	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18		798,965			
	b	Less: direct expenses		885,820			
	c	Net income or (loss) from fundraising events		(86,855)			(86,855)
	9a	Gross income from gaming activities. See Part IV, line 19		46,452			
	b	Less: direct expenses		28,233			
	c	Net income or (loss) from gaming activities		18,219			18,219
	10a	Gross sales of inventory, less returns and allowances					
	b	Less: cost of goods sold					
c	Net income or (loss) from sales of inventory						
Miscellaneous Revenue	Business Code						
	11a	MISCELLANEOUS FEES	900099	283,775			283,775
	b	INSURANCE SETTLEMENT	900099	402,354			402,354
	c	RETURNED PAYMENT FEES	900099	4,142			4,142
	d	All other revenue	900099	337,721	0	0	337,721
	e	Total. Add lines 11a-11d		1,027,992			
12	Total revenue. See instructions		119,172,763	80,586,268	0	20,330,567	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX ☐**Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.**

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	0	0		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	0	0		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	21,000	21,000		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	2,837,947	1,436,319	1,169,498	232,130
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	0
7 Other salaries and wages	45,100,755	39,823,360	3,868,819	1,408,576
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	2,578,566	2,129,209	353,390	95,967
9 Other employee benefits	2,529,183	2,221,937	223,429	83,817
10 Payroll taxes	4,516,584	3,824,631	539,431	152,522
11 Fees for services (nonemployees):				
a Management				
b Legal	341,084	210,222	130,862	
c Accounting	193,892		193,892	
d Lobbying	6,550	6,550		
e Professional fundraising services. See Part IV, line 17	155,371			155,371
f Investment management fees	226,572		226,572	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	3,990,564	3,501,406	398,089	91,069
12 Advertising and promotion	1,277,265	1,106,189	48,049	123,027
13 Office expenses	2,275,637	2,109,273	41,310	125,054
14 Information technology	927,110	619,014	308,096	0
15 Royalties				
16 Occupancy	13,697,896	13,568,920	121,976	7,000
17 Travel	2,109,495	1,988,195	72,246	49,054
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	2,473,490	1,980,022	307,119	186,349
20 Interest	1,413,870	1,385,737	28,133	
21 Payments to affiliates	560,576	560,576		
22 Depreciation, depletion, and amortization	8,763,820	8,589,437	174,383	
23 Insurance	2,039,011	1,872,692	166,319	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a <u>SUPPLIES</u>	2,835,770	2,689,625	45,192	100,953
b <u>EQUIPMENT RENTAL & MAINTENANCE</u>	1,019,870	977,175	42,695	
c <u>OTHER</u>	1,747,387	1,001,007	723,961	22,419
d				
e All other expenses	0	0	0	0
25 Total functional expenses. Add lines 1 through 24e	103,639,265	91,622,496	9,183,461	2,833,308
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	6,096,781	1	6,524,115
	2 Savings and temporary cash investments	0	2	0
	3 Pledges and grants receivable, net	4,827,183	3	5,616,692
	4 Accounts receivable, net	1,889,994	4	2,320,872
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	0	5	0
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	0	6	0
	7 Notes and loans receivable, net	0	7	0
	8 Inventories for sale or use	9,240	8	8,570
	9 Prepaid expenses and deferred charges	2,129,273	9	5,033,849
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 264,481,323		
	b Less: accumulated depreciation	10b 125,989,070		
	11 Investments—publicly traded securities	54,453,723	11	72,689,384
	12 Investments—other securities. See Part IV, line 11	6,783,486	12	7,935,289
	13 Investments—program-related. See Part IV, line 11	0	13	0
	14 Intangible assets	0	14	
	15 Other assets. See Part IV, line 11	3,865,701	15	4,047,453
16 Total assets. Add lines 1 through 15 (must equal line 33)	221,732,642	16	242,668,477	
Liabilities	17 Accounts payable and accrued expenses	9,806,913	17	9,681,447
	18 Grants payable	0	18	0
	19 Deferred revenue	3,910,591	19	4,148,774
	20 Tax-exempt bond liabilities	24,955,000	20	23,480,000
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	345,270	21	83,453
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	0	22	0
	23 Secured mortgages and notes payable to unrelated third parties	12,850,030	23	12,926,173
	24 Unsecured notes and loans payable to unrelated third parties	7,830,000	24	0
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D	9,731,905	25	9,907,174
	26 Total liabilities. Add lines 17 through 25	69,429,709	26	60,227,021
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	91,213,238	27	111,294,397
	28 Net assets with donor restrictions	61,089,695	28	71,147,059
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	152,302,933	32	182,441,456
33 Total liabilities and net assets/fund balances	221,732,642	33	242,668,477	

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Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	119,172,763
2	Total expenses (must equal Part IX, column (A), line 25)	2	103,639,265
3	Revenue less expenses. Subtract line 2 from line 1	3	15,533,498
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	152,302,933
5	Net unrealized gains (losses) on investments	5	7,834,904
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	6,770,121
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	182,441,456

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? . . . If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		✓
b Were the organization's financial statements audited by an independent accountant? . . . If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	✓	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? . . . If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	✓	
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? . . .	✓	
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits .	✓	

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (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			
(25) DANA KRAVETZ ----- VICE CHAIRMAN	1.0 -----	✓		✓				0	0	0
(26) MELVIN D LINDSEY ----- VICE CHAIRMAN	1.0 -----	✓		✓				0	0	0
(27) JOHN F LLEWELLYN ----- VICE CHAIRMAN	1.0 -----	✓		✓				0	0	0
(28) PATRICK MONROE ----- VICE CHAIRMAN	1.0 -----	✓		✓				0	0	0
(29) RICHARD G NEWMAN ----- VICE CHAIRMAN	1.0 -----	✓		✓				0	0	0
(30) PATRICK J NIEMANN ----- VICE CHAIRMAN	1.0 -----	✓		✓				0	0	0
(31) JOHN B POWER ----- VICE CHAIRMAN	1.0 -----	✓		✓				0	0	0
(32) LES YBARRA ----- VICE CHAIRMAN	1.0 -----	✓		✓				0	0	0
(33) GREG MEYER (FROM 1-19) ----- CHAIR, BOARD OF GOVERNORS	1.0 -----	✓		✓				0	0	0
(34) ROLAND FARGO (TO 3-19) ----- VICE CHAIRMAN	1.0 -----	✓		✓				0	0	0
(35) ROBERT J ABERNETHY ----- BOARD MEMBER	1.0 -----	✓						0	0	0
(36) LINDA ALVAREZ ----- BOARD MEMBER	1.0 -----	✓						0	0	0
(37) BILL APPEGATE ----- BOARD MEMBER	1.0 -----	✓						0	0	0
(38) EMILY LUDMIR AVIAD ----- BOARD MEMBER	1.0 -----	✓						0	0	0
(39) WHITLEY C COLLINS ----- BOARD MEMBER	1.0 -----	✓						0	0	0
(40) DANA DEBEL ----- BOARD MEMBER	1.0 -----	✓						0	0	0
(41) NEHAL A DESAI ----- BOARD MEMBER	1.0 -----	✓						0	0	0
(42) R TODD DONEY ----- BOARD MEMBER	1.0 -----	✓						0	0	0
(43) EARL E GALES, JR ----- BOARD MEMBER	1.0 -----	✓						0	0	0
(44) ANTON C GARNIER ----- BOARD MEMBER	1.0 -----	✓						0	0	0

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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			
(45) JOSE A GOMEZ, PH.D ----- BOARD MEMBER	1.0 -----	✓						0	0	0
(46) CRAIG HIRSON ----- BOARD MEMBER	1.0 -----	✓						0	0	0
(47) ANTONIA JIMENEZ ----- BOARD MEMBER	1.0 -----	✓						0	0	0
(48) ALAN KREDITOR ----- BOARD MEMBER	1.0 -----	✓						0	0	0
(49) TONY LEE ----- BOARD MEMBER	1.0 -----	✓						0	0	0
(50) GLENVILLE A MARCH, MD ----- BOARD MEMBER	1.0 -----	✓						0	0	0
(51) JERRY MARCIL ----- BOARD MEMBER	1.0 -----	✓						0	0	0
(52) JIM MCDONNELL ----- BOARD MEMBER	1.0 -----	✓						0	0	0
(53) STEPHEN C MEIER ----- BOARD MEMBER	1.0 -----	✓						0	0	0
(54) MICHEL MOORE ----- BOARD MEMBER	1.0 -----	✓						0	0	0
(55) JUDITH ANDERSON MUNZIG ----- BOARD MEMBER	1.0 -----	✓						0	0	0
(56) TERYL MURABAYASHI ----- BOARD MEMBER	1.0 -----	✓						0	0	0
(57) STEVEN NISSEN ----- BOARD MEMBER	1.0 -----	✓						0	0	0
(58) FABIAN NUNEZ ----- BOARD MEMBER	1.0 -----	✓						0	0	0
(59) WILLIAM M PETMECKY ----- BOARD MEMBER	1.0 -----	✓						0	0	0
(60) CHESTER (CHET) PIPKIN ----- BOARD MEMBER	1.0 -----	✓						0	0	0
(61) ANTHONY POTTS ----- BOARD MEMBER	1.0 -----	✓						0	0	0
(62) JOHN H SANDERS ----- BOARD MEMBER	1.0 -----	✓						0	0	0
(63) JOHN H SEMCKEN, III ----- BOARD MEMBER	1.0 -----	✓						0	0	0
(64) HUGO SIBRIAN ----- BOARD MEMBER	1.0 -----	✓						0	0	0
(65) STEVE SILK ----- BOARD MEMBER	1.0 -----	✓						0	0	0

