

Form **990**

Department of the Treasury  
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

Information about Form 990 and its instructions is at [www.IRS.gov/form990](http://www.irs.gov/form990)

OMB No 1545-0047

**2013**

Open to Public Inspection

**A For the 2013 calendar year, or tax year beginning 01-01-2013 , 2013, and ending 12-31-2013**

**B** Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Terminated

☐ Amended return

☐ Application pending

**C** Name of organization  
YOUNG MEN'S CHRISTIAN ASSOCIATION OF METROPOLITAN LOS ANGELES

Doing Business As

Number and street (or P O box if mail is not delivered to street address)Room/suite

625 S New Hampshire Ave

City or town, state or province, country, and ZIP or foreign postal code  
Los Angeles, CA 900051342

**D Employer identification number**  
  
95-1644052

**E Telephone number**  
  
(213) 351-2242

**G Gross receipts \$** 164,245,505

**F** Name and address of principal officer  
ALAN C HOSTRUP  
625 S New Hampshire Ave  
Los Angeles, CA 900051342

**H(a)** Is this a group return for subordinates?

☐ Yes☒ No

**H(b)** Are all subordinates included?

☐ Yes☐ No

If "No," attach a list (see instructions)

**H(c)** Group exemption number ▶

**I** Tax-exempt status

☒ 501(c)(3)☐ 501(c) ( ) ◀(insert no )☐ 4947(a)(1) or☐ 527

**J Website:** ▶ WWW.YMCALA.ORG

**K** Form of organization

☒ Corporation☐ Trust☐ Association☐ Other ▶

**L** Year of formation 1882

**M** State of legal domicile CA

Part I	Summary																									
Activities & Governance	<div><b>1</b> Briefly describe the organization's mission or most significant activities THE YMCA OF METROPOLITAN LOS ANGELES (YMCA) IS A NON-PROFIT ORGANIZATION DEDICATED TO PUTTING JUDEO-CHRISTIAN PRINCIPLES INTO PRACTICE THROUGH PROGRAMS THAT BUILD A HEALTHY SPIRIT, MIND AND BODY FOR ALL</div>																									
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets																									
Revenue	<table><tr><td><b>3</b> Number of voting members of the governing body (Part VI, line 1a)</td><td><b>3</b></td><td>46</td></tr><tr><td><b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)</td><td><b>4</b></td><td>45</td></tr><tr><td><b>5</b> Total number of individuals employed in calendar year 2013 (Part V, line 2a)</td><td><b>5</b></td><td>3,327</td></tr><tr><td><b>6</b> Total number of volunteers (estimate if necessary)</td><td><b>6</b></td><td>5,100</td></tr><tr><td><b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12</td><td><b>7a</b></td><td>0</td></tr><tr><td><b>b</b> Net unrelated business taxable income from Form 990-T, line 34</td><td><b>7b</b></td><td>0</td></tr></table>	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	46	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	45	<b>5</b> Total number of individuals employed in calendar year 2013 (Part V, line 2a)	<b>5</b>	3,327	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	5,100	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	0	<b>b</b> Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	0							
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Part II	<b>Signature Block</b>																									

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

**Sign Here**

Signature of officer

DAN COOPER EVP / CFO

Date

2014-10-17

Type or print name and title

Prnt/Type preparer's name

Preparer's signature

Date

Check ☐ if self-employed

PTIN

Firm's name ▶

Firm's EIN ▶

Firm's address ▶

Phone no

May the IRS discuss this return with the preparer shown above? (see instructions)

☐ Yes☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form **990** (2013)

Part IIISTatement of Program Service Accomplishments

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

1

Briefly describe the organization’s mission

THE YMCA OF METROPOLITAN LOS ANGELES IS A VOLUNTEER-LED NON-PROFIT ORGANIZATION THAT INCLUDES MEN, WOMEN, AND CHILDREN OF ALL AGES, ABILITIES, INCOMES, RACES AND RELIGIONS IT IS DEDICATED TO STRENGTHENING COMMUNITIES BY PUTTING JUDEO-CHRISTIAN PRINCIPLES INTO PRACTICE THROUGH PROGRAMS THAT PROMOTE YOUTH DEVELOPMENT, HEALTHY LIVING, AND SOCIAL RESPONSIBILITY

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

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

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?














