## Form **990**

## **Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Α	For the 2	018 calendar year, or tax year beginning 07/01 , 2018, and en	ding 06	5/30	<b>, 20</b> 19							
В	Check if a	oplicable: C Name of organization YOUNG MENS CHRISTIAN ASSOCIATION OF SOUTHEAST VE	NTURA COUNTY	D Employ	er identification number							
•	Address cl	nange Doing business as SOUTHEAST VENTURA COUNTY YMCA			95-2305501							
П	Name cha	Number and street (or D.O. beautifundities and delivered to street address)	/suite	E Telepho	ne number							
$\overline{\Box}$	Initial retur	CALCE THOUGAND CALCEDING			(805) 497-3081							
П	Final return/	1710			(000) 101 0001							
Н	Amended	William and the second		<b>G</b> Gross re	eceipts \$ 13,730,044							
Н			11/-)  - 4 -		subordinates? Yes No							
ш	Application	SAME AS C ABOVE										
_			15 "		s included?  Yes  No a list. (see instructions)							
<u> </u>	Tax-exem											
<u>J</u>	Website:				number ►							
_		panization: ✓ Corporation ☐ Trust ☐ Association ☐ Other ► ☐ L Year of for	mation: 1964	M State	of legal domicile: CA							
Р	art I	Summary		·								
_		riefly describe the organization's mission or most significant activities:										
JC		BUILDS RELATIONSHIPS, IMPACTS LIVES AND STRENGTHENS OUR COMMUNITY THROUGH YOUTH DEVELOPMENT,										
'na		HEALTHY LIVING AND SOCIAL RESPONSIBILITY.										
ĕ		Check this box $lacktriangle$ if the organization discontinued its operations or dispose		1	its net assets.							
ၓ	1				18							
<b>ფ</b>		lumber of independent voting members of the governing body (Part VI, line 1	•		18							
ij		otal number of individuals employed in calendar year 2018 (Part V, line 2a)		5	416							
Activities & Governance	1	otal number of volunteers (estimate if necessary)		6	600							
Ă	1	, , , , , , , , , , , , , , , , , , , ,		7a	0							
	b N	let unrelated business taxable income from Form 990-T, line 38	_	7b	0							
			Prior Ye	ear	Current Year							
Revenue	8 (	Contributions and grants (Part VIII, line 1h)	(	5,307,210	5,179,169							
	9 F	rogram service revenue (Part VIII, line 2g)	7	7,079,757	6,911,299							
ě	10 li	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	(3	,342,409)	54,81							
ш	11 (	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		212,556	435,376							
	<b>12</b> T	otal revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	10	,257,114	12,580,655							
	13 (	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	0	0								
	14 E	enefits paid to or for members (Part IX, column (A), line 4)		0								
S	<b>15</b> S	alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	4	1,981,008	5,697,609							
Expenses	<b>16a</b> F	rofessional fundraising fees (Part IX, column (A), line 11e)		87,200	0							
ф	b T	otal fundraising expenses (Part IX, column (D), line 25) ► 774,975										
Ш	17 (	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	3	3,594,086	6,048,090							
	18 T	otal expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	3	3,662,294	11,745,699							
	19 F	levenue less expenses. Subtract line 18 from line 12	1	,594,820	834,956							
or		·	Beginning of Cu	ırrent Year	End of Year							
Net Assets or Fund Balances	<b>20</b> T	otal assets (Part X, line 16)	41	,823,743	44,406,132							
t Ass	<b>21</b> T	otal liabilities (Part X, line 26)	4	,623,614	6,378,659							
ξĒ	<b>22</b> N	let assets or fund balances. Subtract line 21 from line 20	37	7,200,129	38,027,473							
	art II	Signature Block	'		1							
Un	nder penalti	es of perjury, I declare that I have examined this return, including accompanying schedules and st	atements, and to t	he best of i	my knowledge and belief, it is							
tru	ie, correct,	and complete. Declaration of preparer (other than officer) is based on all information of which prep	arer has any know	ledge.								
Sig	gn	Signature of officer	Da	ite								
He	ere											
		Type or print name and title RONNIE STONE, PRESIDENT/CEO										
		Print/Type preparer's name Preparer's signature	Date	Check	PTIN							
Pa		SAHAK LOUSSINIAN		self-em								
	eparer	Firm's name    HUTCHINSON AND BLOODGOOD LLP	Fire	n's EIN ▶	95-0858589							
US	se Only	Firm's address > 550 N. BRAND BLVD 14TH FLOOR, GLENDALE, CA 91203		one no.	(818) 637-5000							
Ma	v the IRS	discuss this return with the preparer shown above? (see instructions)			V Yes No							
_			t. No. 11282Y		Form <b>990</b> (2018)							
					(=0.0)							

i Oiiii 3	90 (2010)					raye <b>z</b>
Part		_	vice Accomplishments			
			s a response or note to	any line in this Par	t III	<u>/</u>
1	-	e the organization's n		NELLIDE IMPACTELIA	/EC AND STRENGTHENS OF	ID COMMUNITY
			HEALTHY LIVING AND SO		/ES AND STRENGTHENS O	JR COMMUNITY
	THROUGH TOO	TH DEVELOPMENT, F		JIAL RESPONSIBILIT	T.	
2	Did the organiz	zation undertake any	significant program sen	vices during the year	r which were not listed on	the
	prior Form 990	or 990-EZ?				· Ves No
	If "Yes," descri	be these new service	s on Schedule O.			
3			ıcting, or make signific	ant changes in ho	w it conducts, any progr	ram
	services?					· ☐ Yes ☑ No
		be these changes on				
4	expenses. Sec	tion 501(c)(3) and 50		e required to report t	hree largest program servi the amount of grants and	
4a	(Code:	) (Expenses \$	5,055,124 including g	urants of \$	) (Revenue \$	3,821,100 )
··u	`		E YOUTH DEVELOPMENT		, (πονοπαο φ	0,021,100
	THE SOUTHEAS	ST VENTURA COUNTY	/ YMCA OPERATES 16 ST	ATE-LICENSED CHIL	DCARE AND PRESCHOOL S	SITES AT PUBLIC
	SCHOOL LOCA	TIONS THROUGHOUT	SOUTHEAST VENTURA	COUNTY AND NORTH	IWEST LOS ANGELES COUN	NTY. EACH OF THESE
	SITES IS LICEN	ISED BY THE STATE C	F CALIFORNIA COMMUN	ITY CARE LICENSING	DIVISION. DURING SUMME	 ≣R
	VACATION AND	SCHOOL HOLIDAYS,	TRADITIONAL YMCA DAY	CAMPS AND SPECIA	ALTY CAMPS ARE OPERATE	ED IN WEEKLY
	SESSIONS AT A	A HALF-DOZEN SITES.	DAY CAMP SITES INCLU	JDE VARIOUS SCHOO	DL-BASED CENTERS IN SIMI	, THE
	31-ACRE CONE	JO VALLEY YMCA FA	CILITY, AND VARIOUS SC	HOOL-BASED CENTE	RS IN AGOURA HILLS. THE	
	ORGANIZATION	N SERVED OVER 1,900	CHILDREN IN ITS CHILD	CARE AND DAY CAM	P PROGRAMS.	
	OUR YMCA IS O	COMMITTED TO NURT	URING THE POTENTIAL (	OF EVERY CHILD AND	TEEN. WE BELIEVE ALL KI	DS HAVE
	•	ON SCHEDULE O)				
4b	(Code:		2,571,237 including g	rants of \$	) (Revenue \$	3,164,681 )
	HEALTH AND W	VELL BEING TO PROM	OTE HEALTHY LIVING			
	THE SOLITHEAS	CT VENTUDA COUNT	VMCA ODEDATES EACH	ITIES AT THE COME	JO VALLEY YMCA, SIMI VALI	EV EVMII A
					OR LAP POOLS, WARM WA	
			MULTI-USE SPACES FOR			
					BITS TO IMPROVE AND MAI	NTAIN
			IRONIC HEALTH ISSUES.			
	THE Y IS COMN	MITTED TO IMPROVING	 G AMERICA'S HEALTH AN	ID WELL-BEING, COM	MUNITY BY COMMUNITY. W	/E BRING
					CTIONS THROUGH FITNES	
	AND SHARED II	NTERESTS. YMCA HE	ALTHY LIVING PROGRAM	IS SERVE ADULTS AN	ID CHILDREN OF ALL AGES	WHO WANT TO
	(CONTINUED C	ON SCHEDULE O)				
4c	(Code:	) (Expenses \$	1,532,421 including g	rants of \$	) (Revenue \$	)
	SOCIAL RESPO	NSIBILITY - IN RESPO	NSE TO TRAGEDIES IN C	ALIFORNIA IN NOVE	MBER 2018, PROFESSIONAL	L
	BASEBALL PLA	YERS CHRISTIAN YEL	ICH, RYAN BRAUN AND N	√IKE MOUSTAKAS, W	ITH MIKE ATTANASIO FROM	Л THE
	MILWAUKEE BF	REWERS OWNERSHIP	GROUP AND RAMS' QUA	ARTERBACK, JARED (	GOFF, JOINED FORCES WIT	'H THE
	SOUTHEAST VI	ENTURA COUNTY YM	CA TO CREATE CALIFORM	NIA STRONG. CALIFO	ORNIA STRONG'S COMMITM	IENT TO
	RAISING MONE	Y AND AWARENESS	SUPPORTED THOSE AFF	ECTED BY THE BORD	DERLINE SHOOTING IN THO	USAND OAKS,
	THE CAMP FIRE	E IN NORTHERN CALI	FORNIA AND THE WOOLS	SEY AND HILL FIRES I	N SOUTHERN CALIFORNIA.	GRANTS
	PROVIDED TO	FAMILIES ARE INTENI	DED TO ADDRESS THE IM	IMEDIATE NEEDS TH	EY HAVE DIRECTLY FOLLO	WING A
					AMPAIGNS TO ENSURE MAX	
	AND PARTICIPA	ATION IN SUPPORT O	F THOSE IN NEED NOW, /	AND FOR MONTHS AN	ND YEARS TO COME. WITH	THE
					EK TO PROMOTE A UNITED	FRONT AS
	WE HELP THE	COUNTLESS PEOPLE	IN NEED TO REBUILD AN	D THRIVE.		
4d		services (Describe in	· · · · · · · · · · · · · · · · · · ·	\ /D *	`	
	(Expenses \$		ing grants of \$	) (Revenue \$	)	

Form 99	· · ·		I	Page 3
Part I	V 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,"		,	
2	complete Schedule A	2	<i>v</i>	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
3	candidates for public office? If "Yes," complete Schedule C, Part I	3		~
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," <i>complete Schedule C, Part II</i>	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? <i>If "Yes," complete Schedule D, Part II</i>	7		,
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "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? <i>If "Yes," complete Schedule D, Part IV </i>	9		v
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $V$	10	~	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			
а	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? <i>If "Yes," complete Schedule D, Part VII</i>	11b		,
С	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? <i>If "Yes," complete Schedule D, Part VIII </i>	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		,
е	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)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	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? <i>If "Yes," complete Schedule F, Parts II and IV</i>	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? <i>If "Yes," complete Schedule F, Parts III and IV.</i>	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? <i>If</i> "Yes," <i>complete Schedule G, Part I</i> (see instructions)	17		,
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	18	,	
19	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II			,
20 a	If "Yes," complete Schedule G, Part III	19 20a		~
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		

domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II . . . . .

Part I	V 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? If "Yes," complete Schedule I, Parts I and III	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? If "Yes," complete Schedule J	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? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		~
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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	<b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> 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? If "Yes," complete Schedule L, Part I	25b		~
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>	26		~
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		V
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):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		~
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		,
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If</i> "Yes," <i>complete Schedule L</i> , <i>Part IV</i>	28c		,
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		~
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule $M$	30		,
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		~
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	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</i> "Yes," <i>complete Schedule R, Part I</i>	33		~
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	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)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	<b>Section 501(c)(3) organizations.</b> 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? If "Yes," complete Schedule R, Part VI	37		~
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	38	,	
Part	· · · · · · · · · · · · · · · · · · ·			
	Check if Schedule O contains a response or note to any line in this Part V			
10	Enter the number reported in Box 2 of Form 1006 Enter 0, if not applicable		Yes	No
1a b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
C	reportable gaming (gambling) winnings to prize winners?	1c	~	
			n 990	(2019

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 416			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	~	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		~
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in 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: ▶			
	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		1
С	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).			
а	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	~	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	~	
С	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			
е	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	<b>Sponsoring organizations maintaining donor advised funds.</b> 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		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter:  Gross income from members or shareholders			
a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a	against amounts due or received from them.)	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b	12a		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
а	<b>Note.</b> See the instructions for additional information the organization must report on Schedule O.	ısa		
<b>L</b>	·			
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			
С	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		~
14a b	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i> .	14a		
	Is the organization subject to the section 4960 tax on payments; if No, provide all explanation in Schedule O	טדו		
15	excess parachute payment(s) during the year?	15		/
	If "Yes," see instructions and file Form 4720, Schedule N.	10		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		~
	If "Yes," complete Form 4720, Schedule O.	10		
	ii 165, complete i oim 4720, conedule o.		000	

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a Part VI response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management No 1a Enter the number of voting members of the governing body at the end of the tax year . . . 18 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. Enter the number of voting members included in line 1a, above, who are independent 18 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 3 Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, or trustees, or key employees to a management company or other person? 4 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b R Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a ~ 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O. . . . . . 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes 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 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 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b 1 Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c ~ 13 Did the organization have a written whistleblower policy? . . . . . . . . . . . . 13 ~ 1 14 Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official . . . . . . . . . . . . . . . / 15a 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 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 Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ CA 17 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c) 18 (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 in Schedule O) 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records ▶ SKEEHAN & YOUNG, 3449 OCEAN VIEW BLVD., GLENDALE, CA 91208, (818) 427-5532