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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			
(66) KEITH TERASAKI, MD ----- BOARD MEMBER	1.0 -----	✓						0	0	0
(67) BRIAN ULF ----- BOARD MEMBER	1.0 -----	✓						0	0	0
(68) JOSEPH VALDES ----- BOARD MEMBER	1.0 -----	✓						0	0	0
(69) BONNIE BARNES (FROM 5-19) ----- BOARD MEMBER	1.0 -----	✓						0	0	0
(70) WENDY GREUEL (FROM 3-19) ----- BOARD MEMBER	1.0 -----	✓						0	0	0
(71) HANOZ GANDHI (FROM 11-19) ----- BOARD MEMBER	1.0 -----	✓						0	0	0
(72) DAN GUERRERO (FROM 1-19) ----- BOARD MEMBER	1.0 -----	✓						0	0	0
(73) DAVID SIEGEL (FROM 9-19) ----- BOARD MEMBER	1.0 -----	✓						0	0	0
(74) CHRIS WALLACE (FROM 5-19) ----- BOARD MEMBER	1.0 -----	✓						0	0	0
(75) CEDRIC WILLIAMS (FROM 3-19) ----- BOARD MEMBER	1.0 -----	✓						0	0	0
(76) RICHARD D CORDOVA (TO 6-19) ----- BOARD MEMBER	1.0 -----	✓						0	0	0
(77) ALLEN MILLER (TO 01-19) ----- BOARD MEMBER	1.0 -----	✓						0	0	0
(78) MICHAEL ZWEIBACK (TO 6-19) ----- BOARD MEMBER	1.0 -----	✓						0	0	0

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

**Open to Public
Inspection**

Name of the organization

YOUNG MEN'S CHRISTIAN ASSOCIATION OF METROPOLITAN LOS ANGELES

Employer identification number

95-1644052

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

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 ☐ A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 ☐ An organization that normally receives: (1) more than 33 $\frac{1}{3}$ % 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 $\frac{1}{3}$ % 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.)
- 11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 ☐ 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 in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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

Cat. No. 11285F

Schedule A (Form 990 or 990-EZ) 2019

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	26,826,411	21,754,274	24,059,615	24,561,334	18,255,928	115,457,562
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0
4 Total. Add lines 1 through 3	26,826,411	21,754,274	24,059,615	24,561,334	18,255,928	115,457,562
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)						0
6 Public support. Subtract line 5 from line 4						115,457,562

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 Amounts from line 4	26,826,411	21,754,274	24,059,615	24,561,334	18,255,928	115,457,562
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	1,649,480	1,512,665	1,747,797	2,262,632	2,251,092	9,423,666
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	1,007,461	1,471,900	989,247	1,293,750	1,601,193	6,363,551
11 Total support. Add lines 7 through 10						131,244,779
12 Gross receipts from related activities, etc. (see instructions)					12	365,986,527
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 2019 (line 6, column (f) divided by line 11, column (f))	14	87.97 %
15 Public support percentage from 2018 Schedule A, Part II, line 14	15	88.62 %
16a 33¹/₃% support test—2019. 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 33¹/₃% support test—2018. 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—2019. 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 VI 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—2018. 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 VI 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 10 of Part I or if the organization failed to qualify under Part II.
If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(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 through 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 \$5,000 or 1% of the amount on line 13 for the year						
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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(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 VI.)						
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 <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2018 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2019 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2018 Schedule A, Part III, line 17	18	%
19a 33 1/3% support tests—2019. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 33 1/3% support tests—2018. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization <input type="checkbox"/>		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions <input type="checkbox"/>		

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).			
2 Activities Test. Answer (a) and (b) below.			
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.			
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
3 Parent of Supported Organizations. Answer (a) and (b) below.			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI .			
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.			

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1** ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C—Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7 <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).			

Schedule A (Form 990 or 990-EZ) 2019

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D—Distributions		Current Year	
1	Amounts paid to supported organizations to accomplish exempt purposes		
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity		
3	Administrative expenses paid to accomplish exempt purposes of supported organizations		
4	Amounts paid to acquire exempt-use assets		
5	Qualified set-aside amounts (prior IRS approval required)		
6	Other distributions (describe in Part VI). See instructions.		
7	Total annual distributions. Add lines 1 through 6.		
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.		
9	Distributable amount for 2019 from Section C, line 6		
10	Line 8 amount divided by line 9 amount		

Section E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required—explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019			
a From 2014			
b From 2015			
c From 2016			
d From 2017			
e From 2018			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI . See instructions.			
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2020. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015 . . .			
b Excess from 2016 . . .			
c Excess from 2017 . . .			
d Excess from 2018 . . .			
e Excess from 2019 . . .			

Schedule A (Form 990 or 990-EZ) 2019

Part VI

Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Return Reference - Identifier	Explanation						
SCHEDULE A, PART II, LINE 10 - OTHER INCOME	Description	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	INSURANCE SETTLEMENT	898	375,000	2,550	209,816	402,354	990,618
	GROSS INCOME SPECIAL EVENTS	670,327	755,732	791,127	845,205	845,417	3,907,808
	RETURNED PAYMENT FEES	7,962	8,561	6,527	4,625	4,142	31,817
	OTHER	328,274	332,607	189,043	234,104	349,280	1,433,308
	Total	1,007,461	1,471,900	989,247	1,293,750	1,601,193	6,363,551

Schedule B(Form 990, 990-EZ,
or 990-PF)Department of the Treasury
Internal Revenue Service**Schedule of Contributors**▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

Name of the organization

YOUNG MEN'S CHRISTIAN ASSOCIATION OF METROPOLITAN LOS ANGELES

Employer identification number

95-1644052

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

- ☐
- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- ☒
- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33
- $\frac{1}{3}$
- % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of
- (1)**
- \$5,000; or
- (2)**
- 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

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

- ☐
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions
- exclusively*
- for religious, charitable, etc., purposes, but no such contributions totaled 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. Don't complete any of the parts unless the
- General Rule**
- applies to this organization because it received
- nonexclusively*
- religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

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

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Cat. No. 30613X Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

Name of organization YOUNG MEN'S CHRISTIAN ASSOCIATION OF METROPOLITAN LOS ANGELES	Employer identification number 95-1644052
--	---

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 2,257,281	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2		\$ 1,025,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3		\$ 1,030,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
4		\$ 1,025,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
5		\$ 600,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
6		\$ 410,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

YOUNG MEN'S CHRISTIAN ASSOCIATION OF METROPOLITAN LOS ANGELES

Employer identification number

95-1644052

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ 469,125	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8		\$ 761,800	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

YOUNG MEN'S CHRISTIAN ASSOCIATION OF METROPOLITAN LOS ANGELES

Employer identification number

95-1644052

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
3	PLEDGE RECEIVABLE	\$ 1,000,000	12/31/2019
4	PLEDGE RECEIVABLE	\$ 1,000,000	12/31/2019
5	PLEDGE RECEIVABLE	\$ 600,000	09/27/2019
6	PLEDGE RECEIVABLE	\$ 400,000	12/31/2019
		\$	
		\$	

Name of organization

YOUNG MEN'S CHRISTIAN ASSOCIATION OF METROPOLITAN LOS ANGELES

Employer identification number

95-1644052

Part III **Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor.** Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ▶ \$ _____

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	----- ----- -----	----- ----- -----	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	----- ----- -----	----- ----- -----	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	----- ----- -----	----- ----- -----	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	----- ----- -----	----- ----- -----	