If "Yes," describe these changes on Schedule O

4

Describe the organization’s program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a	(Code ) (Expenses \$ 37,207,187 including grants of \$ ) (Revenue \$ 39,251,818 )
	PROGRAMS FOR HEALTHY LIVING THE YMCA IS ONE OF THE ONLY HEALTH AND WELLNESS ORGANIZATIONS WHERE FAMILIES CAN PURSUE HEALTHY HABITS TOGETHER YMCA MEMBERSHIP AND PROGRAM PARTICIPATION IS AFFORDABLE AND OPEN TO ALL WITH FINANCIAL ASSISTANCE AVAILABLE FOR THOSE WHO CANNOT AFFORD THE FULL FEE THE YMCA OFFERS PROGRAMS THAT ENCOURAGE GOOD HEALTH AND FOSTER CONNECTIONS THROUGH FITNESS, SPORTS AND SHARED INTERESTS, INCLUDING * FAMILY TIME - BRINGING FAMILIES TOGETHER TO HAVE FUN AND GROW TOGETHER * HEALTH, WELL-BEING AND FITNESS - RESOURCES AND GUIDANCE TO MAINTAIN OR IMPROVE PHYSICAL ACTIVITY, HEALTH AND WELLNESS * SPORTS & RECREATION - HEALTHY LIFESTYLE ACTIVITIES THAT BRING PEOPLE TOGETHER WITH SHARED ATHLETIC AND RECREATIONAL INTERESTS * GROUP INTEREST - SOCIAL NETWORKS AND ACTIVITIES THAT BRING TOGETHER PEOPLE THAT SHARE COMMON PASSIONS AND PERSONAL INTERESTS THIS YEAR, THE YMCA * OFFERED COMMUNITY AND WELLNESS PROGRAMS TO 264,000 MEMBERS THROUGH 25 BRANCHES, HALF OF THEM WITHIN LOW-INCOME COMMUNITIES * PROVIDED OVER \$3 1 MILLION IN FINANCIAL ASSISTANCE TO ENABLE PEOPLE TO BECOME YMCA MEMBERS * THROUGH THE P L A Y PROGRAM, BROUGHT FITNESS AND WELL-BEING OPPORTUNITIES TO 20,000 STUDENTS AT 43 SCHOOL CAMPUSES * PROVIDED SWIMMING INSTRUCTION TO OVER 23,000 INDIVIDUALS IN THE YMCA'S RENOWNED AQUATICS PROGRAM, PROVIDING SWIMMING AND WATER SAFETY SKILLS WHILE PROMOTING TEAMWORK, SELF-CONFIDENCE, HEALTH AND LEADERSHIP
4b	(Code ) (Expenses \$ 20,987,590 including grants of \$ ) (Revenue \$ 13,791,276 )
	PROGRAMS FOR YOUTH DEVELOPMENT THE YMCA OFFERS LOW-COST, QUALITY PROGRAMS THAT SUPPORT AND STRENGTHEN FAMILIES AND DEVELOP THE CHARACTER OF THOSE INVOLVED, INCLUDING PRE-SCHOOL, AFTER-SCHOOL ENRICHMENT PROGRAMS, CHILD CARE, DAY CAMPS, PARENT-CHILD PROGRAMS AND YOUTH LEADERSHIP PROGRAMS THAT PROVIDE WHAT ARE OFTEN LIFE-CHANGING EXPERIENCES THE YMCA OFFERS LOW-COST, QUALITY PROGRAMS THAT NURTURE THE POTENTIAL OF EVERY CHILD AND TEEN, INCLUDING * CHILD CARE - A SAFE, NURTURING ENVIRONMENT FOR CHILDREN TO LEARN, GROW AND DEVELOP SOCIAL SKILLS * AFTER SCHOOL ENRICHMENT - ACTIVITIES THAT KEEP KIDS IN SCHOOL AND ENGAGED, WHILE BUILDING CHARACTER AND CREATING FRIENDSHIPS * SWIM, SPORTS & PLAY - POSITIVE, FUN ACTIVITIES THAT BUILD ATHLETIC, SOCIAL AND INTERPERSONAL SKILLS THIS PAST YEAR, THE YMCA * PROVIDED CHILD CARE AND BEFORE/AFTER SCHOOL ENRICHMENT AT 83 LOCATIONS THROUGHOUT THE CITY * PROVIDED CHILD CARE FOR OVER 37,000 CHILDREN ACROSS LOS ANGELES AND OVER \$680,000 FINANCIAL ASSISTANCE THROUGH REDUCED FEES FOR CHILDREN IN CHILD CARE AND DAY CAMP PROGRAMS
4c	(Code ) (Expenses \$ 11,788,707 including grants of \$ ) (Revenue \$ 7,137,005 )
	PROGRAMS FOR SOCIAL RESPONSIBILITY THE YMCA BELIEVES THAT BUILDING CITIZEN LEADERS OF ALL AGES TRANSFORMS CITIES INTO WELCOMING COMMUNITIES AND OFFERS LEADERSHIP DEVELOPMENT OPPORTUNITIES FOR ALL AGES THE YMCA IS ITSELF COMMITTED TO ACTING IN A LEADERSHIP CAPACITY AS A COMMUNITY CONVENER, INTEGRATING ITS EFFORTS WITH SCORES OF COMMUNITY PARTNERSHIPS THROUGHOUT LOS ANGELES THE YMCA BELIEVES IN GIVING BACK AND PROVIDING SUPPORT TO OUR NEIGHBORS BY DEVELOPING VOLUNTEER LEADERS THROUGH OUR FUNDRAISING ACTIVITIES, NURTURING COMMUNITY PARTNERSHIPS, AND COLLABORATING WITH POLICYMAKERS, COMMUNITY LEADERS AND PRIVATE AND PUBLIC ORGANIZATIONS TO DEVELOP YOUTH, PREVENT CHRONIC DISEASE AND BUILD HEALTHIER COMMUNITIES THROUGHOUT LOS ANGELES THE YMCA NURTURES PARTNERSHIPS BOTH AT OUR BRANCHES AND IN THE COMMUNITY WITH THE PUBLIC AND PRIVATE SECTOR TO BETTER ADDRESS COMMUNITY NEEDS COMMUNITY PARTNERS INCLUDE LOCAL SCHOOL DISTRICTS, CHARITABLE FOUNDATIONS, CORPORATE COLLABORATIONS AND OTHER NON-PROFITS THE YMCA ALSO OFFERS EDUCATION AND LEADERSHIP PROGRAMS THAT DEVELOP KNOWLEDGE AND CHARACTER, WHILE GIVING GUIDANCE AND ENCOURAGEMENT TO HELP YOUTH REALIZE THEIR POTENTIAL AND GIVE BACK TO THEIR COMMUNITY THIS YEAR, THE YMCA * INVOLVED 3,000 VOLUNTEERS IN GOVERNANCE AND PROGRAM DEVELOPMENT * GAVE OVER 13,000 YOUTH THE EXPERIENCE OF CAMP * INVOLVED OVER 1,000 LA-AREA TEENS IN THE YMCA'S YOUTH AND GOVERNMENT PROGRAM, A YEAR-ROUND CURRICULUM ON DEMOCRACY AND THE PROCESSES OF STATE GOVERNMENT, CULMINATING IN A 4-DAY MODEL LEGISLATURE SESSION IN SACRAMENTO
4d	Other program services (Describe in Schedule O )
	(Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses ▶ 69,983,484