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

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

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

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

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

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

		(C)								
(A)	(B)	(-1	-4 -1-		ition	- 41		(D)	(E)	(F)
Name and Title	Average	'				e than o is both		Reportable	Reportable	Estimated
	hours per week (list any	office	er and	_	lirect	or/trust		compensation	compensation from related	amount of other
	hours for	Indi or c	Inst	Officer	Key employee	e mg	Former	from the	organizations	compensation
	related	Individual trustee or director	Institutional trustee	cer	/ em	hest	mer	organization	(W-2/1099-MISC)	from the
	organizations below dotted	tor	ona		ploy	e con		(W-2/1099-MISC)		organization and related
	line)	ruste	tru		/ee	nper				organizations
		8	stee			Highest compensated employee				
(1) LARRY PERSONS	4.0									
BOARD CHAIR		~		~				0	0	0
(2) CHRIS DRISCOLL	2.0									
CHAIR ELECT		~		~				0	0	0
(3) JOHN BRADLEY	4.0									
TREASURER		~		~				0	0	0
(4) ROGER LAZAR	2.0									
SECRETARY		~		~				0	0	0
(5) CHARLES CARMICHAEL	2.0									
PROPERTY DEVELOMENT COMMITTEE		~		~				0	0	0
(6) LINDSAY LEIMBACH	2.0									
COMMUNITY OUTREACH		~		~				0	0	0
(7) JEFF SHUMWAY	1.0									
TRIUNFO CAPITAL/FINANCIAL DEVELOPMENT		~		~				0	0	0
(8) RONNIE STONE	40.0									
CEO/PRESIDENT		~				~		188,237	0	20,078
(9) JASON AMOROSO	1.0									
DIRECTOR		~						0	0	0
(10) DAVID ANDERSON	1.0									_
DIRECTOR		~						0	0	0
(11) SERGIO GONZALEZ	1.0									
DIRECTOR		~						0	0	0
(12) DAN JAEGER	40.0									
EXECUTIVE DIRECTOR		~						128,825	0	17,161
(13) STUART MCMULLEN	1.0									
DIRECTOR		1						0	0	0
(14) LOU GUERRERO	1.0									
DIRECTOR		1						0	0	0
	•					-		+	•	F 000 (0010)

Form **990** (2018)

Form 990 (2018) Page 8 Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per	box, ι	unles	Pos eck s pe	rson	e than o is both or/trust	n an	(D)  Reportable compensation	(E)  Reportable compensation from	am	(F) imated ount of	
	week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	comp fro orga and	other bensation om the anization related nization	n I
(15) AMELIA NORRIS DIRECTOR	1.0	/						0	0			0
(16) B.J. ANDERSEN	1.0											
DIRECTOR  (47) MECANICI VAIN	40.0	~						0	0			0
(17) MEGAN GLYNN CHIEF DEVELOPMENT OFFICER	40.0	~						129,000	0		1	0,525
(18) GREG KOUBEK	40.0							129,000			<u> </u>	0,323
EXECUTIVE DIRECTOR		~						125,304	0		1	0,224
(19) KARINA HEROLD	1.0							,				
DIRECTOR		~						0	0			0
(20) DAVID MONROE	1.0											
DIRECTOR		~						0	0			0
(21) ED RESHEW DIRECTOR	1.0	/						0				0
(22)								0		0		
(23)												
(24)												
(24)												
(25)												
1b Sub-total								571,366	0		5	57,988
c Total from continuation sheets to Part d Total (add lines 1b and 1c)							<b>&gt;</b>	571,366	0			0
2 Total number of individuals (including but	not limited					above	e) w	ho received me	ore than \$100,0	00 of		
reportable compensation from the organi	zation 🚩							4			Yes	No
3 Did the organization list any former of employee on line 1a? If "Yes," completes							emp	oloyee, or high	est compensat	ed <b>3</b>		V
4 For any individual listed on line 1a, is the organization and related organizations										ch		
individual									ation or individ		V	
for services rendered to the organization Section B. Independent Contractors	rir yes, c	ompi	ete	SCI	ieat	iie J ī	or s	sucn person		5		
Complete this table for your five highest compensation from the organization. Rep												 ax
year.							_					
(A) Name and business add							<b>(B)</b> Description of s	ervices	(C) Compen			
2 Total number of independent contractor							th		ove) who			
received more than \$100,000 of compens	auon mom t	ile or	yan	ı∠dî	IUI			0		For	m <b>990</b>	(2018)

## Part VIII Statement of Revenue

		Check if Schedule C	contains a re	sponse or note to	any line in this (A) Total revenue	Part VIII  (B)  Related or	(C) Unrelated	(D) Revenue
					Total Tevenide	exempt function revenue	business revenue	excluded from tax under sections 512–514
nts nts	1a	Federated campaigns	s <b>1a</b>	0				
ara our	b	Membership dues .	1b	0				
s, C Am	С	Fundraising events .	1c	177,780				
Gift Iar	d	Related organizations		0				
Contributions, Gifts, Grants and Other Similar Amounts	е	Government grants (con		0				
tior S 's	f	All other contributions, g						
햙		and similar amounts not inc		5,001,389				
od Et	g	Noncash contributions includ	·	0				
	h	Total. Add lines 1a-1	f	▶	5,179,169			
Program Service Revenue				Business Code				
eve	2a	CHILDCARE REVENUE			3,821,100	3,821,100		
e D	b	MEMBERSHIP REVEN	UE 		2,250,172	2,250,172		
<u>S</u>	С	DAY CAMP REVENUE			0	0		
Se	d	RESIDENT CAMP REV			0	0		
ram	е	CHILDCARE REVENUE INFANT/			0	0	_	
rog	f	All other program ser			840,027	840,027	0	0
	g	Total. Add lines 2a-2	†		6,911,299			
	3	Investment income and other similar amo			00.400			00.400
			,		39,133	0	0	39,133
	4	Income from investmen	•	•	0	0	0	0
	5	Royalties	(i) Real	(ii) Personal	U	U	U	U
	6a	Gross rents	93,323	<u> </u>				
	b	Less: rental expenses	93,32	0				
	C	Rental income or (loss)	93,323	3 0				
	d	Net rental income or (	/I \		93,323			93,323
	7a	Gross amount from sales of	(i) Securities	(ii) Other	33,323			30,323
	l a	assets other than inventory	579,528	.,				
	b		0.0,020					
		and sales expenses .	563,850	0				
	С	Gain or (loss)	15,678					
	d	Net gain or (loss) .		▶	15,678	0	0	15,678
Other Revenue	8a	Gross income from fu			,		,	,
Vel		events (not including \$						
æ		of contributions reporte						
ē		See Part IV, line 18 .		853,110				
₹	b	Less: direct expenses		585,539				
	С	Net income or (loss) f		events . <b>&gt;</b>	267,571			267,571
	9a	*		a				
	b	Less: direct expenses		o				
		Net income or (loss) f		tivities <b>&gt;</b>				
	10a	Gross sales of in returns and allowance	es <sub>a</sub>	4,857				
	b	Less: cost of goods s		)				
	С	Net income or (loss) f		_	4,857	4,857		
	44-	Miscellaneous R	evenue	Business Code	00.005	00.005		
	11a	OTHER INCOME		900099	69,625	69,625		
	b							
	C C	All other revenue .			0	0	0	0
	d	Total. Add lines 11a-			69,625	U	0	U
	12	Total revenue. See in			12,580,655	6,985,781	0	415,705
		. Otal revenue. Oce II	. 611001001		12,000,000	0,000,701	U	Form <b>990</b> (2018)

### 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).

Do no	Check if Schedule O contains a response include amounts reported on lines 6b, 7b,	(A)	(B) Program service	(C)	(D)
	o, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundráising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				·
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	0	0		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	629,355	487,942	97,621	43,792
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	4,132,389	3,203,861	640,983	287,545
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	188,269	151,601	26,081	10,587
9	Other employee benefits	407,729	328,318	56,484	22,927
10	Payroll taxes	339,867	267,023	42,966	29,878
11	Fees for services (non-employees):				
а	Management				
b	Legal	116,957		116,957	
C	Accounting	37,402		37,402	
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column				
g	(A) amount, list line 11g expenses on Schedule O.)	551,348	296,494	110,532	144,322
12	Advertising and promotion	73,746	42,674	30,718	354
13	Office expenses	10,110	:=,0:::	30,1.10	
14	Information technology				
15	Royalties				
16	Occupancy	794,569	672,573	114,044	7,952
17	Travel	85,753	85,753		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	358,475	120,321	77,753	160,401
20	Interest	164,394		164,394	
21	Payments to affiliates	123,303	110,973	0	12,330
22	Depreciation, depletion, and amortization .	642,211	642,211		
23	Insurance	219,693	178,186	41,507	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	FOOD AND SUPPLIES	548,687	532,536	7,983	8,168
b	ADMISSIONS	244,299	244,299		
c d	EQUIPMENT RENTAL AND MAINTENANCE	214,291	193,331	20,960	
e	All other expenses	1,872,962	1,600,686	225,557	46,719
25	Total functional expenses. Add lines 1 through 24e	11,745,699	9,158,782	1,811,942	774,975
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   if following SOP 98-2 (ASC 958-720)	, 10,100	-,,	72 132 12	,510

### Part X Balance Sheet

k if Schedule O contains a response of	r note to anv li	ne in this Pai	ΤX		
		10 111 11110 1 41		<del></del>	-
			(A) Beginning of year		<b>(B)</b> End of year
non-interest-bearing		[	2,599,071	1	1,683,780
s and temporary cash investments			5,629,173	2	482,46
s and grants receivable, net		[	2,942,414	3	2,195,05
its receivable, net		17,585	4	42,43	
and other receivables from current and	former officers	, directors,			
s, key employees, and highest co					
ete Part II of Schedule L		[	0	5	(
nd other receivables from other disqualified pers )), persons described in section 4958(c)(3)(B), an ng organizations of section 501(c)(9) volur tions (see instructions). Complete Part II of Sche	nployers and beneficiary		6		
and loans receivable, net			7		
ries for sale or use		-		8	
d expenses and deferred charges		-	242,356	9	181.02
ouildings, and equipment: cost or			242,330	9	101,020
asis. Complete Part VI of Schedule D	10a	46,493,796			
ccumulated depreciation		6,878,820	30,193,129	10c	39,614,976
·			63.365	11	65,590
nents—other securities. See Part IV, line		<u> </u>	129,541	12	133,678
nents—other securities. See Part IV, line		-	0	13	133,07
ole assets	0	14	<u>'</u>		
ssets. See Part IV, line 11	H	7,109	15	7,13	
ssets. See Fart IV, lifte 11		_	41,823,743	16	44,406,132
its payable and accrued expenses			1,747,837	17	3,363,064
payable	1,747,037	18	3,303,004		
		-	259,493	19	399,31
d revenue		•	20	•	
empt bond liabilities			0	21	(
or custodial account liability. Complete		_		21	
and other payables to current and for s, key employees, highest comper					
ified persons. Complete Part II of Schedu				22	
			0	23	(
d mortgages and notes payable to unrelate	-	H	2,616,284	24	
red notes and loans payable to unrelated	•	F	2,010,204	24	2,616,284
iabilities (including federal income tax, and other liabilities not included on lines					
edule D	5 17-24). Oomp	nete i ait X	0	25	
abilities. Add lines 17 through 25		-	4,623,614	25 26	6,378,659
zations that follow SFAS 117 (ASC 958			4,023,014	20	0,370,038
ete lines 27 through 29, and lines 33 an					
icted net assets		[	29,727,156	27	34,811,686
rarily restricted net assets			7,443,917	28	3,186,731
nently restricted net assets		-	29,056	29	29,056
eations that do not follow SFAS 117 (ASC 9) te lines 30 through 34.			·		,
		1	0	30	(
		-		_	
		-		_	
			37.200.129	_	38,027,473
				_	44,406,132
s o ed	stock or trust principal, or current funds or capital surplus, or land, building, or ed dearnings, endowment, accumulated in assets or fund balances	stock or trust principal, or current funds or capital surplus, or land, building, or equipment fund dearnings, endowment, accumulated income, or other assets or fund balances	e lines 30 through 34.  stock or trust principal, or current funds	stock or trust principal, or current funds	stock or trust principal, or current funds

Form **990** (2018)

					90 -
Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		12,58	0,655
2	Total expenses (must equal Part IX, column (A), line 25)	2		11,74	5,699
3	Revenue less expenses. Subtract line 2 from line 1	3		83	4,956
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		37,20	0,129
5	Net unrealized gains (losses) on investments	5		(7	',612)
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		38,02	7,473
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990:   Cash  Accrual  Other				
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plain in			
	Schedule O.				
<b>2</b> a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	~	
	If "Yes," check a box below to indicate whether the financial statements for the year were com-	piled or			
	reviewed on a separate basis, consolidated basis, or both:				
	✓ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	~	
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed on a			
	separate basis, consolidated basis, or both:				
	✓ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for c				
	of the audit, review, or compilation of its financial statements and selection of an independent according		2c	~	
	If the organization changed either its oversight process or selection process during the tax year, e	xplain in			
	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?		3a		~
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits?	•			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udits.	3b		

#### **SCHEDULE A** (Form 990 or 990-EZ)

## **Public Charity Status and Public Support**

OMB No. 1545-0047 2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization 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.