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527
▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047

2019

**Open to Public
Inspection**

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization

YOUNG MEN'S CHRISTIAN ASSOCIATION OF METROPOLITAN LOS ANGELES

Employer identification number

95-1644052

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. (see instructions for definition of "political campaign activities")
- 2 Political campaign activity expenditures (see instructions) ▶ \$
- 3 Volunteer hours for political campaign activities (see instructions)

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No
- 4a Was a correction made? ☐ Yes ☐ No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$
- 4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

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

Cat. No. 50084S

Schedule C (Form 990 or 990-EZ) 2019

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grassroots lobbying)														
b	Total lobbying expenditures to influence a legislative body (direct lobbying)														
c	Total lobbying expenditures (add lines 1a and 1b)														
d	Other exempt purpose expenditures														
e	Total exempt purpose expenditures (add lines 1c and 1d)														
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 40%;">If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	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.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
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.														
g	Grassroots nontaxable amount (enter 25% of line 1f)														
h	Subtract line 1g from line 1a. If zero or less, enter -0-														
i	Subtract line 1f from line 1c. If zero or less, enter -0-														
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No													

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 separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2019

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?		✓	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		✓	
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?	✓		6,550
g Direct contact with legislators, their staffs, government officials, or a legislative body?		✓	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		✓	
i Other activities?		✓	
j Total. Add lines 1c through 1i			6,550
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		✓	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

SEE NEXT PAGE

Part IV

Supplemental Information. Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference - Identifier	Explanation
SCHEDULE C, PART II-B, LINE 1 - DETAILED DESCRIPTION OF THE LOBBYING ACTIVITY	THE ORGANIZATION PAYS CALIFORNIA STATE ALLIANCE OF YMCAS AN ANNUAL STIPEND, WHICH INCLUDES LOBBYING ACTIVITIES WHICH FURTHER THE GOALS AND MISSION OF THE YMCA, INCLUDING LETTERS OF SUPPORT OF LEGISLATION, TESTIMONY BEFORE LEGISLATIVE COMMITTEES AND SPEAKING TO LEGISLATORS.

**SCHEDULE D
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

**Open to Public
Inspection**

Name of the organization

YOUNG MEN'S CHRISTIAN ASSOCIATION OF METROPOLITAN LOS ANGELES

Employer identification number

95-1644052

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Part II Conservation Easements.

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

1 Purpose(s) of conservation easements held by the organization (check all that apply). <input type="checkbox"/> Preservation of land for public use (for example, recreation or education) <input type="checkbox"/> Preservation of a historically important land area <input type="checkbox"/> Protection of natural habitat <input type="checkbox"/> Preservation of a certified historic structure <input type="checkbox"/> Preservation of open space	
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►	
4 Number of states where property subject to conservation easement is located ►	
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ►	
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$	
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.	

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.	
b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:	
(i) Revenue included on Form 990, Part VIII, line 1	► \$
(ii) Assets included in Form 990, Part X	► \$
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:	
a Revenue included on Form 990, Part VIII, line 1	► \$
b Assets included in Form 990, Part X	► \$

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

- 3** Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a** ☐ Public exhibition **d** ☐ Loan or exchange program
- b** ☐ Scholarly research **e** ☐ Other _____
- c** ☐ Preservation for future generations
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements.

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

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☒ No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | 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, for escrow or custodial account liability? ☒ Yes ☐ No
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII ☒

Part V Endowment Funds.

Complete if the organization answered "Yes" on 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	63,039,118	61,762,364	44,821,617	48,419,607	42,438,763
b Contributions	1,268,873	8,608,885	13,371,815	2,430,346	8,513,410
c Net investment earnings, gains, and losses	11,852,156	(3,719,376)	7,540,734	2,614,320	(316,384)
d Grants or scholarships					
e Other expenditures for facilities and programs	3,910,129	3,370,611	3,769,094	8,469,540	2,028,309
f Administrative expenses	226,925	242,144	202,708	173,116	187,873
g End of year balance	72,023,093	63,039,118	61,762,364	44,821,617	48,419,607

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

- a** Board designated or quasi-endowment ☒ 17.78 %
- b** Permanent endowment ☒ 59.44 %
- c** Term endowment ☒ 22.78 %

The percentages on lines 2a, 2b, and 2c should equal 100%.

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

	Yes	No
(i) Unrelated organizations	3a(i)	<input checked="" type="checkbox"/>
(ii) Related organizations	3a(ii)	<input checked="" type="checkbox"/>
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	3b	<input checked="" type="checkbox"/>

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

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		20,248,958		20,248,958
b Buildings		221,967,204	113,132,860	108,834,344
c Leasehold improvements		384,774	384,774	0
d Equipment		17,839,288	12,471,436	5,367,852
e Other		4,041,099		4,041,099
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				138,492,253

Part VII Investments—Other Securities.

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

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

Part VIII Investments—Program Related.

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

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) INSURANCE CLAIMS PAYABLE - CURR	1,374,000
(3) OBLIG UNDER CAPITAL LEASES - CURR	841,000
(4) INSURANCE CLAIMS PAYABLE - NON CURR	4,541,951
(5) OBLIG UNDER CAPITAL LEASES - NON CURR	414,531
(6) OBLIG UNDER INTEREST RATE SWAP AGREEMENT	1,809,078
(7) OBLIG UNDER SPLIT- INTEREST AGREEMENTS	926,614
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	9,907,174

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

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

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

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

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

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

1	Total expenses and losses per audited financial statements		1	
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	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	

Part XIII Supplemental Information.

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

[SEE STATEMENT](#)

Part XIII

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

Return Reference - Identifier	Explanation
SCHEDULE D, PART IV, LINE 2B - EXPLANATION OF ESCROW AGREEMENT	THE ASSOCIATION SERVES AS THE CUSTODIAN FOR FUNDS HELD INDEPENDENTLY OF THE ASSOCIATION FOR CLUBS, YOUTH SPORTS TEAMS AND SPECIALIZED PROGRAMS, WHEN THESE OUTSIDE GROUPS DO NOT HOLD BANK ACCOUNTS.
SCHEDULE D, PART V, LINE 4 - INTENDED USES OF ENDOWMENT FUNDS	THE ASSOCIATION'S ENDOWMENT FUNDS INCLUDE THOSE ASSETS OF DONOR-RESTRICTED FUNDS THAT THE ORGANIZATION MUST HOLD IN PERPETUITY OR FOR A DONOR-SPECIFIED PERIOD AND PURPOSE, AS WELL AS UNRESTRICTED FUNDS FUNCTIONING AS ENDOWMENT. THE ASSOCIATION HAS ADOPTED INVESTMENT AND SPENDING POLICIES FOR ASSETS THAT ATTEMPT TO PROVIDE SUFFICIENT INCOME TO SUSTAIN FUNDING TO PROGRAMS SUPPORTED BY ENDOWMENT WHILE SEEKING TO MAINTAIN THE PURCHASING POWER OF THE ENDOWMENT. THE ASSOCIATION HAS A POLICY OF APPROPRIATING FOR DISTRIBUTION EACH YEAR A PERCENTAGE OF THE THREE YEAR TRAILING AVERAGE OF THE FAIR VALUE OF THE ENDOWMENT AS OF JUNE 30 OF THE PRIOR YEAR. THE DISTRIBUTION RATE FOR THE PERIOD ENDING DECEMBER 31, 2019 WAS 4.5%. ADDITIONAL TERM ENDOWMENT DISTRIBUTIONS MAY BE MADE IN ACCORDANCE WITH DONOR RESTRICTIONS. ADDITIONAL DISTRIBUTIONS OF UNRESTRICTED FUNDS FUNCTIONING AS ENDOWMENT MAY BE MADE IN ACCORDANCE WITH ASSOCIATION NEEDS.
SCHEDULE D, PART X, LINE 2 - FIN 48 (ASC 740) FOOTNOTE	<p>THE ASSOCIATION WAS ORGANIZED PURSUANT TO THE GENERAL NONPROFIT CORPORATION LAW OF THE STATE OF CALIFORNIA. THE ASSOCIATION HAS BEEN RECOGNIZED BY THE INTERNAL REVENUE SERVICE AS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. THE ASSOCIATION HAS ALSO BEEN RECOGNIZED BY THE CALIFORNIA FRANCHISE TAX BOARD AS EXEMPT FROM CALIFORNIA FRANCHISE TAXES AND CERTAIN GENERAL COUNTY REAL AND PERSONAL PROPERTY TAXES UNDER SECTION 23701D OF THE CALIFORNIA REVENUE AND TAXATION CODE. HOWEVER, THE ASSOCIATION IS SUBJECT TO INCOME TAXES ON ANY NET INCOME THAT IS DERIVED FROM A TRADE OR BUSINESS, REGULARLY CARRIED ON, AND NOT IN FURTHERANCE OF THE PURPOSES FOR WHICH IT WAS GRANTED EXEMPTION. NO INCOME TAX PROVISION HAS BEEN RECORDED AS THE NET INCOME, IF ANY, FROM ANY UNRELATED TRADE OR BUSINESS, IN THE OPINION OF MANAGEMENT, IS NOT MATERIAL TO THE COMBINED FINANCIAL STATEMENTS TAKEN AS A WHOLE.</p> <p>TAX POSITIONS TAKEN RELATED TO THE ASSOCIATION'S TAX EXEMPT STATUS, UNRELATED BUSINESS ACTIVITIES TAXABLE INCOME, AND DEDUCTIBILITY OF EXPENSES, AND OTHER MISCELLANEOUS TAX POSITIONS HAVE BEEN REVIEWED, AND MANAGEMENT IS OF THE OPINION THAT MATERIAL POSITIONS TAKEN BY THE ASSOCIATION WOULD MORE LIKELY THAN NOT BE SUSTAINED BY EXAMINATION. ACCORDINGLY, THE ASSOCIATION HAS NOT RECORDED AN INCOME TAX LIABILITY FOR UNCERTAIN TAX BENEFITS.</p>