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 	1 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 	2 Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II 	4 Yes	
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	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 	9 Yes	
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 Yes	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. 	11a Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	No
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	No
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	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 	11e Yes	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 	11f Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	No
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 Yes	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
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 Yes	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 	17 Yes	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 	18 Yes	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 	19 Yes	
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> . . . . .	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> . . . . .	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> . . . . .	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> . . . . .	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . .	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . .	24d		No
25a	<b>Section 501(c)(3) and 501(c)(4) 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		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> . . . . .	25b		No
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 so, complete Schedule L, Part II</i> . . . . .	26		No
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? <i>If "Yes," complete Schedule L, Part III</i> . . . . .	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28b		No
c	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 "Yes," complete Schedule L, Part IV</i> . . . . .	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . . . .	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> . . . . .	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> . . . . .	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> . . . . .	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> . . . . .	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> . . . . .	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	35b	Yes	
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		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
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	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No			
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	1a	334			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b	15			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.	2a	3,327			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	2b	Yes			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a			No	
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	Yes			
b	If "Yes," enter the name of the foreign country: CJ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a			No	
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			No	
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c				
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a			No	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b				
7	Organizations that may receive deductible contributions under section 170(c).					
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			No	
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			No	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			No	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g				
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h				
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8				
9	Sponsoring organizations maintaining donor advised funds.					
a	Did the organization make any taxable distributions under section 4966?	9a				
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b				
10	Section 501(c)(7) organizations. Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12.	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b				
11	Section 501(c)(12) organizations. Enter					
a	Gross income from members or shareholders.	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a				
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
a	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O.	13a				
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13b				
c	Enter the amount of reserves on hand.	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			No	
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b				