**Employer identification number** 

YOU	JNG N	MENS CHRISTIAN ASSC	CIATION OF	SOUTHEAST VENT	TURA C	OUNTY	95-23	05501	
Par	t I	Reason for Public Cha	rity Status (All	organizations must	comple	te this p	art.) See instructio	ns.	
The c	_	ation is not a private founda		,		-	•		
1		church, convention of church							
2		school described in section		,			• •		
3		nospital or a cooperative hos						···· - · · · ·	
4		nedical research organization spital's name, city, and state		onjunction with a hosp	oital desc	ribed in s	section 170(b)(1)(A)	(III). Enter the	
5		organization operated for		collogo or university	owned o	r operate	od by a government	al unit described in	
3		ction 170(b)(1)(A)(iv). (Com		college of university	owned o	Operate	d by a government	ar unit described in	
6 7		ederal, state, or local governorganization that normally	•			٠,	. , , , , ,	n the general public	
		scribed in section 170(b)(1)		•					
8 9		community trust described in			•				
9	or un	agricultural research organ university or a non-land-gra iversity:	nt college of agr	iculture (see instruction	ons). Ente	r the nan	ne, city, and state of	the college or	
10	An organization that normally receives: (1) more than 33½% 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 33½% 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 <b>section 509(a)(2).</b> (Complete Part III.)								
11		organization organized and	•	•	•		` '` '		
12		organization organized and	•	,			•		
		one or more publicly support eck the box in lines 12a thro							
а		Type I. A supporting organ	•	• • • • •		•	•		
a		the supported organization supporting organization. Ye	(s) the power to	regularly appoint or e	lect a ma	jority of t			
b		Type II. A supporting organ	nization supervis	sed or controlled in co	nnection	with its s	supported organizati	on(s), by having	
		control or management of organization(s). You must				persons	that control or man	age the supported	
С		Type III functionally integ its supported organization(						ally integrated with,	
d		Type III non-functionally integration that is not functionally integrated requirement (see instruction)	grated. The orga	nization generally mus	st satisfy	a distribu	ution requirement an	• • • • • • • • • • • • • • • • • • • •	
е		Check this box if the organ functionally integrated, or 7						e II, Type III	
f		r the number of supported o	-						
g		ide the following information					I		
	(i) Nam	e of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in you	organization ur governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)	
					Yes	No			
(A)									
(~) ——									
(B)									
(C)									
(D)									
(E)									

Part	Support Schedule for Organiza	ations Descr	ibed in Sect	ions 170(b)(1	)(A)(iv) and	170(b)(1)(A)(v	ri)
	(Complete only if you checked the						alify under
	Part III. If the organization fails to	qualify unde	er the tests lis	sted below, p	lease comple	ete Part III.)	
	on A. Public Support						
	dar year (or fiscal year beginning in)	<b>(a)</b> 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	<b>(e)</b> 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						
	on B. Total Support			T	I	T	T
	dar year (or fiscal year beginning in)	<b>(a)</b> 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	<b>(e)</b> 2018	(f) Total
7 8	Amounts from line 4						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc					12	
13	First five years. If the Form 990 is for the		n's first, secon	d, third, fourth	n, or fifth tax y	ear as a section	on 501(c)(3)
	organization, check this box and stop he						🕨 🗌
	on C. Computation of Public Suppor						
14	Public support percentage for 2018 (line 6		-			14	<u>%</u>
15 16a	Public support percentage from 2017 Schedule A, Part II, line 14						
b							
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization me Part VI how the organization meets the "organization	eets the "facts facts-and-circ	-and-circumst cumstances" te	ances" test, clest. The organi	neck this box a zation qualifie	and <b>stop here</b> s as a publicly · · · ·	Explain in supported
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organization in Part VI how the organization in supported organization	ation meets the neets the "fac	ne "facts-and-o	circumstances stances" test.	" test, check The organizat	this box and	stop here.
18	Private foundation. If the organization di	d not check a	hox on line 13	16a 16b 17a	a or 17h chec	k this hox and	SAA

Schedule A (Form 990 or 990-EZ) 2018 Page **3** 

### 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									
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total		
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	9,441,083	864,297	859,802	6,307,210	5,179,169	22,651,561		
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	7,713,068	7,903,868	7,903,756	7,089,804	6,985,781	37,596,277		
3	Gross receipts from activities that are not an unrelated trade or business under section 513						0		
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0		
5	The value of services or facilities furnished by a governmental unit to the organization without charge						0		
6	Total. Add lines 1 through 5	17,154,151	8,768,165	8,763,558	13,397,014	12,164,950	60,247,838		
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .	60,805	64,267	99,242	1,095,293	2,324,100	3,643,707		
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	0	0	0	0	0	0		
С	Add lines 7a and 7b	60,805	64,267	99,242	1,095,293	2,324,100	3,643,707		
8	Public support. (Subtract line 7c from	00,003	04,207	99,242	1,093,293	2,324,100			
Sacti	on B. Total Support						56,604,131		
	dar year (or fiscal year beginning in) ▶	(a) 2014	<b>(b)</b> 2015	(c) 2016	<b>(d)</b> 2017	<b>(e)</b> 2018	(f) Total		
9	Amounts from line 6	17,154,151	8,768,165	8,763,558	13,397,014	12,164,950	60,247,838		
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.	98,498	90,449	101,158	122,865	132,456	545,426		
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0		
С	Add lines 10a and 10b	98,498	90,449	101,158	122,865	132,456	545,426		
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0		
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	0	0	0	0	0	0		
13	Total support. (Add lines 9, 10c, 11,	-							
14	and 12.)	_	8,858,614 's first, secon	8,864,716 d, third, fourth,	13,519,879 , or fifth tax ye	12,297,406 ear as a section	60,793,264 n 501(c)(3)		
	organization, check this box and stop her						▶ □		
	on C. Computation of Public Suppor								
15	Public support percentage for 2018 (line 8	, , , , , , , , , , , , , , , , , , , ,	•	, , , , , , , , , , , , , , , , , , , ,		15	93.11 %		
16	Public support percentage from 2017 Sch					16	97.30 %		
	on D. Computation of Investment Inc				(6)	47	0.00.0/		
17	Investment income percentage for 2018 (I			-		17	0.90 %		
18 19a	Investment income percentage from 2017 331/3% support tests—2018. If the organi					18 ore than 33 <sup>1</sup> /3%	0.74 % 6, and line		
	17 is not more than 331/3%, check this box								
b	331/3% support tests—2017. If the organiz line 18 is not more than 331/3%, check this b						3 <sup>1</sup> /3%, and		
20	Private foundation. If the organization die	_	=	· ·		-	_		

Schedule A (Form 990 or 990-EZ) 2018 Page 4

#### 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.)

#### Se

Secti	on A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		
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)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	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)? If "Yes," explain in <b>Part VI</b> 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.	1-		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in <b>Part VI</b> , 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).	4c		
b	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	<b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?	5c		
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? If "Yes," provide detail in <b>Part VI</b> .	6		
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? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
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))? If "Yes," provide detail in <b>Part VI.</b>	9a		
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? If "Yes," provide detail in <b>Part VI.</b>	9b		
С	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? If "Yes," provide detail in <b>Part VI.</b>	9b 9c		
10a		10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to	IVa		
	determine whether the organization had excess business holdings.)	10b		

Schedule A (Form 990 or 990-EZ) 2018

\_

Schedul	e A (Form 990 or 990-EZ) 2018		F	Page \$	
Part	V Supporting Organizations (continued)				
			Yes	No	
11	Has the organization accepted a gift or contribution from any of the following persons?				
а	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?	11a			
	A family member of a person described in (a) above?	11b			
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in <b>Part VI</b> .	11c			
Section	on 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 <b>Part VI</b> 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.	1			
2	Did the expenitation expects for the banefit of any supported expenitation other than the supported				
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 <b>Part</b>				
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,				
	supervised, or controlled the supporting organization.	2			
Section	on C. Type II Supporting Organizations				
	5.1. 5.1. 5.4 pc. 11.1.g		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)? <i>If "No," describe in Part VI how control</i>				
	or management of the supporting organization was vested in the same persons that controlled or managed				
	the supported organization(s).	1			
Section	on D. All Type III Supporting Organizations			l	
	,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,		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?	1			
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).	2			
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.	3			
Section	on 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 it	nstru	ctions	s).	
а	☐ The organization satisfied the Activities Test. Complete <b>line 2</b> below.				
b	The organization is the parent of each of its supported organizations. Complete line 3 below.				
С	☐ The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (	see in			
2	Activities Test. Answer (a) and (b) below.		Yes	No	
а	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 <b>Part VI identify</b>				
	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.				
	·	2a			
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 <b>Part VI</b> the				
	reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	0,			
_		2b			
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i>				
а	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? <i>Provide details in Part VI</i> .	3a			
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 <b>Part VI</b> the role played by the organization in this regard.	3b			

instructions).

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	gani	zations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ			
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		
<b>6</b> 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			
<b>b</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		
<b>6 Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functional	ly int	tegrated Type III supporti	ng organization (see

Schedule A (Form 990 or 990-EZ) 2018

Part	V Type III Non-Functionally Integrated 509(a)(3	) Supporting Organi	zations (continued)	
Secti	on D-Distributions			Current Year
1	Amounts paid to supported organizations to accomplish	exempt purposes		
2	Amounts paid to perform activity that directly furthers exe organizations, in excess of income from activity	empt purposes of suppo	orted	
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	
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 whic (provide details in <b>Part VI</b> ). See instructions.	h the organization is res	sponsive	
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Secti	on E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reasonable cause required—explain in <b>Part VI</b> ). See instructions.			
3	Excess distributions carryover, if any, to 2018			
a	From 2013			
b	From 2014			
С	From 2015			
d	From 2016			
е	From 2017			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
i	Carryover from 2013 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from Section D, line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2018 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in <b>Part VI.</b> See instructions.			
6	Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in <b>Part VI.</b> See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j and 4c.			
8	Breakdown of line 7:			
а	Excess from 2014			
b	Excess from 2015			
С	Excess from 2016			
d	Excess from 2017			
	Excess from 2018			

Schedule A (Form 990 or 990-EZ) 2018

### 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			Expl	anation			
SCHEDULE A, PART III, LINE 12 - OTHER INCOME	Other Income Type (1)NATURE AND SOURCE	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total

#### Schedule B

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

Department of the Treasury Internal Revenue Service Name of the organization

#### 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

**Employer identification number** 

YOUNG MENS CHRISTIAN ASSOCIATION OF SOUTHEAST VENTURA COUNTY 95-2305501 Organization type (check one): Filers of: Section: Form 990 or 990-EZ ✓ 501(c)(3 ) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation ☐ 527 political organization Form 990-PF ☐ 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation ☐ 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, 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 331/3% 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 (entering "N/A" in column (b) instead of the contributor name and address), 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 

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) (2018)

Name of organization
YOUNG MENS CHRISTIAN ASSOCIATION OF SOUTHEAST VENTURA COUNTY

Employer identification number

95-2305501

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	SHUMWAY HOLDINGS, INC. 3250 CAMINO DEL SOL	- \$ 500,000	Person  Payroll  Noncash		
	OXNARD, CA 93030		(Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
2	UNITED WAY OF GREATER LOS ANGELES  1317 DEL NORTE RD., #100	\$ 500,000	Person  Payroll  Noncash		
	CAMARILLO, CA 93010		(Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
3	VENTURA COUNTY COMMUNITY FOUNDATION  VCCF NONPROFIT CENTER, 4001 MISSION OAKS BLVD., #A  CAMARILLO, CA 93012	\$ 445,000	Person Payroll Noncash  (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
4	VENTRURA COUNTY COMMUNITY FOUNDATION  VCCF NONPROFIT CENTER, 4001 MISSION OAKS BLVD., #A  CAMARILLO, CA 93012	\$ 269,100	Person Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
5	VALENTINE FOUNDATION  100 EAST THOUSAND OAKS BLVD., #257  THOUSAND OAKS, CA 91362	\$ 250,000 	Person Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
66	UNITED WAY OF GREATER LOS ANGELES  1317 DEL NORTE RD., #100  CAMRILLO, CA 93010	\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)		

Name of organization

Employer identification number

YOUNG MENS CHRISTIAN ASSOCIATION OF SOUTHEAST VENTURA COUNTY

95-2305501

YOUNG	MENS CHRISTIAN ASSOCIATION OF SOUTHEAST VENTURA C	JUNITY	95-2305501
Part I	Contributors (see instructions). Use duplicate co	ppies of Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	ANNE ROMINE  1555 EAST HILLCREST DRIVE  THOUSAND OAKS, CA 91362	\$ 187,500	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	NORTH VALLEY COMMUNITY FOUNDATION  240 MAIN STREET #260  CHICO, CA 95928	\$ 130,000	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Name of organization
YOUNG MENS CHRISTIAN ASSOCIATION OF SOUTHEAST VENTURA COUNTY

Employer identification number 95-2305501

Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. Part II (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given Date received Part I (See instructions.) (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given **Date received** (See instructions.) Part I (c) FMV (or estimate) (a) No. (b) (d) from Description of noncash property given **Date received** Part I (See instructions.) (a) No. (c) (d) from FMV (or estimate) Description of noncash property given **Date received** Part I (See instructions.) (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given **Date received** Part I (See instructions.) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given **Date received** Part I (See instructions.)