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

- **Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.**
 ► **Attach to Form 990.**
 ► **Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization

YOUNG MEN'S CHRISTIAN ASSOCIATION OF METROPOLITAN LOS ANGELES

Employer identification number

95-1644052

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

- 1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☐ No
- 2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1) CENTRAL AMERICA AND THE CARIBBEAN			INVESTMENTS		5,097,019
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Subtotal	0	0			5,097,019
b Total from continuation sheets to Part I	0	0			0
c Totals (add lines 3a and 3b)	0	0			5,097,019

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

Cat. No. 50082W

Schedule F (Form 990) 2019

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			(SEE STATEMENT)						
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities

1

0

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 16.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 1** Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* ☐ Yes ☒ No
- 2** Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* ☐ Yes ☒ No
- 3** Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)* ☒ Yes ☐ No
- 4** Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* ☐ Yes ☒ No
- 5** Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* ☐ Yes ☒ No
- 6** Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)* ☐ Yes ☒ No

Schedule F (Form 990) 2019

Part II**Grants and Other Assistance to Organizations or Entities Outside the United States** (continued)

(a) Name of Organization	(b) IRS code section and EIN	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)		SUB-SAHARAN AFRICA	SUPPORT Y'S IN DEVELOPING COUNTRIES WITH FOCUS ON LEADERSHIP AND PROGRAMS	21,000	CHECK	0		

Part V

Supplemental Information. Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

Return Reference - Identifier	Explanation
SCHEDULE F, PART I, LINE 3 - METHOD TO ACCOUNT FOR EXPENDITURES ON ORG'S FINANCIAL STATEMENTS	CENTRAL AMERICA AND THE CARIBBEAN: OTHER, BOOK VALUE
SCHEDULE F, PART II, LINE 1 - METHOD TO ACCOUNT FOR EXPENDITURES ON ORG'S FINANCIAL STATEMENTS	SUB-SAHARAN AFRICA: ACCRUAL

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public
Inspection

Name of the organization

YOUNG MEN'S CHRISTIAN ASSOCIATION OF METROPOLITAN LOS ANGELES

Employer identification number

95-1644052

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

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- | | |
|---|--|
| a <input checked="" type="checkbox"/> Mail solicitations | e <input checked="" type="checkbox"/> Solicitation of non-government grants |
| b <input checked="" type="checkbox"/> Internet and email solicitations | f <input checked="" type="checkbox"/> Solicitation of government grants |
| c <input checked="" type="checkbox"/> Phone solicitations | g <input checked="" type="checkbox"/> Special fundraising events |
| d <input checked="" type="checkbox"/> In-person solicitations | |
- 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☒ **Yes** ☐ **No**
- b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 FIREFLY INC, 1736 ROTARY DRIVE, LOS ANGELES, CA 90026	GRANT WRITING		✓	970,500	128,986	841,514
2 PGCALC, 129 MOUNT AUBURN STREET, CAMBRIDGE, MA 02138	PLANNED GIVING CONSULTING		✓	347,423	15,135	332,288
3 COMMUNITY COUNSELLING SERVICE CO LLC, P.O. BOX 824885, PHILADELPHIA, PA 19182	STRATEGIC FUNDRAISING		✓	0	11,250	(11,250)
4						
5						
6						
7						
8						
9						
10						
Total				1,317,923	155,371	1,162,552

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

CA

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

		(a) Event #1 <u>STAIR CLIMB</u> (event type)	(b) Event #2 <u>NV DINNER</u> (event type)	(c) Other events <u>19</u> (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts	853,018	251,006	1,742,680	2,846,704
	2 Less: Contributions	849,146	223,364	975,229	2,047,739
	3 Gross income (line 1 minus line 2)	3,872	27,642	767,451	798,965
Direct Expenses	4 Cash prizes				0
	5 Noncash prizes				0
	6 Rent/facility costs	40,617	0	96,819	137,436
	7 Food and beverages	2,638	12,097	177,158	191,893
	8 Entertainment	1,000	2,355	11,000	14,355
	9 Other direct expenses	91,233	42,092	408,811	542,136
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				885,820
	11 Net income summary. Subtract line 10 from line 3, column (d) ▶				(86,855)

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

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue			46,452	46,452
	2 Cash prizes				0
Direct Expenses	3 Noncash prizes			27,933	27,933
	4 Rent/facility costs				0
	5 Other direct expenses			300	300
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d) ▶				28,233
	8 Net gaming income summary. Subtract line 7 from line 1, column (d) ▶				18,219

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

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

b If "No," explain: _____

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

b If "Yes," explain: _____

- 11** Does the organization conduct gaming activities with nonmembers? ☒ **Yes** ☐ **No**
- 12** Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? ☐ **Yes** ☒ **No**
- 13** Indicate the percentage of gaming activity conducted in:
- | | | |
|--------------------------------------|------------|-------|
| a The organization's facility | 13a | 0 % |
| b An outside facility | 13b | 100 % |
- 14** Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ J CHAN - CFO

Address ▶ 625 S NEW HAMPSHIRE AVENUE, LOS ANGELES, CA 90005-1342

- 15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ **Yes** ☒ **No**
- b** If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____
- c** If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ J CHAN - CFO

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ ALL RELATED FINANCIAL AND ACCOUNTING SERVICES

☐ Director/officer

☒ Employee

☐ Independent contractor

17 Mandatory distributions:

- a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☒ **Yes** ☐ **No**
- b** Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ 41,807

Part IV **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

SCHEDULE J
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization

YOUNG MEN'S CHRISTIAN ASSOCIATION OF METROPOLITAN LOS ANGELES

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
► Attach to Form 990.
► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Employer identification number

95-1644052

Part I Questions Regarding Compensation

	Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.		
<input type="checkbox"/> First-class or charter travel		
<input type="checkbox"/> Travel for companions		
<input type="checkbox"/> Tax indemnification and gross-up payments		
<input type="checkbox"/> Discretionary spending account		
<input type="checkbox"/> Housing allowance or residence for personal use		
<input type="checkbox"/> Payments for business use of personal residence		
<input checked="" type="checkbox"/> Health or social club dues or initiation fees		
<input type="checkbox"/> Personal services (such as maid, chauffeur, chef)		
b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b ✓	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2 ✓	
3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.		
<input checked="" type="checkbox"/> Compensation committee		
<input checked="" type="checkbox"/> Independent compensation consultant		
<input type="checkbox"/> Form 990 of other organizations		
<input type="checkbox"/> Written employment contract		
<input checked="" type="checkbox"/> Compensation survey or study		
<input checked="" type="checkbox"/> Approval by the board or compensation committee		
4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:		
a Receive a severance payment or change-of-control payment?	4a	✓
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	✓
c Participate in, or receive payment from, an equity-based compensation arrangement?	4c	✓
If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.		
Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9.		
5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
a The organization?	5a	✓
b Any related organization?	5b	✓
If "Yes" on line 5a or 5b, describe in Part III.		
6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		
a The organization?	6a	✓
b Any related organization?	6b	✓
If "Yes" on line 6a or 6b, describe in Part III.		
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III	7 ✓	
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	✓
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