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

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

Section A. Governing Body and Management

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

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

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

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	CA
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> 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, physical address, and telephone number of the person who possesses the books and records of the organization Dan Cooper   625 S New Hampshire Ave Los Angeles, CA   900051342   (213) 351-2242	

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

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

[illegible]

## Part VII

<b>1b</b>	<b>Sub-Total . . . . .</b>	<b>▼</b>			
<b>c</b>	<b>Total from continuation sheets to Part VII, Section A . . . . .</b>	<b>▼</b>			
<b>d</b>	<b>Total (add lines 1b and 1c) . . . . .</b>	<b>▼</b>	2,708,174	0	369,627

**2** Total number of individuals (including but not limited to those listed in Item 1) who received more than \$100,000 of reportable compensation from the organization. 26

		Yes	No
<b>3</b>	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> . . . . .	<b>3</b>	No
<b>4</b>	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i> . . . . .	<b>4</b>	Yes
<b>5</b>	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i> . . . . .	<b>5</b>	No

## Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
MATT CONSTRUCTION CORPORATION 9814 NORWALK BLVD SUITE 100 SANTA FE SPRING CA 90670	CONSTRUCTION	11,362,200
KOHL BUILDING MAINTENANCE 9538 TOPANGA CANYON BLVD CHATSWORTH NJ 91311	BUILD MAINT	667,333
PARADISE CONSTRUCTION 21261 STEELE PEAK DRIVE PERRIS NJ 92570	CONSTRUCTION	660,536
CORE SERVICES CORPORATION 130 BELMONT DRIVE SOMERSET NJ 08873	IT CONSULTING	454,860
GYMS AND BUILDINGS MAINTENANCE CO 3731 MIDDLE RD LOS ANGELES CA 90063	BUILD MAINT	430,589

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶38



Part VIII

Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . . . . .	1a68,269			
	b	Membership dues . . . . .	1b			
	c	Fundraising events . . . . .	1c1,839,118			
	d	Related organizations . . . . .	1d63,948			
	e	Government grants (contributions)	1e3,836,594			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f11,969,343			
	g	Noncash contributions included in lines 1a-1f \$	2,725,906			
	h	Total. Add lines 1a-1f . . . . .	17,777,272			
Program Service Revenue	2a	PROGRAMS FOR YOUTH DEVELOPMENT	Business Code 813410	13,791,276	13,791,276	
	b	PROGRAMS FOR HEALTHY LIVING	813410	39,251,818	39,251,818	
	c	PROGRAMS FOR SOCIAL RESPONSIBILITY	813410	7,137,005	7,137,005	
	d		0			
	e		0			
	f	All other program service revenue	0	0	0	0
	g	Total. Add lines 2a-2f . . . . .	60,180,099			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) . . . . .	854,548			854,548
	4	Income from investment of tax-exempt bond proceeds . . . . .	1,392			1,392
	5	Royalties . . . . .	0			
	6a	Gross rents	(i) Real (ii) Personal 788,626			
	b	Less rental expenses				
	c	Rental income or (loss)	0788,626			
	d	Net rental income or (loss) . . . . .	788,626			788,626
	7a	Gross amount from sales of assets other than inventory	(i) Securities (ii) Other 83,309,497183,175			
	b	Less cost or other basis and sales expenses	79,114,12587,456			
	c	Gain or (loss)	4,195,37295,719			
	d	Net gain or (loss) . . . . .	4,291,091			4,291,091
	8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 . . . . .	a645,615			
	b	Less direct expenses . . . . .	b722,445			
	c	Net income or (loss) from fundraising events . . . . .	-76,830			-76,830
	9a	Gross income from gaming activities See Part IV, line 19 . . . . .	a34,382			
	b	Less direct expenses . . . . .	b24,650			
	c	Net income or (loss) from gaming activities . . . . .	9,732			9,732
	10a	Gross sales of inventory, less returns and allowances . . . . .	a			
	b	Less cost of goods sold . . . . .	b			
	c	Net income or (loss) from sales of inventory . . . . .	0			
		Miscellaneous Revenue	Business Code			
	11a	MISCELLANEOUS FEES	900099	223,328		223,328
	b	INSURANCE SETTLEMENT	900099	70,238		70,238
	c	RETURNED PAYMENT FEES	900099	57,696		57,696
	d	All other revenue . . . . .	119,637	0	0	119,637
	e	Total. Add lines 11a-11d . . . . .	470,899			
	12	Total revenue. See Instructions . . . . .	84,296,829	60,180,099	0	6,339,458