Name of organization **Employer identification number** YOUNG MENS CHRISTIAN ASSOCIATION OF SOUTHEAST VENTURA COUNTY 95-2305501 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. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held from Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held fŕom Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held fŕom Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (c) Use of gift (b) Purpose of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

# SCHEDULE D (Form 990)

### **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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

YOUNG MENS CHRISTIAN ASSOCIATION OF SOUTHEAST VENTURA COUNTY

Employer identification number

YOUN	G MENS CHRISTIAN ASSOCIATION OF SOUTHEAST V	/ENTURA COUNTY	95-2305501
Par			
	Complete if the organization answered		
		(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		
	funds are the organization's property, subject to the	ne organization's exclusive legal contro	ol? 🗌 Yes 🗌 No
6	Did the organization inform all grantees, donors, a		
	only for charitable purposes and not for the bene		
	conferring impermissible private benefit?		$\square$ Yes $\square$ No
Par			
	Complete if the organization answered		
1	Purpose(s) of conservation easements held by the		
	☐ Preservation of land for public use (e.g., recrea	ation or education) 🗌 Preservation o	f a historically important land area
	☐ Protection of natural habitat	☐ Preservation o	f a certified historic structure
	☐ Preservation of open space		
2	Complete lines 2a through 2d if the organization h	eld a qualified conservation contribution	
	easement on the last day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		<b>2a</b>
b	Total acreage restricted by conservation easemen	ts	2b
С	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, trans	sferred, released, extinguished, or terr	minated by the organization during the
	tax year ►		
4	Number of states where property subject to conse		
5	Does the organization have a written policy re		
	violations, and enforcement of the conservation ea		
6	Staff and volunteer hours devoted to monitoring, inspe	ecting, handling of violations, and enforcin	g conservation easements during the year
	<b>&gt;</b>		
7	Amount of expenses incurred in monitoring, inspecting	ng, handling of violations, and enforcing	conservation easements during the year
_	<b>&gt;</b> \$		
8	Does each conservation easement reported on line		
	and section 170(h)(4)(B)(ii)?		5515
9	In Part XIII, describe how the organization reports		The state of the s
	balance sheet, and include, if applicable, the text		nancial statements that describes the
	organization's accounting for conservation easem		011 0: 11 4
Part		· · · · · · · · · · · · · · · · · · ·	
	Complete if the organization answered		
та	If the organization elected, as permitted under SF		
	works of art, historical treasures, or other simila	•	
	public service, provide, in Part XIII, the text of the		
b	If the organization elected, as permitted under S		
	works of art, historical treasures, or other simila		ducation, or research in furtherance of
	public service, provide the following amounts relat		
	(i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X		<b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X		<b>&gt;</b> \$
2	If the organization received or held works of art	t, historical treasures, or other similar	r assets for financial gain, provide the
	following amounts required to be reported under S	· · · · · · · · · · · · · · · · · · ·	
а	Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X		<b>▶</b> \$
b	Assets included in Form 990, Part X		<b>&gt;</b> \$

 Schedule D (Form 990) 2018
 Page 2

Pari	Organizations Maintaining	Collections of	Art, Historical	Treasures, or	Other Similar A	Assets (conti	nued)
3	Using the organization's acquisition, collection items (check all that apply):		ner records, che	ck any of the fo	ollowing that are a	significant us	e of its
а	☐ Public exhibition		<b>d</b> Loar	or exchange p	rograms		
b	☐ Scholarly research		e 🗌 Othe	r			
С	☐ Preservation for future generations	3					
4	Provide a description of the organizat XIII.	tion's collections a	nd explain how	they further the	organization's ex	empt purpose	in Part
5	During the year, did the organization					ıilar	
	assets to be sold to raise funds rather	than to be mainta	ined as part of th	e organization'	s collection? .	· 🗌 Yes	☐ No
Part		_					
	Complete if the organization 990, Part X, line 21.				·		orm 
1a	Is the organization an agent, trustee included on Form 990, Part X?						☐ No
b	If "Yes," explain the arrangement in Pa	art XIII and comple	te the following t	able:			
						Amount	
С	Beginning balance				1c		
d	9 ,				1d		
e	Distributions during the year				1e		
f	Ending balance				1f	V	
2a	Did the organization include an amount if "Yes," explain the arrangement in Page 1981.					-	∐ No
b Par		art Alli. Check here	e ii trie explanatio	n nas been pro	ovided on Part XIII	· · · ·	<u> </u>
ı aı	Complete if the organization	answered "Yes"	on Form 990	Part IV line 1	n		
	Complete ii the organization	(a) Current year	(b) Prior year	(c) Two years ba		ack (e) Four yea	rs back
1a	Beginning of year balance	29,056	29,056	-			29,056
b	Contributions	-,	-,	-,			
С	Net investment earnings, gains, and losses						
d	Grants or scholarships						
е	Other expenditures for facilities and programs	0	0		0	0	0
f	Administrative expenses						
g	End of year balance	29,056	29,056	29,0	056 29,0	)56	29,056
2	Provide the estimated percentage of t		d balance (line 1	g, column (a)) h	eld as:		
а	Board designated or quasi-endowment	nt ▶ 0.00	2%				
b		.00 %					
С	Temporarily restricted endowment ▶	0.00 %					
0-	The percentages on lines 2a, 2b, and			-4 11-1		41	
За	Are there endowment funds not in the organization by:	e possession of th	e organization th	at are neid and	a administered for		
	- · ·					Ye	s No
	<ul><li>(i) unrelated organizations</li><li>(ii) related organizations</li></ul>					. 3a(i) . 3a(ii)	\ <u>\</u>
b	If "Yes" on line 3a(ii), are the related o					. 3b	+•
4	Describe in Part XIII the intended uses	•	•			. 05	
Part							
	Complete if the organization	answered "Yes"	on Form 990,	Part IV, line 1	1a. See Form 99	0, Part X, line	10.
	Description of property	(a) Cost or oth (investme		or other basis other)	(c) Accumulated depreciation	(d) Book va	lue
1a	Land			3,207,165		3,2	207,165
b	Buildings			40,619,054	4,937,600	35,€	81,454
С	Leasehold improvements						
d	Equipment			2,658,657	1,941,220	7	717,437
е	Other			8,920			8,920
Total	Add lines 1a through 1e (Column (d) n	nust equal Form 90	00 Part X colum	n (R) line 10c )	<b>.</b>	396	314 976

Schedule D (Form 990) 2018

Schedule D (Form 990) 2018

Part VII	Investments – Other Securities Complete if the organization ans		n 990. Part IV. I	line 11b. See Form	n 990. Part X. line 12.
	(a) Description of security or category (including name of security)		(b) Book value	(c) Met	thod of valuation: l-of-year market value
(1) Financial	derivatives				
	neld equity interests				
(3) Other					
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)	(I) IF 000 B IV I (D) I (0) A				
	(b) must equal Form 990, Part X, col. (B) line 12.) ►	.1			
Part VIII	Investments—Program Related		000 Dort IV I	lina 11a Cas Earm	000 Dort V line 12
	Complete if the organization ans	wered res on For	(b) Book value		
	(a) Description of investment		(b) Book value		thod of valuation: I-of-year market value
(4)					<u> </u>
<u>(1)</u> (2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	(b) must equal Form 990, Part X, col. (B) line 13.) ▶				
Part IX	Other Assets. Complete if the organization ans		n 990, Part IV, I	line 11d. See Form	
	(8	a) Description			(b) Book value
(1)					
(2)					
(3)					
(4)					
<u>(5)</u> (6)					
(7)					
(8)					
(9)					
	mn (b) must equal Form 990, Part X, co	ol. (B) line 15.)			
Part X	Other Liabilities.				<u> </u>
	Complete if the organization ansiline 25.	wered "Yes" on Forr	n 990, Part IV, I	line 11e or 11f. Se	e Form 990, Part X,
1.	(a) Description of liability	(b) Book value			
(1) Federal in	ncome taxes				
(2) DUE TO	WVCF		0		
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)	(h) mariet equal Forms 000 Bart V				
	(b) must equal Form 990, Part X, col. (B) line 25.) ►	ide the toyt of the feeting	0	ionio financial statava	anta that rangets the
∠. LIADIIITY TO	r uncertain tax positions. In Part XIII, provi	ide the text of the footho	ie io ine organizat	lion s iirianciai stateme	ents that reports the

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2018 Page **4** 

Part	•			Return.	•
	Complete if the organization answered "Yes" on Form 990, F		V, line 12a.		
1	Total revenue, gains, and other support per audited financial statements			1	12,573,043
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	۱.	(7.040)		
а	Net unrealized gains (losses) on investments	2a	(7,612)	-	
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	0		
е	Add lines 2a through 2d			2e	(7,612)
3	Subtract line <b>2e</b> from line <b>1</b>			3	12,580,655
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	0		
С				4c	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	12,580,655
Part				er Retui	rn.
	Complete if the organization answered "Yes" on Form 990, F	⊃art I	V, line 12a.		
1	Total expenses and losses per audited financial statements			1	11,745,699
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	0		
е	Add lines <b>2a</b> through <b>2d</b>			2e	0
3	Subtract line <b>2e</b> from line <b>1</b>			3	11,745,699
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	ĺ			, ,
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	0		
c	Add lines <b>4a</b> and <b>4b</b>			4c	0
5					
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line	e 18.)		5	11.745.699
_	Total expenses. Add lines <b>3</b> and <b>4c.</b> ( <i>This must equal Form 990, Part I, line</i> <b>XIII Supplemental Information.</b>	e 18.)		5	11,745,699
Part	XIII Supplemental Information.				
Part Provid	Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; P	art IV, lines 1b and 2b	; Part V,	line 4; Part X, line
Part Provid 2; Part	Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	d 4; P	art IV, lines 1b and 2b	; Part V,	line 4; Part X, line
Part Provid 2; Part	Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; P	art IV, lines 1b and 2b	; Part V,	line 4; Part X, line
Part Provid 2; Part	Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	d 4; P	art IV, lines 1b and 2b	; Part V,	line 4; Part X, line
Part Provid 2; Part	Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	d 4; P	art IV, lines 1b and 2b	; Part V,	line 4; Part X, line
Part Provid 2; Part	Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	d 4; P	art IV, lines 1b and 2b	; Part V,	line 4; Part X, line
Part Provid 2; Part	Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	d 4; P	art IV, lines 1b and 2b	; Part V,	line 4; Part X, line
Part Provid 2; Part	Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	d 4; P	art IV, lines 1b and 2b	; Part V,	line 4; Part X, line
Part Provid 2; Part	Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	d 4; P	art IV, lines 1b and 2b	; Part V,	line 4; Part X, line
Part Provid 2; Part	Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	d 4; P	art IV, lines 1b and 2b	; Part V,	line 4; Part X, line
Part Provid 2; Part	Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	d 4; P	art IV, lines 1b and 2b	; Part V,	line 4; Part X, line
Part Provid 2; Part	Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	d 4; P	art IV, lines 1b and 2b	; Part V,	line 4; Part X, line
Part Provid 2; Part	Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	d 4; P	art IV, lines 1b and 2b	; Part V,	line 4; Part X, line
Part Provid 2; Part	Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	d 4; P	art IV, lines 1b and 2b	; Part V,	line 4; Part X, line
Part Provid 2; Part	Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	d 4; P	art IV, lines 1b and 2b	; Part V,	line 4; Part X, line
Part Provid 2; Part	Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	d 4; P	art IV, lines 1b and 2b	; Part V,	line 4; Part X, line
Part Provid 2; Part	Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	d 4; P	art IV, lines 1b and 2b	; Part V,	line 4; Part X, line
Part Provid 2; Part	Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	d 4; P	art IV, lines 1b and 2b	; Part V,	line 4; Part X, line
Part Provid 2; Part	Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	d 4; P	art IV, lines 1b and 2b	; Part V,	line 4; Part X, line
Part Provid 2; Part	Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	d 4; P	art IV, lines 1b and 2b	; Part V,	line 4; Part X, line
Part Provid 2; Part	Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	d 4; P	art IV, lines 1b and 2b	; Part V,	line 4; Part X, line
Part Provid 2; Part	Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	d 4; P	art IV, lines 1b and 2b	; Part V,	line 4; Part X, line
Part Provid 2; Part	Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	d 4; P	art IV, lines 1b and 2b	; Part V,	line 4; Part X, line
Part Provid 2; Part	Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	d 4; P	art IV, lines 1b and 2b	; Part V,	line 4; Part X, line
Part Provid 2; Part	Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	d 4; P	art IV, lines 1b and 2b	; Part V,	line 4; Part X, line

	<b>\</b> / I	н
סכו	 $\sim$ 1	
Πа	$\Delta$ I	41

**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 V, LINE 4 - INTENDED USES OF ENDOWMENT FUNDS	EARNINGS TO BE USED FOR UNDERPRIVILEGED INDIVIDUALS FOR FINANCIAL ASSISTANCE IN YMCA PROGRAMS.
SCHEDULE D, PART X, LINE 2 - FIN 48 (ASC 740) FOOTNOTE	FINANCIAL ACCOUNTING STANDARDS BOARD ASC 740-10 PROVIDES GUIDANCE FOR REPORTING UNCERTAINTY IN INCOME TAXES. ACCORDINGLY, THE ORGANIZATION IS NOT AWARE OF ANY MATERIAL UNCERTAIN TAX POSITIONS THAT QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS. THE ORGANIZATION IS NO LONGER SUBJECT TO U.S. FEDERAL INCOME TAX EXAMINATIONS FOR YEARS BEFORE 2014 OR STATE INCOME TAX EXAMINATIONS FOR YEARS BEFORE 2013.