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

Cat. No. 50053T

Schedule J (Form 990) 2019

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)–(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 ALAN C HOSTRUP PRESIDENT & CEO	(i)	424,193	75,000	4,107	28,729	14,867	546,896	0
	(ii)	0	0	0	0	0	0	0
2 M DENGLER EVP COO	(i)	334,743	10,000	1,548	28,942	9,270	384,503	0
	(ii)	0	0	0	0	0	0	0
3 D LIPMAN EVP HUMAN RESOURCES	(i)	274,147	0	828	28,651	31,049	334,675	0
	(ii)	0	0	0	0	0	0	0
4 J CHAN EVP CFO	(i)	242,300	0	360	25,612	19,655	287,927	0
	(ii)	0	0	0	0	0	0	0
5 V DOMINGUEZ EVP CHIEF MISSION ADVANCEMENT OFFICER	(i)	207,474	0	281	20,776	3,599	232,130	0
	(ii)	0	0	0	0	0	0	0
6 R CORONA SVP BRANCH OPERATIONS	(i)	192,898	0	2,010	20,466	17,534	232,908	0
	(ii)	0	0	0	0	0	0	0
7 D POWELL SVP BRANCH OPERATIONS	(i)	181,810	0	625	18,508	4,091	205,034	0
	(ii)	0	0	0	0	0	0	0
8 S MARASCO SVP BRANCH OPERATIONS	(i)	170,431	0	1,650	17,429	9,659	199,169	0
	(ii)	0	0	0	0	0	0	0
9 J STANTON EXECUTIVE DIRECTOR AND VP	(i)	183,994	0	1,995	17,973	8,483	212,445	0
	(ii)	0	0	0	0	0	0	0
10 S MACALLER EXECUTIVE DIRECTOR	(i)	161,885	0	592	17,819	21,964	202,260	0
	(ii)	0	0	0	0	0	0	0
11 J DE LA CRUZ SVP COMMUNITY DEVELOPMENT	(i)	161,777	0	234	16,390	7,727	186,128	0
	(ii)	0	0	0	0	0	0	0
12 D PRICE SVP INFORMATION TECHNOLOGY	(i)	150,269	0	534	16,309	18,417	185,529	0
	(ii)	0	0	0	0	0	0	0
13 L VAN INGEN POPE SVP BRANCH FINANCIAL DEVELOPMENT	(i)	148,252	0	357	16,422	21,571	186,602	0
	(ii)	0	0	0	0	0	0	0
14 P RUTHERFORD VP PROPERTIES & FACILITIES	(i)	146,291	0	874	14,717	6,401	168,283	0
	(ii)	0	0	0	0	0	0	0
15 W MENCHACA VP MISSION ADVANCEMENT	(i)	137,597	0	1,361	14,433	12,138	165,529	0
	(ii)	0	0	0	0	0	0	0
16	(i)							
	(ii)							

Schedule J (Form 990) 2019

Part III

Supplemental Information. Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference - Identifier	Explanation
SCHEDULE J, PART I, LINE 1A - HEALTH OR SOCIAL CLUB DUES OR INITIATION FEES	SOCIAL CLUB EXPENSES OF PRESIDENT/CEO ARE REIMBURSED BY ASSOCIATION AS BUSINESS EXPENSES UNDER ACCOUNTABLE PLAN.
SCHEDULE J, PART I, LINE 7 - NON-FIXED PAYMENTS	CERTAIN EMPLOYEES LISTED IN SCHEDULE J, PART II RECEIVED DISCRETIONARY INCENTIVE COMPENSATION TO REWARD FOR OUTSTANDING OR EXCEPTIONAL SERVICE TO THE ASSOCIATION. SUCH INCENTIVE COMPENSATION PROVIDED TO OFFICERS COVERED UNDER THE INTERMEDIATE SANCTION RULES AS DISQUALIFIED PERSONS WAS DETERMINED BY THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS. INCENTIVE COMPENSATION PROVIDED TO OTHER EMPLOYEES WAS DETERMINED AT THE DISCRETION OF THE CEO AND APPROVED BY THE PERSONNEL COMMITTEE OF THE BOARD OF DIRECTORS.

**SCHEDULE K
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds

► Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

**Open to Public
Inspection**

Name of the organization

YOUNG MEN'S CHRISTIAN ASSOCIATION OF METROPOLITAN LOS ANGELES

Employer identification number

95-1644052

Part I Bond Issues

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pooled financing	
						Yes	No	Yes	No	Yes	No
A CALIFORNIA I-BANK	68-0304653		04/13/2012	33,000,000	SEE SUPPLEMENTAL INFORMATION		✓		✓		✓
B											
C											
D											

Part II Proceeds

		A		B		C		D	
1	Amount of bonds retired	0							
2	Amount of bonds legally defeased	0							
3	Total proceeds of issue	33,000,000							
4	Gross proceeds in reserve funds	0							
5	Capitalized interest from proceeds	0							
6	Proceeds in refunding escrows	0							
7	Issuance costs from proceeds	414,999							
8	Credit enhancement from proceeds	0							
9	Working capital expenditures from proceeds	0							
10	Capital expenditures from proceeds	3,764,485							
11	Other spent proceeds	28,820,516							
12	Other unspent proceeds	0							
13	Year of substantial completion	2015							
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a refunding issue of tax-exempt bonds (or, if issued prior to 2018, a current refunding issue)?	✓							
15	Were the bonds issued as part of a refunding issue of taxable bonds (or, if issued prior to 2018, an advance refunding issue)?		✓						
16	Has the final allocation of proceeds been made?	✓							
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	✓							

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

Cat. No. 50193E

Schedule K (Form 990) 2019

Part III Private Business Use

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		✓						
2	Are there any lease arrangements that may result in private business use of bond-financed property?		✓						
3a	Are there any management or service contracts that may result in private business use of bond-financed property?		✓						
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c	Are there any research agreements that may result in private business use of bond-financed property?		✓						
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government . . . ▶								
		%		%		%		%	
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government . . . ▶								
		%		%		%		%	
6	Total of lines 4 and 5	0.00 %		%		%		%	
7	Does the bond issue meet the private security or payment test?	✓							
8a	Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		✓						
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of	%		%		%		%	
c	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?	✓							

Part IV Arbitrage

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?								
2	If "No" to line 1, did the following apply?								
a	Rebate not due yet?								
b	Exception to rebate?								
c	No rebate due?								
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
3	Is the bond issue a variable rate issue?	✓							

Part VI

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

Return Reference - Identifier	Explanation
SCHEDULE K, PART I, COLUMN (F) - DESCRIPTION OF PURPOSE	THE PROCEEDS OF THE 2012 REVENUE BONDS WERE USED TO (I) DEFEASE AND REFUND ITS 2001 REVENUE BONDS AND (II) FUND A PORTION OF THE ASSOCIATION'S COSTS OF ACQUISITION, CONSTRUCTION, REFURBISHMENT, INSTALLATION, AND EQUIPPING OF CERTAIN OF ITS FACILITIES.

SCHEDULE L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions With Interested Persons

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.**
▶ **Attach to Form 990 or Form 990-EZ.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047

2019

Open To Public Inspection

Name of the organization

YOUNG MEN'S CHRISTIAN ASSOCIATION OF METROPOLITAN LOS ANGELES

Employer identification number

95-1644052

Part I

Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958. ▶ \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$

Part II

Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												
(8)												
(9)												
(10)												

Total ▶ \$

Part III

Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

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

Cat. No. 50056A

Schedule L (Form 990 or 990-EZ) 2019

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) (SEE STATEMENT)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

Provide additional information for responses to questions on Schedule L (see instructions).