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

### **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

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

YOUN	IG MENS CHRISTIAN ASSOCIATION	OF SOUTHEAS	T VENTURA	COUNTY		95-	2305501
Par	Fundraising Activities. Form 990-EZ filers are n	Complete if the contract of th	ne organiza complete	ation answ this part.	vered "Yes" on	Form 990, Part IV,	line 17.
1 a b c d 2a b	Indicate whether the organization  Mail solicitations  Internet and email solicitation  Phone solicitations  In-person solicitations  Did the organization have a writtor key employees listed in Form  If "Yes," list the 10 highest paid compensated at least \$5,000 by	ns ten or oral agre 990, Part VII) or individuals or e	e f g = ement with r entity in coentities (fund	Solicitati Solicitati Special f any individ	on of non-govern on of governmen fundraising events lual (including offi with professional	ment grants t grants s cers, directors, trust fundraising services	Yes No
	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	custody o	draiser have r control of outions?	(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
1			Yes	No			
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total 3	List all states in which the orga registration or licensing.				olicit contribution	s or has been notifi	ed it is exempt from

**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.

		gross receipts greater tha				
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			2018 GALA	GOLF TOURNAMENT	3	(add col. <b>(a)</b> through col. <b>(c)</b> )
Φ			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	379,479	158,084	493,327	1,030,890
ш	2	Less: Contributions	177,780			177,780
	3	Gross income (line 1 minus line 2)	201,699	158,084	493,327	853,110
	4	Cash prizes				0
	5	Noncash prizes	7,500	14,941		22,441
nses	6	Rent/facility costs	151,790	40,960	71,284	264,034
Direct Expenses	7	Food and beverages		2,648		2,648
Direc	8	Entertainment	22,359	12,240	12,000	46,599
	9	Other direct expenses .	66,979	14,925	167,913	249,817
	10 11	Direct expense summary. Ac Net income summary. Subtra				585,539 267,571
Рa	rt III	Gaming. Complete if th	organization answer	ared "Ves" on Form (	000 Part IV line 10 /	
		\$15,000 on Form 990-E2		orea res en renn e	500, 1 art 10, mio 10, v	or reported more than
<sub>(1)</sub>		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		(b) Pull tabs/instant		(d) Total gaming (add
Revenue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
eve						
<u>~</u>	1	Gross revenue				
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses .				
	6	Volunteer labor	☐ Yes % ☐ No	☐ Yes % ☐ No	☐ Yes % ☐ No	
	7	Direct expense summary. Ac	ld lines 2 through 5 in c	olumn (d)		
	8	Net gaming income summar	y. Subtract line 7 from li	ne 1, column (d)		
9		nter the state(s) in which the or				
		the organization licensed to co				
	<b>b</b> If	"No," explain:				
10	a	/ere any of the organization's g	aming licenses revoked		ated during the tax vear	Yes No
		"Yes," explain:				
		· · · · · · · · · · · · · · · · · · ·				

chedu	ule G (Form 990 or 990-EZ) 2018		Page <b>3</b>
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	_
13	Indicate the percentage of gaming activity conducted in:		
а	The organization's facility		<u>%</u>
b	An outside facility		<u>%</u>
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name ►		
	Address ►		
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 ▶ \$		
С	If "Yes," enter name and address of the third party:		
	Name ►		
	Address ►		
16	Gaming manager information:		
	Name ►		
	Gaming manager compensation ▶ \$		
	Description of services provided ►		
	□ Director/officer □ Employee □ Independent contractor		
17	Mandatory distributions:		
а	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 ▶ \$		
Part	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (in Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional See instructions.		

Schedule G (Form 990 or 990-EZ) 2018

#### **SCHEDULE J** (Form 990)

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 2018

Open to Public Inspection Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

YOUNG MENS CHRISTIAN ASSOCIATION OF SOUTHEAST VENTURA COUNTY

95-2305501

Part	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.			
	☐ First-class or charter travel ☐ Housing allowance or residence for personal use			
	☐ Travel for companions ☐ Payments for business use of personal residence			
	☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees			
	☐ Discretionary spending account ☐ 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 filing 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.			
	✓ Compensation committee			
	☐ Independent compensation consultant ☐ Compensation survey or study			
	☐ Form 990 of other organizations ✓ 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:			
а	Receive a severance payment or change-of-control payment?	4a		~
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		~
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		V
	Only as ation F04/a\/0\ F04/a\/4\ and F04/a\/00\ averaginations much complete lines F 0			
5	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9.  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:			
а	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:			
а	The organization?	6a		~
b	Any related organization?	6b		V
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			
9	Regulations section 53.4958-6(c)?	9		

Schedule J (Form 990) 2018 Page 2

#### 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.

			f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)–(D)	in column (B) reported as deferred on prior Form 990	
RONNIE STONE	(i)	188,237	0	0	15,059	5,019	208,315	С	
1 CEO/PRESIDENT	(ii)	0	0	0	0	0	0	C	
	(i)								
2	(ii)								
	(i)								
3	(ii)								
	(i)								
4	(ii)								
_	(i)								
5	(ii)								
	(i) (ii)								
6	(i)								
7	(ii)								
1	(i)								
8	(ii)								
	(i)								
9	(ii)								
-	(i)								
10	(ii)								
	(i)								
11	(ii)								
	(i)								
12	(ii)								
	(i)								
13	(ii)								
	(i)								
14	(ii)								
	(i)								
15	(ii)								
	(i)								
16	(ii)								

Schedule J (Form 990) 2018

#### 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

2018

Open to Public Inspection

Name of the Organization
YOUNG MENS CHRISTIAN ASSOCIATION OF SOUTHEAST VENTURA COUNTY

Employer Identification Number 95-2305501

Return Reference - Identifier	Explanation
FORM 990, PART III, LINE 2 - NEW PROGRAM SERVICES	CALIFORNIA STRONG - IN RESPONSE TO TRAGEDIES IN CALIFORNIA IN NOVEMBER 2018, PROFESSIONAL BASEBALL PLAYERS CHRISTIAN YELICH, RYAN BRAUN AND MIKE MOUSTAKAS, WITH MIKE ATTANASIO FROM THE MILWAUKEE BREWERS OWNERSHIP GROUP AND RAMS' QUARTERBACK, JARED GOFF, JOINED FORCES WITH THE SOUTHEAST VENTURA COUNTY YMCA TO CREATE CALIFORNIA STRONG. CALIFORNIA STRONG'S COMMITMENT TO RAISING MONEY AND AWARENESS SUPPORTED THOSE AFFECTED BY THE BORDERLINE SHOOTING IN THOUSAND OAKS, THE CAMP FIRE IN NORTHERN CALIFORNIA AND THE WOOLSEY AND HILL FIRES IN SOUTHERN CALIFORNIA. GRANTS PROVIDED TO FAMILIES ARE INTENDED TO ADDRESS THE IMMEDIATE NEEDS THEY HAVE DIRECTLY FOLLOWING A DISASTER. CALIFORNIA STRONG ENCOMPASSES A NUMBER OF FUNDRAISING CAMPAIGNS TO ENSURE MAXIMUM EXPOSURE AND PARTICIPATION IN SUPPORT OF THOSE IN NEED NOW, AND FOR MONTHS AND YEARS TO COME. WITH THE SUPPORT OF PROFESSIONAL
FORM 990, PART III, LINE 4A - PROGRAM SERVICE DESCRIPTION	GREAT POTENTIAL AND DESERVE THE OPPORTUNITY TO DISCOVER WHO THEY ARE AND WHAT THEY CAN ACHIEVE. THAT'S WHY WE HELP YOUNG PEOPLE CULTIVATE THE VALUES, SKILLS AND RELATIONSHIPS THAT LEAD TO POSITIVE BEHAVIORS, BETTER HEALTH AND EDUCATIONAL ACHIEVEMENT.
	EACH DAY CHILDREN PARTICIPATING IN OUR LICENSED AFTER-SCHOOL CHILDCARE PROGRAM RECEIVE INDIVIDUAL ATTENTION AND HELP WITH THEIR SCHOOL HOMEWORK AND PARTICIPATE IN STRUCTURED DEVELOPMENTALLY APPROPRIATE LEARNING ACTIVITIES. CHILDREN ARE ENCOURAGED TO ENGAGE IN GAMES, SPORTS AND OTHER VIGOROUS PHYSICAL ACTIVITY FOR AT LEAST 30 MINUTES EACH DAY AND ARE TAUGHT TO PREPARE AND SHARE DAILY HEALTHFUL SNACKS SO THAT THEY GROW UP PHYSICALLY HEALTHY. EACH SITE INCORPORATES LEARNING CENTERS WHERE CHILDREN CAN EXPLORE NATURE AND SCIENCE, READING AND LITERATURE, THE ARTS INCLUDING MUSIC AND DRAMA AND TECHNOLOGY SKILLS. WEEKLY ACTIVITIES AND PROJECTS ARE ALSO LED EACH WEEK TO TEACH CHILDREN SOCIAL RESPONSIBILITY TO ONE ANOTHER AND OUR PLANET.
	OUR LICENSED PRE-SCHOOL IN SIMI VALLEY PROVIDES QUALITY EARLY CHILDHOOD EDUCATION TO PREPARE PRE-KINDERGARTEN CHILDREN FOR SCHOOL. TRAINED AND QUALIFIED TEACHERS DELIVER AN EVIDENCE-BASED CURRICULUM DESIGNED TO MEET THE DEVELOPMENTAL NEEDS OF YOUNG LEARNERS. 50 CHILDREN AGES 2 ½ TO 5 ATTENDED ONE OF OUR PRESCHOOLS THIS PAST YEAR WITH A DAILY AVERAGE ATTENDANCE OF 32 CHILDREN.
	TRADITIONAL YMCA DAY CAMPS PROVIDE DAYCARE WHEN SCHOOL IS NOT IN SESSION USING ACTIVITIES LIKE HIKING, SWIMMING, AND CRAFT ACTIVITIES TO HELP CHILDREN DEVELOP AN APPRECIATION OF NATURE, UNDERSTANDING OF POSITIVE VALUES AND GOOD GROUP SKILLS WHILE HAVING FUN. ALL OF OUR CHILDCARE CENTERS, PRESCHOOLS AND DAY CAMP PROGRAMS PROVIDE A SAFE AND NURTURING PLACE FOR CHILDREN OF WORKING PARENTS INCLUDING SINGLE WORKING PARENTS.
	\$206,000 DOLLARS IN SCHOLARSHIPS WERE AWARDED BY THE YMCA SERVICING OVER 350. THESE PROGRAMS WERE SUBSIDIZED TO ASSURE ACCESS BY EVERYONE IN OUR COMMUNITY.
	TO GUARANTEE ALL CHILDREN IN OUR COMMUNITY REALIZE THEIR FULL POTENTIAL, THE SOUTHEAST VENTURA COUNTY YMCA IS COMMITTED TO REDUCING SUMMER LEARNING LOSS THROUGH A FREE FIVE-WEEK SUMMER PROGRAM FOR LOW- AND MODERATE- INCOME STUDENTS WHO ARE NOT READING AT GRADE LEVEL. OUR PROGRAM PROVIDES ACADEMIC INSTRUCTION, HEALTHY MEALS, PHYSICAL EXERCISE, AND ENRICHMENT OPPORTUNITIES FOR THESE STUDENTS. WHEN EVERY STUDENT RETURNS FROM SUMMER BREAK READY TO START THE SCHOOL YEAR, ALL OF OUR CHILDREN ACHIEVE MORE.
	THIS PAST YEAR, THE YMCA SERVED 120 SCHOLARS AGES 6-11 FOR THIS IMPACTFUL 5-WEEK PROGRAM. ON AVERAGE, THE SCHOLARS ADVANCED 3 MONTHS IN READING AND 3+ MONTHS IN MATH. IN ADDITION, THEY GAINED CONFIDENCE AND LEADERSHIP SKILLS TO HELP THEM CONTINUE EXCELLING WHEN THEY RETURNED TO THE CLASSROOM IN AUGUST. THE AVERAGE COST PER SCHOLARS IS \$1500.
FORM 990, PART III, LINE 4B - PROGRAM SERVICE DESCRIPTION	IMPROVE THEIR OVERALL HEALTH. OVER 12,000 FACILITY MEMBERS TOOK ADVANTAGE OF STATE-OF-THE-ART EXERCISE EQUIPMENT AND YEAR-ROUND SWIMMING FACILITIES UNDER THE GUIDANCE OF YMCA TRAINED AQUATICS AND WELLNESS STAFF AND VOLUNTEERS. THE ORGANIZATION OFFERED SPECIALIZED CLASSES INCLUDING WATER EXERCISE AND HYDROTHERAPY FOR RELIEF OF ARTHRITIS AND OTHER DEGENERATIVE DISEASES. OTHER ORGANIZATIONS THAT SERVE PRIMARILY DISABLED POPULATIONS WERE ABLE TO USE YMCA AQUATIC FACILITIES WITHOUT CHARGE TO IMPROVE THE LIVES OF THEIR CLIENTS.
	THE ORGANIZATION PROVIDED \$137,000 IN FINANCIAL ASSISTANCE SERVING NEARLY 3,000 MEMBERS. THIS INCLUDES OFFERING SCHOLARSHIP ASSISTANCE TO 151 MEMBERS IMPACTED BY THE WOOLSEY FIRES THAT DISPLACED AND IMPACTED FAMILIES DURING IN THE COMMUNITY THE ORGANIZATION SERVES.
FORM 990, PART VI, LINE 11B - REVIEW OF FORM 990 BY GOVERNING BODY	PRIOR TO SUBMISSION OF THE FORM 990, THE CEO AND THE BOARD FINANCE COMMITTEE REVIEWS THE FORM 990 PREPARED BY OUR AUDITORS/OUTSIDE ACCOUNTANTS. THE FINANCE COMMITTEE BRINGS ANY ISSUES OR CONCERNS TO THE FULL BOARD AT THEIR NEXT REGULARLY SCHEDULED MEETING.