Part IV**Business Transactions Involving Interested Persons** (continued)

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) ANDERSON MUNGER YMCA INC.	RELATED DIRECTORS AND OFFICERS	\$150,000	PROPERTY LEASE		✓
(2) M DENGLER	WIFE OF OFFICER	\$67,789	COMPENSATION AS EMPLOYEE		✓
(3) LEE CONSULTING GROUP LLC	WIFE OF BOARD MEMBER	\$46,354	COMPENSATION FOR CONSULTING SERVICES		✓
(4) R VALDES	DAUGHTER OF BOARD MEMBER	\$14,354	COMPENSATION AS EMPLOYEE		✓

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

- ▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**
▶ **Attach to Form 990.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization

YOUNG MEN'S CHRISTIAN ASSOCIATION OF METROPOLITAN LOS ANGELES

Employer identification number

95-1644052

Part I **Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	✓	9	79,272	MARKET VALUE
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 ▶ (ATTACHMENT 1)	✓	2,011	3,657,863	OTHER
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 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		✓
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	✓	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		✓
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

Part II

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference - Identifier	Explanation
SCHEDULE M, PART I, LINE 25 - ATTACHMENT 1	DESCRIPTION / # OF CONTRIBUTIONS / REVENUES / METHOD PLEDGES RECEIVABLE & CHANGE IN VALUE SPLIT INTEREST / 1717 / \$3,626,340 / NPV MULTI & NEW PLEDGES & EST. NRV RAFFLE ITEMS / 294/ \$31,523 / FMV ON RECEIPT DATE

**SCHEDULE O
(Form 990 or 990-EZ)**Department of Treasury Internal
Revenue Service**Supplemental Information to Form 990 or 990-EZ**Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

- ▶ Attach to Form 990 or 990-EZ.
- ▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the Organization

YOUNG MEN'S CHRISTIAN ASSOCIATION OF METROPOLITAN LOS ANGELES

Employer Identification Number

95-1644052

Return Reference - Identifier	Explanation
FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION	FEWER THAN 20,000 INHABITANTS - THE LA Y NOW OFFERS A WIDE SPECTRUM OF PROGRAMMING THAT ADDRESSES THE NEEDS OF YOUTH AND FAMILIES ACROSS THE REGION THROUGH 26 LOCAL BRANCHES, 3 CAMP SITES, AND OVER 190 PROGRAM LOCATIONS THAT BENEFIT OVER 400,000 MEMBERS AND PROGRAM PARTICIPANTS.
FORM 990, PART III, LINE 4 - EXEMPT PURPOSE	<p>WITH MORE THAN 140 CULTURES AND AS MANY AS 224 LANGUAGES, ANGELENOS ARE AS DIVERSE AS IT GETS. THE Y'S 26 BRANCHES STRETCH ACROSS 150 MILES OF LOS ANGELES, FROM THE OCEAN TO THE MOUNTAINS, EACH REMARKABLY UNIQUE TO REFLECT THE VIBRANCY OF THE COMMUNITY IT SERVES.</p> <p>BY OFFERING AFFORDABLE PROGRAMS AND INITIATIVES, THE Y ENABLES KIDS TO REALIZE THEIR POTENTIAL, PREPARES TEENS FOR COLLEGE OR CAREER, OFFERS WAYS FOR FAMILIES TO HAVE FUN TOGETHER, EMPOWERS PEOPLE TO BE HEALTHIER IN SPIRIT, MIND AND BODY, WELCOMES AND EMBRACES NEWCOMERS AND NURTURES COMMUNITY INVOLVEMENT. BY FOCUSING ON THE POTENTIAL OF EACH PERSON AND PROVIDING OPPORTUNITIES TO GIVE BACK AND SUPPORT NEIGHBORS, WE EMPOWER MORE THAN A HALF MILLION PEOPLE EACH YEAR TO FEEL HEALTHY, CONFIDENT, CONNECTED AND SECURE. AT THE LA Y, WE ARE PROUD TO NOT JUST PROMISE, BUT DELIVER POSITIVE CHANGE.</p> <p>IN 2019 ALONE, WE CAN REPORT:</p> <ul style="list-style-type: none">*400,000 MEMBERS AND PROGRAM PARTICIPANTS CONNECTED,*128,000 YOUTH SERVED IN PROGRAMMING,*55,000 WATER SAFETY AND SWIM LESSONS,*36,000 TEENS ENGAGED,*20,000 ACTIVE SENIORS IN PROGRAMMING,*11,000 VOLUNTEERS SHARING EXPERIENCES OF GIVING BACK, AND*\$3.9 MILLION IN DIRECT ASSISTANCE GRANTED TO COMMUNITY MEMBERS. <p>THE Y'S PROGRAMS AND SERVICES ARE AVAILABLE TO EVERYONE AND OFFER FINANCIAL AID TO THOSE FAMILIES AND INDIVIDUALS THAT NEED HELP FOR AFFORDING PROGRAMS AND MEMBERSHIPS. THE LA Y'S FINANCIAL ASSISTANCE PROGRAM IS FUNDED BY DONORS AND FUNDRAISING EFFORTS THROUGH THE YMCA OF METROPOLITAN LOS ANGELES BOARD OF DIRECTORS AND THE INDIVIDUAL BOARD OF MANAGERS OF ALL 26 LA Y BRANCHES.</p>
FORM 990, PART III, LINE 4A - PROGRAM SERVICE DESCRIPTION	<ul style="list-style-type: none">* FAMILY PROGRAMS TO BUILD STRONGER BONDS AND ACHIEVE GREATER WORK/LIFE BALANCE, SUCH AS ADVENTURE GUIDES, FAMILY CAMP, AND FAMILY FITNESS AND ACTIVITIES.* SPORTS AND RECREATION PROGRAMS FOR ADULTS AND SENIORS WITH A SHARED INTEREST IN ACTIVITIES AND SPORTS LEAGUES. <p>THIS YEAR, THE LA Y:</p> <ul style="list-style-type: none">* OFFERED COMMUNITY AND WELLNESS PROGRAMS TO OVER 331,000 MEMBERS THROUGH 26 BRANCHES, WITH NEARLY HALF OF ALL MEMBERS WITHIN LOW-INCOME COMMUNITIES.* PROVIDED OVER \$2.8 MILLION IN FINANCIAL ASSISTANCE TO ENABLE PEOPLE TO BECOME MEMBERS OR PARTICIPATE IN PROGRAMS.* THROUGH THE P.L.A.Y. PROGRAM, PROVIDED FITNESS AND WELLNESS OPPORTUNITIES TO 38,000 STUDENTS AT 78 SCHOOL CAMPUSES.* OFFERED MORE THAN 45,000 YOUTH SWIM LESSONS IN 35 Y COMMUNITY POOLS, THE LARGEST SINGLE SOURCE OF SWIM INSTRUCTION IN GREATER LOS ANGELES.* SERVED OVER 20,000 SENIORS THROUGH OLDER AND ACTIVE ADULT PROGRAMS.

Return Reference - Identifier	Explanation
FORM 990, PART III, LINE 4B - PROGRAM SERVICE DESCRIPTION	<p>BUILDING CHARACTER AND LEADERSHIP.</p> <p>THE LA Y CONTINUES TO GROW PROGRAMS BY PROVIDING NECESSARY RESOURCES TO BUILD STRONG CHILDREN, STRONG FAMILIES AND STRONG COMMUNITIES.</p> <p>THIS YEAR, THE LA Y:</p> <ul style="list-style-type: none"> * SERVED MORE THAN 128,000 YOUTH THROUGH OUR PROGRAMS AND SERVICES. * PROVIDED CHILD CARE TO OVER 19,000 CHILDREN ACROSS LOS ANGELES AND OVER \$1,100,000 IN FINANCIAL ASSISTANCE THROUGH REDUCED FEES FOR CHILDREN IN CHILD CARE AND DAY CAMP PROGRAMS. * OFFERED 9 PRESCHOOL SITES IN A NURTURING ENVIRONMENT, TAUGHT BY ACCREDITED FACULTY AND WITH CURRICULUM ALIGNED WITH THE STATE OF CALIFORNIA'S EDUCATION STANDARDS. * THROUGH OUR BEFORE AND AFTER SCHOOL PROGRAMS THAT ARE AVAILABLE IN 62 LOCATIONS, KEPT KIDS IN SCHOOL AND ENGAGED, WHILE BUILDING CHARACTER AND CREATING FRIENDSHIPS. * SUPPORTED CHILDREN IN LOW-INCOME FAMILIES IN INCREASING SCHOOL READINESS THROUGH OUR EARLY LEARNING READINESS (ELR) PROGRAM, WHICH IS A GRANT-BASED FREE PROGRAM. * PROVIDED STUDENTS IN GRADES 5TH-8TH WITH A HANDS-ON LEARNING EXPERIENCE IN THE AREAS OF LAND, SEA AND SKY THROUGH OUR EXCEL WITH STEM PROGRAM.
FORM 990, PART III, LINE 4C - PROGRAM SERVICE DESCRIPTION	<p>THIS YEAR, THE LA Y:</p> <ul style="list-style-type: none"> * INVOLVED OVER 11,000 VOLUNTEERS IN GOVERNANCE AND PROGRAM DEVELOPMENT. * SECURED DONATIONS FROM MORE THAN 16,000 DONORS. * GAVE MORE THAN 11,000 INDIVIDUALS THE EXPERIENCE OF CAMP AT OUR 3 RESIDENT CAMPS. * IN A CONTINUED PARTNERSHIP WITH THE JR. CLIPPERS BASKETBALL PROGRAM, INVOLVED OVER 3,600 PARTICIPANTS IN THE YEAR-ROUND LEAGUE. THROUGH POSITIVE COACHING, OUR JR. CLIPPERS YOUTH BASKETBALL PROGRAM TEACHES YOUNG ATHLETES THE FUNDAMENTALS OF THE GAME WHILE BUILDING THEIR CONFIDENCE, GETTING THEM ACTIVE, AND HELPING THEM LEARN VALUABLE LESSONS IN TEAMWORK, SPORTSMANSHIP AND LEADERSHIP. * IN PARTNERSHIP WITH THE LOS ANGELES KINGS, SUCCESSFULLY BROUGHT YOUTH BALL HOCKEY TO 600 CHILDREN AND TEENS, AGES 5-14, EXPOSING THEM TO THE FUNDAMENTALS OF YOUTH HOCKEY THROUGH CLINICS AND LEAGUE PLAY. THIS PROGRAM PROVIDES A FUN AND ENGAGING EXPERIENCE FOR KIDS TO LEARN LESSONS OF TEAMWORK, SPORTSMANSHIP AND FAIR PLAY WHILE APPLYING HOCKEY SKILLS THAT STRENGTHEN THEIR COORDINATION AND CONFIDENCE. * REMAINED THE LARGEST YOUTH & GOVERNMENT (Y&G) DELEGATION IN CALIFORNIA WITH OVER 1,700 JUNIOR HIGH AND HIGH SCHOOL STUDENTS PARTICIPATING IN THE YEAR-ROUND CURRICULUM ABOUT DEMOCRACY, THE PROCESS OF STATE GOVERNMENT, AND INTERNATIONAL AFFAIRS. THE PROGRAM CULMINATED WITH A 5-DAY MODEL LEGISLATURE SESSION IN SACRAMENTO. * IN JUNE AND JULY, PROVIDED 5,100 TEENS, AGES 12-17, WITH FREE ACCESS TO THE Y, INCLUDING USE OF FACILITY AMENITIES, SUCH AS FITNESS CENTERS AND SWIMMING POOLS, AS WELL AS ENRICHMENT CLASSES AND HEALTHY ACTIVITIES CREATED EXCLUSIVELY FOR THEM. AS PART OF THE INITIATIVE, IN PARTNERSHIP WITH THE FRESH START, 23,000 FREE, NUTRITIOUS MEALS WERE SERVED, WHILE A COLLABORATION WITH THE CITY OF LOS ANGELES AND COUNTY OF LOS ANGELES RESULTED IN 181 SUMMER JOBS FOR TEENS AND YOUNG ADULTS. * EXPANDED THE NATIONAL NEW AMERICANS WELCOME CENTER (NAWC) MODEL TO ADDRESS THE GROWING NEEDS OF OUR IMMIGRANT, NEWCOMER, REFUGEE, AND LAWFUL PERMANENT RESIDENT COMMUNITY MEMBERS. THE LA Y CONTINUED TO EXIST AS THE 2ND YMCA IN THE COUNTRY TO BE RECOGNIZED BY THE DEPARTMENT OF JUSTICE (DOJ) EXECUTIVE OFFICE FOR IMMIGRATION REVIEW (EOIR), ALLOWING THE Y TO PARTIALLY ACCREDIT REPRESENTATIVES THROUGH THEIR PROGRAM. THE LA Y CONTINUED TO PROVIDE IMMIGRATION LAW EDUCATION, OUTREACH, SCREENING, REFERRALS, AND APPLICATION ASSISTANCE, AND IS ABLE TO PROVIDE LIMITED REPRESENTATION IF NEEDED. THE LA Y PROVIDED EDUCATION AND OUTREACH, NATURALIZATION APPLICATION ASSISTANCE, CITIZENSHIP CONSULTATIONS, AND CENSUS AWARENESS, TRAINING, AND OUTREACH TO OVER 16,000 COMMUNITY MEMBERS.
FORM 990, PART VI, LINE 1A - DELEGATE BROAD AUTHORITY TO A COMMITTEE	<p>PER THE ORGANIZATION'S BYLAWS, THE BOARD OF DIRECTORS, BY RESOLUTION, CAN APPOINT AN EXECUTIVE COMMITTEE CONSISTING OF DIRECTORS TO HAVE ALL THE AUTHORITY AND POWER OF THE BOARD, EXCEPT AS LIMITED BY THE BOARD OR THE LAW. IN 2019, THE EXECUTIVE COMMITTEE WAS COMPOSED OF 17 BOARD MEMBERS, INCLUDING THE BOARD CHAIR, PAST CHAIRS AND VICE CHAIRS, AND MET ONLY AS NEEDED IN THE ABSENCE OF A BOARD MEETING.</p>
FORM 990, PART VI, LINE 11B - REVIEW OF FORM 990 BY GOVERNING BODY	<p>A COPY OF THE DRAFT FORM 990 WAS PROVIDED TO THE AUDIT COMMITTEE FOR REVIEW. FOLLOWING THIS REVIEW, A COMPLETE DRAFT WAS PROVIDED TO THE BOARD OF DIRECTORS FOR REVIEW. IT WAS SUBSEQUENTLY FILED WITH THE INTERNAL REVENUE SERVICE.</p>

Return Reference - Identifier	Explanation							
FORM 990, PART VI, LINE 12C - CONFLICT OF INTEREST POLICY	UNDER THE TERMS OF THE ASSOCIATION'S COMPREHENSIVE CONFLICT OF INTEREST POLICY. ALL MEMBERS OF THE BOARD OF DIRECTOR, OFFICERS, AND KEY EMPLOYEES ARE REQUIRED TO COMPLETE A CONFLICT OF INTEREST DISCLOSURE STATEMENT ANNUALLY. THE DISCLOSURE FORMS ARE COMPLETED ELECTRONICALLY AND THE RESPONSES ARE COMPILED IN A REPORT THAT IS REVIEWED BY THE AUDIT COMMITTEE OF THE BOARD OF DIRECTORS. THE AUDIT COMMITTEE REPORTS ANY ACUTAL OR POTENTIAL CONFLICTS OF INTEREST TO THE BOARD OF DIRECTORS. ALL INDIVIDUALS WHO ARE REQUIRED TO COMPLETE THE CONFLICT OF INTEREST FORM ARE ALSO REQUIRED TO DISCLOSE ANY POTENTIAL CONFLICT OF INTEREST PRIOR TO ANY TRANSACTION ON AN ONGOING BASIS.							
FORM 990, PART VI, LINE 15A - PROCESS TO ESTABLISH COMPENSATION OF TOP MANAGEMENT OFFICIAL	THE ASSOCIATION'S PERSONNEL AND STAFF DEVELOPMENT COMMITTEE, UNDER THE AUTHORITY OF THE BOARD OF DIRECTORS, CONDUCTS AN ANNUAL INDEPENDENT REVIEW OF THE TOTAL COMPENSATION FOR SENIOR EXECUTIVES. THE COMMITTEE, MADE UP OF INDEPENDENT VOLUNTEERS, REVIEWS COMPARABLE DATA FOR THE COMPENSATION PACKAGE OF ALL OFFICERS AND KEY EMPLOYEES TO THE COMPENSATION PROVIDED TO INDIVIDUALS IN SIMILAR POSITIONS AT OTHER DIRECT SERVICE PROVIDERS AND YMCAS WITH SIMILAR REVENUE, MEMBERSHIP, NUMBER OF EMPLOYEES AND SERVICE AREAS, AND PREPARES A PROPOSED COMPENSATION PACKAGE FOR EACH OFFICER AND KEY EMPLOYEE. PROPOSED SALARY ADJUSTMENTS ARE REVIEWED AND APPROVED BY THE PERSONNEL AND STAFF DEVELOPMENT COMMITTEE, AND ARE THEN APPROVED BY THE BOARD OF DIRECTORS ANNUALLY.							
FORM 990, PART VI, LINE 15B - PROCESS TO ESTABLISH COMPENSATION OF OTHER OFFICERS OR KEY EMPLOYEES	SEE FORM 990, PART VI, LINE 15A.							
FORM 990, PART VI, LINE 19 - REQUIRED DOCUMENTS AVAILABLE TO THE PUBLIC	THE ASSOCIATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, FINANCIAL STATEMENTS AND IRS FORM 990 ARE AVAILABLE TO THE PUBLIC UPON REQUEST AT THE CORPORATE OFFICE AT 625 S. NEW HAMPSHIRE AVENUE, LOS ANGELES, CA 90005. IRS FORM 990 IS ALSO AVAILABLE ON THE ORGANIZATION'S WEBSITE (WWW.YMCALA.ORG) AND GUIDESTAR.							
FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS OR FUND BALANCES	<table><tr><th>(a) Description</th><th>(b) Amount</th></tr><tr><td>UNREALIZED GAIN ON INTEREST RATE SWAP OBLIGATION</td><td>- 1,614,775</td></tr><tr><td>GAIN ON NTMC LOAN FORGIVENESS</td><td>8,384,896</td></tr></table>		(a) Description	(b) Amount	UNREALIZED GAIN ON INTEREST RATE SWAP OBLIGATION	- 1,614,775	GAIN ON NTMC LOAN FORGIVENESS	8,384,896
(a) Description	(b) Amount							
UNREALIZED GAIN ON INTEREST RATE SWAP OBLIGATION	- 1,614,775							
GAIN ON NTMC LOAN FORGIVENESS	8,384,896							