Return Reference - Identifier		E	xplanation						
FORM 990, PART VI, LINE 12C - CONFLICT OF INTEREST POLICY	ANNUALLY, IN JULY, COPIES MEMBERS AT A MEETING O AS TO THE DEFINITION OF I ANNUAL REQUIREMENT TO HUMAN RESOURCES COMW WHO HAVE INDICATED A POSTATEMENT ABOUT THEIR RECORDS SUCH IN ITS MINITHEIR NEXT REGULAR MEE BUSINESS TRANSACTION IN	F THE ASSOCIATION TERESTED PERSISTED	ON BOARD OF DIRE ONS, THE IMPORT UBMIT A STATEME LL FORMS, INVITE: T TO APPEAR BEF HEN MAKES A DET IS ANY POTENTIAL NCE OF COMMEN	ECTORS. A PRESEN ANCE OF OUR POL ENT OF INTEREST F S MEMBERS AND K ORE THE COMMIT ERMINATION OF IN CONFLICT TO THE CEMENT OF ANY PO	ITATION IS MADE ICY AND THE FORM. THE EY EMPLOYEES TEE AND MAKE A TEREST, E BOARD AT				
	BOARD MEMBERS JOINING RECRUITMENT AND AFTER COMPLETE THE STATEMEN RESOURCES COMMITTEE R SCHEDULED COMMITTEE M	BEING GIVEN AN E T OF INTEREST FO REVIEWS ANY AND	EXPLANATION OF C PRM BEFORE JOINI ALL STATEMENTS	OUR POLICY ARE RIING THE BOARD. AG OF INTEREST AT T	EQUIRED TO GAIN, THE HUMAN				
FORM 990, PART VI, LINE 15A - PROCESS TO ESTABLISH COMPENSATION OF TOP MANAGEMENT OFFICIAL	A COMMITTEE OF THE BOAR OF THE PRESIDENT AND CE CEO COMPENSATION COMMITTEE ME CONFLICT OF INTEREST AND COMPENSATION DATA ON CACCOMPLISHMENTS AGAIN DETERMINES WHETHER TO YEAR.	EO, THE ONLY PAID MITTEE IS COMPOS EMBERS. THEIR PR ID EXCESS BENEFI CEOS FROM THREE IST AGREED UPON	O OFFICER OR DIRI SED OF THE CURR OCESS IS GUIDED T POLICY. THE CO E INDEPENDENT SO GOALS FOR THE F	ECTOR IN THE ORG ENT AND IMMEDIAT BY THE BOARD AD MMITTEE SECURES OURCES, REVIEWS PAST FISCAL YEAR	GANIZATION. THE FE PAST OPPTED S THE CEO'S AND				
FORM 990, PART VI, LINE 15B - PROCESS TO ESTABLISH COMPENSATION OF OTHER OFFICERS OR KEY EMPLOYEES	FOR ALL OTHER POSITIONS, SALARIES AND COMPENSATION ARE GOVERNED BY THE ASSOCIATION WAGE & SALARY POLICY THAT APPLIES A MODIFIED HAY PLAN MODEL. THE BOARD'S HUMAN RESOURCES COMMITTEE ANNUALLY REVIEWS SALARY ADJUSTMENT RECOMMENDATIONS FROM THE INDEPENDENT YMCA OF THE USA SALARY TASK FORCE. BASED ON THOSE RECOMMENDATIONS AND THE FINANCIAL CONDITION OF THE ORGANIZATION NEAR THE END OF THE FISCAL YEAR, THAT COMMITTEE RECOMMENDS COST OF LIVING AND MERIT POOL ADJUSTMENT LEVELS TO THE FULL BOARD OF DIRECTORS FOR ACTION. IN THE CURRENT FISCAL YEAR, MINIMUM WAGE WAS RAISED TO \$12.00 AN HOUR, NO COST OF LIVING ADJUSTMENTS WERE AUTHORIZED AND NO MERIT RAISES WERE GIVEN.								
FORM 990, PART VI, LINE 19 - REQUIRED DOCUMENTS AVAILABLE TO THE PUBLIC	OUR TAX FORMS AND OTHE AVAILABLE UPON REQUEST GUIDESTAR.ORG								
FORM 990, PART IX, LINE 24E - OTHER EXPENSES	(a) Description	(b) Total Expenses	(c) Program Service Expenses	(d) Management and General Expenses	(e) Fundraising Expenses				
	LICENSES	15,069	14,695	374					
	POSTAGE	10,945	9,679	1,266					
	PRINTING & PUBLICATIONS	36,988	21,566		15,422				
	VICTIM SUBSIDIES	1,414,302	1,414,302						
	PAYROLL PROCESSING	48,018		48,018					
	TELEPHONE	90,255	68,405	17,656	4,194				
	MISCELLANEOUS	115,838	16,358	99,480	<b></b> .c-				
	CREDIT CARD FEES	141,547	55,681	58,763	27,103				

## Form **8879-EO**

## IRS e-file Signature Authorization for an Exempt Organization

For calendar year 2018, or fiscal year beginning  $\underline{7/01}$  , 2018, and ending  $\underline{6/30}$  , 20  $\underline{2019}$ 

OMB No. 1545-1878

Department of the Treasury Internal Revenue Service Name of exempt organization Do not send to the IRS. Keep for your records.
 Go to www.irs.gov/Form8879EO for the latest information.

'---terrer identification number

YOUNG MENS CHRISTIAN ASSOCIATION
OF SOUTHEAST VENTURA COUNTY

95-2305501

Name and title of officer

100						Section 1		The state of the s
		d Return Informat						44
check the box of leave line 1b, 2	on line 1a, 2a, 3a, 4 b, 3b, 4b, or 5b, w	hich you are using thi 4a, or 5a, below, and thichever is applicable complete more than o	he amount on tl , blank (do not e	nat line for the retur enter -0-). But, if yo	n being filed	with this form	n was t	plank, then
1 a Form 990	check here	X b Total revenue	if any (Form 9	90 Part VIII. colum	n (A), line 1	2)	1 b	12,580,655
1 a Form 990 check here    X b Total revenue, if any (Form 990, Part VIII, column (A), line 12)								12,000,000
3a Form 1120	0-POL check here	b Total	tax (Form 1120	POL line 22)			3b	
4a Form 990	-PF check here	b Total b Tax base b Balance Due	d on investmen	t income (Form 990	-PF. Part VI.	line 5)	4 b	
5 a Form 8868	8 check here	b Balance Due	(Form 8868 line	30)			5 b	
		_ b balance bue	(i omi occo, iiii	3 00,			-	
Part II Decl	laration and Si	gnature Authoriza	ation of Offic	er	40 30 74		S. 100 T	ar a stage of the
I further declare intermediate se the IRS (a) an a refund, and (c) funds withdraw organization's f contact the U.S authorize the fin answer inquirie organization's e	e that the amount ervice provider, tra acknowledgement the date of any re al (direct debit) en ederal taxes owed Treasury Financi nancial institutions s and resolve issual electronic return and account to the electronic return and account to the electronic return and account to the electronic return and electronic return electronic	schedules and stateme in Part I above is the a remainder, or electronic of receipt or reason for fund. If applicable, I a try to the financial instead on this return, and the lal Agent at 1-888-353 involved in the proce	amount shown or return originato or rejection of the uthorize the U.S titution account e financial instit-4537 no later the sesing of the election. I have selection to the control of the election of the election in the control of the election of the elec	on the copy of the or (ERO) to send the e transmission, (b) to Treasury and its condicated in the tax ution to debit the enan 2 business days stronic payment of toted a personal ide	rganization's corganization the reason for designated Fi preparation try to this act prior to the axes to recei ntification nu	electronic re i's return to ti ir any delay in nancial Agen software for p count. To re payment (sel ve confidenti mber (PIN) a	turn, I of the IRS n proce t to inition oaymen voke a p tlement al inforr	consent to allow my and to receive from ssing the return or ate an electronic t of the payment, I must b) date. I also mation necessary to
	heck one box onl						3 11	
X I authorize	HUTCHINSON	AND BLOODGOOD ERO firm nam	o, LLP	to en	ter my PIN	955 Enter five nur	nbers, bu	as my signature
a state age	nization's tax year 2 ncy(ies) regulating disclosure conser	018 electronically filed r charities as part of th t screen.	eturn. If I have in ne IRS Fed/State	dicated within this rel program, I also au	turn that a con thorize the a	do not enter a by of the return forementione	is bein	g filed with to enter my PIN on
indicated w	ithin this return the	n, I will enter my PIN as at a copy of the return on the return's disclosi	is being filed w	ith a state agency(is	year 2018 el es) regulating	ectronically file charities as	ed return part of	n. If I have the IRS Fed/State
	m	0/				2		
Officer's signature	- 01			Date ►	5-15	-2025		<u> </u>
Part III Cert	tification and A	Authentication						
FRO's FFIN/PIN	N. Enter your six-d	iait electronic filina ide	entification		Salety Control	The said		
number (EFIN)	followed by your f	ive-digit self-selected	PIN					5650412300
							D	o not enter all zeros
above, I confirm	that I am submittin	ntry is my PIN, which g this return in accordar or Business Returns.	is my signature nce with the requi	on the 2018 electro rements of <b>Pub. 4163</b>	nically filed r , Modernized	eturn for the e-File (MeF) Ir	organiz nformatio	ation indicated on for
ERO's signature				Date ►				
E to 3 signature			2-					
				Form — See Instruction		io		

BAA For Paperwork Reduction Act Notice, see instructions.

Form 8879-EO (2018)

# Southeast Ventura County YMCA

(A California Nonprofit Organization)

**Financial Report** 

Years Ended June 30, 2019 and 2018

## **TABLE OF CONTENTS**

NDEPENDENT AUDITOR'S REPORT	1
FINANCIAL STATEMENTS	
Statements of Financial Position	2
Statements of Activities and Changes in Net Assets	3-4
Statements of Functional Expenses	5-6
Statements of Cash Flows	7
Notes to Financial Statements	8-18

550 N. Brand Blvd., 14th Floor Glendale, CA 91203 t 818.637.5000 f 818.240.0949 www.hbllp.com

#### INDEPENDENT AUDITOR'S REPORT

To the Board of Directors Southeast Ventura County YMCA Westlake Village, California

#### **Report on the Financial Statements**

We have audited the accompanying financial statements of Southeast Ventura County YMCA (a California nonprofit organization) (the Association), which comprise the statement of financial position as of June 30, 2019, and the related statements of activities, functional expenses and cash flows for the year then ended, and the related notes to the financial statements.

#### Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

## **Auditor's Responsibility**

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the Association's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Association's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

## Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Southeast Ventura County YMCA as of June 30, and the changes in its net assets and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

#### **Other Matter**

The financial statements of the Association, as of and for the year ended June 30, 2018, were audited by other auditors whose report, dated October 2, 2018, expressed an unmodified opinion on those statements.

Hutchinson and Bloodgood LLP

May 11, 2020

Statements of Financial Position June 30, 2019 and 2018

	2019	2018
ASSETS		
Current assets		
Cash and cash equivalents	\$ 1,145,5	
Member accounts receivable	42,4	•
Pledges receivable, net - annual campaign	157,3	•
Pledges receivable - capital campaign	723,5	• •
Investments	199,2	•
Prepaid expenses and other current assets	181,0	242,356
Total current assets	2,449,1	4,815,710
Assets restricted for capital campaign:		
Cash and cash equivalents	1,020,7	<b>37</b> 4,979,007
Pledges receivable, net	1,314,1	1,828,788
Total assets restricted for capital campaign	2,334,8	6,807,795
Property and equipment, net	39,614,9	<b>76</b> 30,193,129
Other assets	7,1	7,109
Total assets	\$ 44,406,1	\$ 41,823,743
LIABILITIES		
Current liabilities		
Accounts payable	\$ 577,0	<b>46</b> \$ 918,372
Accrued expenses	400,2	<b>14</b> 296,133
Line of credit	1,700,0	
Interest payable	685,7	•
Deferred revenue	399,3	<u>11</u> 259,493
Total current liabilities	3,762,3	<b>75</b> 2,007,330
Note payable	2,616,2	2,616,284
Total liabilities	6,378,6	4,623,614
NET ASSETS		
Without donor restrictions	34,811,6	<b>36</b> 29,727,156
With donor restrictions	3,215,7	
Total net assets	38,027,4	37,200,129
Total liabilities and net assets	\$ 44,406,1	\$ 41,823,743

Statement of Activities and Changes in Net Assets Year Ended June 30, 2019

REVENUE AND SUPPORT	Without Donor Restrictions	With Donor Restrictions	Total
Public support			
Contributions and grants	\$ 601,302	\$ 4,400,087	\$ 5,001,389
Special events, net	445,351		445,351
Total public support	1,046,653	4,400,087	5,446,740
Revenues			
Program service fees	840,027		840,027
Memberships	2,250,172		2,250,172
Childcare fees	3,821,100		3,821,100
Interest and dividends	47,199		47,199
Other income	167,805		167,805
Total revenues	7,126,303		7,126,303
Net assets released from restrictions	8,657,273	(8,657,273)	
Total revenue and support	16,830,229	(4,257,186)	12,573,043
EXPENSES			
Program services			
Youth development	5,055,124		5,055,124
Healthy living	2,571,237		2,571,237
Social responsibility	1,532,422		1,532,422
Support services			
Management and general	1,647,548		1,647,548
Fundraising	774,975		774,975
Total program, support and			
fundraising expenses	11,581,305		11,581,305
Interest expense	164,394		164,394
Total expenses	11,745,699		11,745,699
Change in net assets	5,084,530	(4,257,186)	827,344
Net assets at beginning of year	29,727,156	7,472,973	37,200,129
Net assets at end of year	\$ 34,811,686	\$ 3,215,787	\$ 38,027,473

Statement of Activities and Changes in Net Assets Year Ended June 30, 2018

	Without Donor Restrictions	With Donor Restrictions	Total
REVENUE AND SUPPORT			
Public support			
Contributions and grants	\$ 457,345	\$ 5,668,415	\$ 6,125,760
Special events, net	300,830		300,830
Total public support	758,175	5,668,415	6,426,590
Revenues			
Program service fees	928,447		928,447
Memberships	2,290,745		2,290,745
Childcare fees	3,860,565		3,860,565
Interest and dividends	42,339		42,339
Other income	93,176		93,176
Total revenues	7,215,272		7,215,272
Net assets released from restrictions	1,527,941	(1,527,941)	
Total revenue and support	9,501,388	4,140,474	13,641,862
EXPENSES			
Program services			
Youth development	4,457,280		4,457,280
Healthy living	2,729,096		2,729,096
Social responsibility	48,032		48,032
Support services			
Management and general	921,229		921,229
Fundraising	506,657		506,657
Total program, support and			
fundraising expenses	8,662,294		8,662,294
Interest expense			
Total expenses	8,662,294		8,662,294
Loss on sale of property and equipment	(3,383,408)		(3,383,408)
Change in net assets	(2,544,314)	4,140,474	1,596,160
Net assets at beginning of year	32,271,470	3,332,499	35,603,969
Net assets at end of year	\$ 29,727,156	\$ 7,472,973	\$ 37,200,129

Statement of Functional Expenses Year Ended June 30, 2019

	Program Services							Sı	appo	orting Servic	es					
	De	Youth evelopment		Healthy Living	Re	Social sponsibility		Management and General		-		_		Fundraising		Total
Salaries	\$	2,382,100	\$	1,239,843	\$	69,860	\$	738,604	\$	331,337	\$	4,761,744				
Employee benefits		339,042		134,885		5,992		82,565		33,514		595,998				
Payroll taxes		178,470		83,103		5,450		42,966		29,878		339,867				
Admissions		244,299										244,299				
Advertising and promotions		21,699		20,975				30,718		354		73,746				
Business insurance		123,033		55,153				41,507				219,693				
Conferences		98,554		18,447		3,320		77,753		160,401		358,475				
Equipment rental and																
maintenance		40,450		152,881				20,960				214,291				
Fair share		59,070		45,738		6,165				12,330		123,303				
Food and supplies		354,331		177,307		898		7,983		8,168		548,687				
Licenses		12,921		1,774				374				15,069				
Miscellaneous		14,883		1,475				99,480				115,838				
Occupancy		390,625		281,948				114,044		7,952		794,569				
Postage		5,166		4,513				1,266				10,945				
Printing and publications		14,687		6,879						15,422		36,988				
Professional fees		166,345		160,226		25,604		371,672		171,426		895,273				
Telephone		42,899		24,676		831		17,656		4,193		90,255				
Travel and transportation		84,287		1,466								85,753				
Victim subsidies						1,414,302						1,414,302				
		4,572,861		2,411,289		1,532,422	-	1,647,548		774,975		10,939,094				
Depreciation	_	482,263		159,948				<u></u>		<u></u>		642,211				
	\$	5,055,124	\$	2,571,237	\$	1,532,422	\$	1,647,548	\$	774,975	\$	11,581,305				

Statement of Functional Expenses Year Ended June 30, 2018

	Program Services					Sı	uppo	rting Servic	es		
	De	Youth evelopment		Healthy Living	Res	Social sponsibility	nagement d General	Fu	ndraising		Total
Salaries	\$	2,092,823	\$	1,358,239	\$	32,750	\$ 443,620	\$	251,590	\$	4,179,022
Employee benefits		281,205		138,589		5,907	63,622		17,501		506,824
Payroll taxes		154,887		89,809		1,941	31,431		17,094		295,162
Admissions		240,817									240,817
Advertising and promotions		32,571		18,258			14,516		1,037		66,382
Business insurance		124,562		70,965			55,977				251,504
Conferences		67,617		27,622			56,426		19,744		171,409
Equipment rental and											
maintenance		34,869		98,244			15,197				148,310
Fair share		62,863		48,614		6,557			13,115		131,149
Food and supplies		310,565		59,280		147	9,017		16,618		395,627
Licenses		11,200		1,499			1,117				13,816
Occupancy		522,662		333,624			66,567		(589)		922,264
Postage		7,082		3,050			2,793		6,500		19,425
Printing and publications		24,941		6,808					18,461		50,210
Professional fees		165,495		197,646			145,251		142,693		651,085
Telephone		47,093		26,579		730	15,695		2,893		92,990
Travel and transportation		108,277		1,770		<u></u>					110,047
		4,289,529		2,480,596		48,032	921,229		506,657		8,246,043
Depreciation		167,751		248,500			 				416,251
	\$	4,457,280	\$	2,729,096	\$	48,032	\$ 921,229	\$	506,657	\$	8,662,294

Statements of Cash Flows Years Ended June 30, 2019 and 2018

	2019	2018
CASH FLOWS FROM OPERATING ACTIVITIES		
Change in net assets	\$ 827,344	\$ 1,596,160
Adjustments to reconcile changes in net assets to net		
cash provided by operating activities:		
Depreciation	642,211	416,251
Loss on sale of property and equipment	, 	3,383,408
Donated securities	(563,850)	
Net realized and unrealized gain on investments	(8,066)	(2,603)
(Increase) decrease in:	(0,000)	(=,555)
Accounts receivable	(101,808)	(2,370)
Pledges receivable	824,324	(2,219,312)
Prepaid expenses	61,328	(8,279)
Other assets	(24)	(8,273)
Increase (decrease) in:	(24)	131
Accounts payable and accrued expenses	(237,215)	811,007
Deferred revenue	139,818	
Other liabilities	133,010	(81,280)
Other habilities	<del>-</del>	(254)
Total adjustments	756,718	2,296,719
Net cash provided by operating activities	1,584,062	3,892,879
CASH FLOWS FROM INVESTING ACTIVITIES		
Purchase of investments	(13,974)	(21,777)
Proceeds from sale of investments	579,528	15,542
Proceeds from sale of property and equipment		2,621,353
Acquisition of property and equipment	(9,911,616)	(1,377,003)
Net cash provided (used) by investing activities	(9,346,062)	1,238,115
CASH FLOWS FROM FINANCING ACTIVITIES		
Borrowing on line of credit	1,700,000	
Cash provided by financing activities	1,700,000	
Net increase (decrease) in cash and cash equivalents	(6,062,000)	5,130,994
CASH AND CASH EQUIVALENTS, beginning of year	8,228,244	3,097,250
	0,220,244	3,037,230
CASH AND CASH EQUIVALENTS, end of year	\$ 2,166,244	\$ 8,228,244
SUPPLEMENTAL DISCLOSURE OF CASH FLOW INFORMATION		
Cash paid during the year for interest	\$ 12,007	\$
CLIDDLENGNITAL DISCLOSURE OF NONCASULACTIVITIES		
SUPPLEMENTAL DISCLOSURE OF NONCASH ACTIVITIES	6 453.443	ć 447.000
Interest payable capitalizes as part of acquistion of property	<u>\$ 152,442</u>	\$ 117,093

Notes to Financial Statements June 30, 2019 and 2018

### NOTE 1. NATURE OF ORGANIZATION

**Nature of Organization:** The mission of Southeast Ventura County YMCA (a California nonprofit organization) (the Association) is to strengthen the community by impacting lives and building relationships through youth development, healthy living and social responsibility. The Association's major classes of programs are community activities and camp programs which are supported primarily by program service and membership fees and other public support. The Association serves the community through its branches located in Simi Valley, Thousand Oaks, and Westlake Village and an administrative office in Westlake Village.

### **NOTE 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**

**Basis of Accounting:** The financial statements of the Association have been prepared on the accrual basis of accounting.

**New Accounting Pronouncement:** In August 2016, Financial Accounting Standards Board (FASB) issued Accounting Standards Update (ASU) 2016-14, Not-for-Profit Entities (Topic 958): Presentation of Financial Statements of Not-for-Profit Entities. This ASU improves and simplifies the current net asset classification requirements and information presented in financial statements and notes that are useful in assessing a not-for-profit's liquidity, financial performance and cash flows. During the fiscal year ended June 30, 2019, the Foundation adopted and implemented this guidance for 2019. The implementation of this ASU has resulted in additional disclosures related to the Foundation's functional expenses and liquidity.

**Financial Statement Presentation:** The Association distinguishes between contributions and other revenue sources that increase net assets without donor restrictions and net assets with donor restrictions. It also requires recognition of contributed services meeting certain criteria at fair value. The Association is required to report information regarding its financial position and activities according to two classes of net assets: net assets without donor restrictions and net assets with donor restrictions, based on the existence or absence of donor-imposed restrictions.

**Functional Allocation of Expenses:** The Foundation allocates its expenses between its program and support services. Expenses that can be identified with specific program and support services are allocated directly according to their natural expenditure classification. Other expenses, which are common to both program and support services, are allocated based on the percentage of expenses utilized by each. Compensation expense and related benefits are allocated on the basis of estimates of time and effort.

**Use of Estimates:** The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities, at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

**Cash and Cash Equivalents:** For the purpose of the statements of financial position and cash flows, the Association considers all highly-liquid cash investments purchased with an original maturity of three months or less to be cash equivalents. Cash accounts are insured up to \$250,000 per financial institution. Management believes that credit risk to these accounts is minimal.

Notes to Financial Statements June 30, 2019 and 2018

## NOTE 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

**Pledges Receivable:** Unconditional pledges receivable that are expected to be collected within one year are recorded at net realizable value. Unconditional pledges receivable that are expected to be collected in future years are recorded at the present value of their estimated future cash flows. The discounts on those amounts are computed using risk-free interest rates applicable to the years in which the pledges are received. Amortization of the discounts is included in contribution revenue. Conditional pledges receivable are not included as support until the conditions are substantially met.

**Investments:** Investments received by gift or bequest are recorded at fair market value at the time of transfer to the Association. Purchased investments are initially recorded at cost. The Association reports investments in the statements of financial position at fair value, and reports realized and unrealized gains and losses in the statement of activities.

**Property and Equipment:** Land, buildings and equipment are stated at cost, except for those assets received as donations, which are stated at their estimated fair value at the time of donation. Depreciation is provided over the estimated useful lives of the assets on the straight-line basis as of 3 to 30 years.

Expenditures for maintenance and repairs are charged to expense; betterments and major renewals are capitalized.

**Net Assets:** All financial transactions have been recorded and reported as either net assets without donor restrictions or net assets with donor restrictions:

Net assets without donor restrictions consist of investments and otherwise unrestricted amounts that are available for use in carrying out the mission of the Association and include those expendable resources which have been designated for special use by the Association. The Association reports restricted contributions, whose restrictions are met in the same reporting period, as unrestricted support.

Net assets with donor restrictions represent those amounts which are donor restricted for specific purposes. When a donor restriction expires, that is, when a stipulated time restriction ends or a purpose restriction is accomplished, net assets with donor restrictions are reclassified to net assets without donor restrictions and reported in the statement of activities as net assets released from restrictions. These amounts are restricted for the purposes of camp and youth programs. Net assets with donor restrictions also result from contributions from donors who place restrictions on the use of the funds which mandate that the original principal be invested in perpetuity. The original principal is reported as a net asset with donor restriction, the income from which may be either restricted or unrestricted, depending on the donor's specifications. At June 30, 2019 and 2018, net assets with donor restrictions amounted to \$3,215,787 (\$29,056 perpetual in nature and \$3,186,731 purpose-restricted for capital projects) and \$7,472,973 (\$29,056 perpetual in nature and \$7,443,917 purpose-restricted for capital projects), respectively.

Notes to Financial Statements June 30, 2019 and 2018

## NOTE 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

**Revenue:** In the absence of donor restrictions, contributions and bequests are considered to be available for unrestricted use. Contributions are recognized in the period when the contribution is received or the unconditional promise to give is made. Donated assets are recorded as contributions at their fair market value. Membership dues and initiation fees are recognized as revenue when earned. Program service fees are recognized in the period the program takes place. Payments received in advance of programs or classes are deferred at year-end.

**Donated Services:** The Association recognizes donated professional services as contributions if those services require specialized skills that would need to be purchased if they were not donated. The value of such services did not aggregate to a material amount.

A substantial number of volunteers have donated significant amounts of their time to the Association's programs and its fundraising and membership campaigns. No donated services are recognized in the financial statements since the services do not require specialized skills.

**Income Taxes:** The Association is a nonprofit organization, qualifying under section 501(c)(3) of the Internal Revenue Code and corresponding California provisions. As such, except for taxes pertaining to unrelated business income, the Association is exempt from federal and state income taxes. No provision has been made for income taxes, as the Association had no unrelated business income. The Association is not considered a private foundation.

The Association's tax years that are open for examination by Federal and state agencies are three and four years, respectively.

Accounting principles generally accepted in the United States of America require the Association management to evaluate tax positions taken by the Association and recognize a tax liability if the Association has taken uncertain tax positions that more-likely-than-not would not be sustained upon examination by applicable taxing authorities. Management has analyzed tax positions taken by the Association and concluded that, as of June 30, 2019, there are no uncertain tax positions taken, or expected to be taken, that would require recognition of a liability or that would require disclosure in the financial statements.

**Reclassifications:** Certain reclassifications have been made to the June 30, 2018 statements to conform to the June 30, 2019 presentation. The reclassifications have no effect on the change in net assets or net assets as previously reported.

Notes to Financial Statements June 30, 2019 and 2018

### **NOTE 3. INVESTMENTS**

The cost, market value and unrealized gain (loss) on investments as of June 30 are as follows:

			2019		
	·		Fair	Un	realized
		Cost	Value	Ga	in (Loss)
Mutual funds	\$	142,281	\$ 138,075	\$	(4,206)
Exchange traded funds		37,684	41,856		4,172
Corporate bonds		7,305	8,068		763
Common stock		8,679	 11,269		2,590
	\$	195,949	\$ 199,268	\$	3,319
			2018		
			Fair	Un	realized
		Cost	Value		Gain
Mutual funds	\$	127,567	\$ 129,541	\$	1,974
Exchange traded funds		43,670	46,785		3,115
Corporate bonds		7,770	8,051		281
Common stock		7,685	 8,529		844
	\$	186,692	\$ 192,906	\$	6,214

The Association's net realized and unrealized gains on investments were \$8,066 and \$2,603 for the years ended June 30, 2019 and 2018, respectively.