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

**Open to Public
Inspection**

Name of the organization

YOUNG MEN'S CHRISTIAN ASSOCIATION OF METROPOLITAN LOS ANGELES

Employer identification number

95-1644052

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) 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
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(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	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) ANDERSON MUNGER YMCA, INC. (46-0553184) 625 S. NEW HAMPSHIRE AVENUE, LOS ANGELES, CA 90005	SPECIAL PURPOSE ENTITY	CA	501(C)(3)	11	YOUNG MEN'S CHRISTIAN ASSOCIATION OF METROPOLITAN LOS ANGELES	✓	
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							

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

Cat. No. 50135Y

Schedule R (Form 990) 2019

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(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, unrelated, excluded from tax under sections 512—514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) -----												
(2) -----												
(3) -----												
(4) -----												
(5) -----												
(6) -----												
(7) -----												

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(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	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) (SEE STATEMENT)									
(2) -----									
(3) -----									
(4) -----									
(5) -----									
(6) -----									
(7) -----									

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

	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, or (iv) rent from a controlled entity	1a	✓
b Gift, grant, or capital contribution to related organization(s)	1b	✓
c Gift, grant, or capital contribution from related organization(s)	1c	✓
d Loans or loan guarantees to or for related organization(s)	1d	✓
e Loans or loan guarantees by related organization(s)	1e	✓
f Dividends from related organization(s)	1f	✓
g Sale of assets to related organization(s)	1g	✓
h Purchase of assets from related organization(s)	1h	✓
i Exchange of assets with related organization(s)	1i	✓
j Lease of facilities, equipment, or other assets to related organization(s)	1j	✓
k Lease of facilities, equipment, or other assets from related organization(s)	1k	✓
l Performance of services or membership or fundraising solicitations for related organization(s)	1l	✓
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	✓
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	✓
o Sharing of paid employees with related organization(s)	1o	✓
p Reimbursement paid to related organization(s) for expenses	1p	✓
q Reimbursement paid by related organization(s) for expenses	1q	✓
r Other transfer of cash or property to related organization(s)	1r	✓
s Other transfer of cash or property from related organization(s)	1s	✓

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 related organization	(b) Transaction type (a–s)	(c) Amount involved	(d) Method of determining amount involved
SEE PART VII SUPPLEMENTAL INFORMATION FOR DETAILS			
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

Part VI **Unrelated Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512–514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													
(12)													
(13)													
(14)													
(15)													
(16)													

Schedule R (Form 990) 2019

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

(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	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) CHARITABLE REMAINDER TRUST #1 625 S NEW HAMPSHIRE AVE, LOS ANGELES, CA 90005	CRUT	CA	YMCA METRO LA	TRUST		16,849	39%		
(2) CHARITABLE REMAINDER TRUST #2 625 S NEW HAMPSHIRE AVE, LOS ANGELES, CA 90005	CRUT	CA	YMCA METRO LA	TRUST		18,041	8%		
(3) CHARITABLE REMAINDER TRUST #3 625 S NEW HAMPSHIRE AVE, LOS ANGELES, CA 90005	CRUT	CA	YMCA METRO LA	TRUST		1,022	2%		
(4) CHARITABLE REMAINDER TRUST #4 625 S NEW HAMPSHIRE AVE, LOS ANGELES, CA 90005	CRUT	CA	YMCA METRO LA	TRUST		11,418	64%		
(5) CHARITABLE REMAINDER TRUST #5 625 S NEW HAMPSHIRE AVE, LOS ANGELES, CA 90005	CRUT	CA	YMCA METRO LA	TRUST		30,823	72%		
(6) CHARITABLE REMAINDER TRUST #6 625 S NEW HAMPSHIRE AVE, LOS ANGELES, CA 90005	CRUT	CA	YMCA METRO LA	TRUST		39,525	52%		
(7) CHARITABLE REMAINDER TRUST #7 625 S NEW HAMPSHIRE AVE, LOS ANGELES, CA 90005	CRUT	CA	YMCA METRO LA	TRUST		40,934	54%		
(8) CHARITABLE REMAINDER TRUST #8 625 S NEW HAMPSHIRE AVE, LOS ANGELES, CA 90005	CRUT	CA	YMCA METRO LA	TRUST		2,104	45%		
(9) CHARITABLE REMAINDER TRUST #9 625 S NEW HAMPSHIRE AVE, LOS ANGELES, CA 90005	CRUT	CA	YMCA METRO LA	TRUST		63,457	86%		
(10) CHARITABLE REMAINDER TRUST #10 625 S NEW HAMPSHIRE AVE, LOS ANGELES, CA 90005	CRUT	CA	YMCA METRO LA	TRUST		110,289	37%		
(11) CHARITABLE REMAINDER TRUST #11 625 S NEW HAMPSHIRE AVE, LOS ANGELES, CA 90005	CRUT	CA	YMCA METRO LA	TRUST		1,529	18%		
(12) CHARITABLE REMAINDER TRUST #12 625 S NEW HAMPSHIRE AVE, LOS ANGELES, CA 90005	CRUT	CA	YMCA METRO LA	TRUST		32,523	56%		
(13) CHARITABLE REMAINDER TRUST #13 625 S NEW HAMPSHIRE AVE, LOS ANGELES, CA 90005	CRUT	CA	YMCA METRO LA	TRUST		30,202	52%		
(14) CHARITABLE REMAINDER TRUST #14 625 S NEW HAMPSHIRE AVE, LOS ANGELES, CA 90005	CRUT	CA	YMCA METRO LA	TRUST		2,616	14%		
(15) CHARITABLE REMAINDER TRUST #15 625 S NEW HAMPSHIRE AVE, LOS ANGELES, CA 90005	CRUT	CA	YMCA METRO LA	TRUST		2,328	7%		
(16) CHARITABLE REMAINDER TRUST #16 625 S NEW HAMPSHIRE AVE, LOS ANGELES, CA 90005	CRUT	CA	YMCA METRO LA	TRUST		2,844	12%		
(17) CHARITABLE REMAINDER TRUST #17 625 S NEW HAMPSHIRE AVE, LOS ANGELES, CA 90005	CRUT	CA	YMCA METRO LA	TRUST		42,471	37%		
(18) POOLED INCOME FUND 625 S NEW HAMPSHIRE AVE, LOS ANGELES, CA 90005	POOLED INC FD	CA	YMCA METRO LA	TRUST		1,709	82%		

Part VII

Supplemental Information. Provide additional information for responses to questions on Schedule R (see instructions).

Return Reference - Identifier	Explanation
SCHEDULE R, PART V, LINE 2 - RELATED ORGANIZATION TRANSACTION DETAILS	<p>THE YMCA EXECUTED A NEW MARKETS TAX CREDIT TRANSACTION IN 2012. UNDER THE REQUIRED STRUCTURE OF THE TRANSACTION, A SPECIAL PURPOSE ENTITY WAS CREATED, ENTITLED ANDERSON MUNGER YMCA, INC. (AMY). AMY HAS RECEIVED A DETERMINATION LETTER FROM THE INTERNAL REVENUE SERVICE AS A SUPPORTING ORGANIZATION AND IS A CONTROLLED ENTITY FOR REPORTING PURPOSES. ITS OPERATIONS ARE INCLUDED IN THE CONSOLIDATED REPORTING OF THE YMCA.</p> <p>PURSUANT TO THE TERMS OF THE TRANSACTION, THE YMCA ISSUED A LOAN AND ALSO PROVIDED CAPITAL OF APPROXIMATELY \$1.1 MILLION. AMY PURCHASED LAND FROM THE YMCA AND CONCURRENTLY EXECUTED A LEASEBACK TO THE YMCA.</p>