## NOTE 4. PLEDGES RECEIVABLE

The Association conducts annual campaigns as well as capital campaigns for major construction or improvement projects. Promises to give at June 30, 2019 consist of capital campaigns to provide funds for the construction of a Triunfo Branch YMCA facility. From 2011 through 2017, a Joint Capital Campaign with the Westlake Village Community Foundation was conducted to provide funds for the construction of the Triunfo Branch facility and the development of a City Park. During the year ended June 30, 2019, a Triunfo YMCA Capital Campaign provided funds for the third and final phase of the construction of the Triunfo Branch YMCA facility, which was named the Yarrow Family YMCA Facility.

Notes to Financial Statements June 30, 2019 and 2018

## NOTE 4. PLEDGES RECEIVABLE (Continued)

Pledges received on both campaigns through June 30, 2019 totaled approximately \$31,498,000. See Note 5 for additional discussion regarding the construction.

The Joint Capital Campaign Agreement provides that the Association will construct, own and operate the Triunfo YMCA facility and the Westlake Village Community Foundation will construct, own and operate the City Park in conjunction with the City of Westlake Village. In accordance with the Joint Capital Campaign Agreement, pledges were restricted to either project and in the absence of a specific restriction were equally divided between the two projects. The Association was designated as the fiscal agent for the campaign and is responsible for the recordkeeping, reporting, billing, collection, and disbursing of pledges of the campaign. All cash received from pledge payments for the Joint Capital Campaign is required to be maintained in a separate bank account which amounted to \$566,885 and \$9,396 at June 30, 2019 and 2018, respectively.

Pledges receivable at June 30 are as follows:

	2019	2018
Annual campaign (AC) Triunfo Capital Campaign (TCC)	\$ 170,020 2,213,337	\$ 86,475 3,201,265
Less unamortized discount on TCC pledges Less allowance for uncollectible pledges	2,383,357 (175,678) (12,629)	3,287,740 (169,171) (176,155)
	<u>\$ 2,195,050</u>	<u>\$ 2,942,414</u>
Gross pledges receivable are expected to be received as follo	ows:	
Within one year Within two to five years	\$ 893,535 1,489,822	\$ 1,289,781 1,997,959
	<u>\$ 2,383,357</u>	\$ 3,287,740
Amounts included in the statements of financial position are	as follows:	
Within one year (AC) Within one year (TCC) Within two to five years (TCC)	\$ 157,391 723,515 1,314,144	\$ 80,431 1,033,195 1,828,788
	<u>\$ 2,195,050</u>	<u>\$ 2,942,414</u>

One donor accounted for an aggregate of 80% of the gross receivable balance at June 30, 2019.

Notes to Financial Statements June 30, 2019 and 2018

## NOTE 5. PROPERTY AND EQUIPMENT

Property and equipment include the following at June 30:

		2019		2018
Land Building and improvements Furniture, fixtures and equipment Modular classrooms Construction in progress	\$	3,207,165 40,619,054 1,826,352 832,305 8,920	\$	3,207,165 6,522,609 1,125,139 832,305 24,742,519
Less accumulated depreciation	<u> </u>	46,493,796 (6,878,820) 39,614,976	<u> </u>	36,429,737 (6,236,608) 30,193,129

Construction in progress at June 30, 2019 and 2018 primarily consists of the Triunfo Branch YMCA Facility. The construction project was completed, and the Yarrow Family YMCA Facility was opened in April 2019.

Depreciation and amortization expense for the years ended June 30, 2019 and 2018 was \$642,211 and \$416,251, respectively.

## NOTE 6. NOTE PAYABLE

On July 2, 2013, the Association executed a promissory note to the City of Westlake Village in the amount of \$1,896,692 in connection with the Lease/Purchase Agreement discussed further in note 13. Interest accrues at a simple interest rate of 4.84% per annum. Monthly payments will commence upon the earlier of one year after the completion of the YMCA facility or seven years from the final completion of the infrastructure work. The payments will be based on a 30-year amortization, all due and payable in 5 years. The note is secured by a deed of trust, assignment of rents, security agreement and fixture filing on the property.

The Promissory Note was amended on August 15, 2015 upon completion of additional phases of the infrastructure. The additional amount added to the promissory note was \$719,592, bringing the total of the Promissory Note to \$2,616,284.

Notes to Financial Statements June 30, 2019 and 2018

### NOTE 7. LINE OF CREDIT

The YMCA has a \$3,000,000 draw down line of credit loan. The loan is secured by the YMCA's assets including real property located in Simi Valley, California and an assignment of deposit account which includes all pledges and donations obtained for the purpose of or in connection with the construction of the new Triunfo Branch YMCA facility. Drawdowns on the loan may occur through August 27, 2021 and through that date, monthly interest payments are required at a rate of the Wall Street Journal Prime plus 1% (6.5% at June 30, 2019). Beginning September 27, 2021, 120 monthly principal and interest payments (based on a 25-year maturity) will be requited at a fixed interest rate of 6%, all due and payable August 27, 2031. The amount outstanding on this line of credit was \$1,700,000 and \$0 at June 30, 2019 and 2018, respectively.

### **NOTE 8. SPECIAL EVENTS**

As part of its fundraising efforts, the Association holds periodic special events. Revenue for special events is recognized in the period in which the event is held. Direct expenses associated with special events are netted against such revenue as follows:

		2019		2018		
Special events revenue Special events expenses	\$	1,030,890 (585,539)	\$	575,330 (274,500)		
	\$	445,351	\$	300,830		

### NOTE 9. RETIREMENT PLAN

The Association and its employees participate in the YMCA Retirement Fund, a defined contribution plan, which is administered by the National YMCA Retirement Fund (a separate corporation). All employees who have attained the age of 21 and completed 1,000 hours of service each year for two years are eligible for participation in the plan.

The Association's defined contributions rate was 8% of eligible employee's salaries for both years ended June 30, 2019 and 2018. The Association made defined contribution payments to the plan totaling \$188,269 and \$177,810 for the years ended June 30, 2019 and 2018, respectively.

## **NOTE 10. RELATED PARTIES**

The Association pays dues to YMCA of the USA. Dues paid to YMCA of the USA for the years ended June 30, 2019 and 2018 were \$137,834 and \$131,149, respectively.

Notes to Financial Statements June 30, 2019 and 2018

### **NOTE 11. LEASE COMMITMENTS**

The Association leases two of its facilities, the corporate office and Triunfo branch. The lease agreement for the corporate office expires in May 2020 and requires monthly rental payments of \$4,567 which are subject to annual increases of 3%. The Triunfo branch facility is leased under a month-to-month agreement and requires monthly rental payments of \$2,200. Rent expense for both facilities totaled \$89,212 and \$77,061 for the years ended June 30, 2019 and 2018, respectively. Minimum lease payments due under these lease agreements follow:

Year ending June 30, 2020 \$ 46,065

The Association also occupies locations which are used in the childcare and other youth programs. The sites are occupied on short-term leases, renegotiated for each school year. Total rent expense for these leases for the years ended June 30, 2019 and 2018 was \$115,596 and \$113,213, respectively, and is included in occupancy expense in the accompanying statement of functional expenses.

The Association is a party to various lease agreements accounted for as operating leases, expiring through 2022, for certain office equipment and fitness equipment. Minimum lease payments due under these lease agreements follow:

Years Ending June 30:	Amount
2020	\$ 90,399
2021	80,953
2022	 24,047
Total	\$ 195,399

Rental expense on the equipment leases amounted to \$213,171 and \$138,819 for the years ended June 30, 2019 and 2018, respectively.

## **NOTE 12. FAIR VALUE MEASUREMENT**

The Association has fully adopted Accounting Standards Codification (ASC) No. 820, "Fair Value Measurements," which defines fair value, establishes a framework for measuring fair value and expands disclosures about fair value measurements. ASC No. 820 applies only to fair value measurements already required or permitted by other accounting standards and does not impose requirements for additional fair value measures.

Notes to Financial Statements June 30, 2019 and 2018

## **NOTE 12. FAIR VALUE MEASUREMENT (Continued)**

ASC No. 820 establishes a fair value hierarchy for valuation inputs that gives the highest priority to quoted prices in active markets for identical assets or liabilities and the lowest priority to unobservable inputs. The fair value hierarchy is as follows:

Level 1 Inputs - Unadjusted quoted prices in active markets for identical assets or liabilities that the reporting entity has the ability to access at the measurement date.

Level 2 Inputs - Inputs other than quoted prices included in Level 1 that are observable for the asset or liability either directly or indirectly. These might include quoted prices for similar assets or liabilities in active markets, quoted prices for identical or similar assets or liabilities in markets that are not active, inputs other than quoted prices that are observable for the asset or liability (such as interest rates, volatilities, prepayment speeds, credit risks, etc.) or inputs that are derived principally from or corroborated by market data by correlation or other means.

Level 3 Inputs - Unobservable inputs for determining the fair values of assets or liabilities that reflect an entity's own assumptions about the assumptions that market participants would use in pricing the assets or liabilities.

The following table summarizes financial assets measured at fair value on a recurring basis as of June 30, 2019 and 2018. The Association had no financial liabilities measured at fair value at June 30, 2019 or 2018.

	Fair Value Measurements Using							
	Quo	Quoted Prices Significant						
	In Active Markets for Identical Assets		Other Observable Inputs		Significant Unobservable Inputs			
							Total	
	(	Level 1)	(L	evel 2)	(Le	evel 3)	Fa	air Value
At June 30, 2019								
Mutual funds	\$	138,076	\$		\$		\$	138,076
Exchange traded funds		41,856						41,856
Corporate bonds		8,068						8,068
Common stock		11,268						11,268
	\$	199,268	\$		\$		\$	199,268

	Fair Value Measurements Using							
	Quo	oted Prices	Sigr	nificant				
	In Active Markets for Identical Assets		Other Observable Inputs		Significant Unobservable Inputs			
							Total	
	(	Level 1)	(Le	evel 2)	(Le	vel 3)	Fá	air Value
At June 30, 2018								
Mutual funds	\$	129,541	\$		\$		\$	129,541
Exchange traded funds		46,785						46,785
Corporate bonds		8,051						8,051
Common stock		8,529			-			8,529
	<u>\$</u>	192,906	\$	<del></del>	\$		\$	192,906

Notes to Financial Statements June 30, 2019 and 2018

## **NOTE 13. COMMITMENTS AND CONTINGENCIES**

The Association is subject to claims and litigations in the normal course of business. Management believes that the resolution of these matters will not have a material effect on the Association's financial position or results of operations.

In November 2007, the Association entered into a Ground Lease Agreement with Option to Purchase (Lease/Purchase Agreement) with the City of Westlake Village. The property that is the subject of that agreement is also part of a separate land exchange agreement between the Association and the Westlake Canyon Oaks Homeowner's Association. That agreement provided for an exchange of 7.49 acres owned by the Association for 31.75 acres owned by the Westlake Canyon Oaks Homeowner's Association. The land exchange was completed in May 2009, satisfying the Lease/Purchase Agreement contingency.

The terms of the Lease/Purchase Agreement provide for rent at \$1 per year for ninety-nine years. In accordance with the terms of the Lease/Purchase Agreement, the Tenant will make certain site improvements for public recreational and open space purposes and obtain an option to purchase from the Association approximately 24.49 acres of the property. The Association will construct a full service healthy living facility on approximately 5-acres of the remaining property. The agreement was amended in September 2011 to change the lease term from 99 years to 79 years with an option for a 20 year extension. In addition, the formula to calculate the Association portion of the infrastructure improvements was changed from using third party estimates to work performed to actual contracted costs.

Infrastructure improvements have been performed by the Tenant and will improve and benefit the Association's portion of the property. The terms of the Lease/Purchase Agreement provided for the execution of a promissory note in favor of the City of Westlake Village for a pro rata portion of the infrastructure improvements. The note was executed in July 2013, see note 6 for additional information. The note will be amended and increased upon completion of additional phases of the infrastructure; however, the amount cannot be reasonably estimated at this time.

The Association has a capital development campaign to provide funding for the construction of the facility (see note 4).

## NOTE 14. LIQUIDITY AND AVAILABILITY OF FINANCIAL ASSETS

The following reflects the Association's financial assets as of the June 30, 2019 and 2018, available for general use with no contractual or donor-imposed restrictions within one year. In addition, the Association has a line of credit with drawdowns available through August 2021 (Note 7).

	2019	2018
Cash and cash equivalent	\$ 1,145,507	\$ 3,249,237
Member accounts receivable	42,433	17,585
Pledges receivable (AC) - current portion	157,391	80,431
Investments	 199,268	 192,906
Financial assets available to meet cash needs		
for general expenditures within one year	\$ <u>1,544,599</u>	\$ 3,540,159

Notes to Financial Statements June 30, 2019 and 2018

## **NOTE 15. SUBSEQUENT EVENTS**

Subsequent to the year ended June 30, 2019 the outbreak of the coronavirus (COVID-19) resulted in the temporary closure of the Association facilities. This action was taken as a precautionary measure to comply with guidance issued by governmental agencies. At this time, neither the duration nor scope of the closure can be predicted, and the potential negative financial impact to the Association's financial results or financial condition cannot be reasonably estimated.

Management has evaluated subsequent events for recognition and disclosure through May 11, 2020, which is the date on which the financial statements were available to be issued.