Part IX

Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21.	15,000	15,000		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22.	0	0		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.	0	0		
4	Benefits paid to or for members.	0	0		
5	Compensation of current officers, directors, trustees, and key employees.	2,275,453	1,180,994	848,998	245,461
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	0			
7	Other salaries and wages.	34,365,685	28,788,146	3,407,836	2,169,703
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	2,411,477	1,934,558	332,415	144,504
9	Other employee benefits.	1,588,907	1,360,908	174,657	53,342
10	Payroll taxes.	4,763,448	4,048,488	426,545	288,415
11	Fees for services (non-employees):				
a	Management.	0			
b	Legal.	45,603	8,843	36,760	
c	Accounting.	153,608		153,608	
d	Lobbying.	6,088	6,088		
e	Professional fundraising services. See Part IV, line 17.	141,622			141,622
f	Investment management fees.	181,362		181,362	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	3,257,973	2,816,537	209,199	232,237
12	Advertising and promotion.	897,236	636,432	23,897	236,907
13	Office expenses.	2,268,180	1,980,942	107,866	179,372
14	Information technology.	693,003	401,083	206,061	85,859
15	Royalties.	0			
16	Occupancy.	10,028,344	9,861,505	161,939	4,900
17	Travel.	1,713,486	1,501,580	148,756	63,150
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.	0			
19	Conferences, conventions, and meetings.	1,317,163	984,730	226,553	105,880
20	Interest.	961,048	938,279	22,769	
21	Payments to affiliates.	0			
22	Depreciation, depletion, and amortization.	5,432,446	5,303,733	128,713	
23	Insurance.	1,606,975	1,456,492	150,483	
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):				
a	SUPPLIES	4,135,529	3,929,430	60,777	145,322
b	EQUIPMENT RENTAL	1,623,000	1,507,933	115,067	
c	OTHER	1,790,694	1,321,783	464,087	4,824
d					
e	All other expenses	0	0	0	0
25	Total functional expenses. Add lines 1 through 24e.	81,673,330	69,983,484	7,588,348	4,101,498
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).	0			

Part X

Balance Sheet

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

				(A)		(B)
				Beginning of year		End of year
Assets	1	Cash—non-interest-bearing		3,092,733	1	5,704,574
	2	Savings and temporary cash investments		0	2	
	3	Pledges and grants receivable, net		7,507,369	3	4,825,487
	4	Accounts receivable, net		960,082	4	1,753,487
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		0	5	0
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		0	6	0
	7	Notes and loans receivable, net		700,452	7	679,394
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		2,295,961	9	2,642,073
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a203,342,096			
	b	Less accumulated depreciation	10b97,247,232	86,498,606	10c	106,094,864
	11	Investments—publicly traded securities		76,232,311	11	66,010,509
	12	Investments—other securities See Part IV, line 11		3,789,964	12	3,077,070
	13	Investments—program-related See Part IV, line 11		0	13	0
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		5,468,185	15	6,387,144
	16	Total assets. Add lines 1 through 15 (must equal line 34)		186,545,663	16	197,174,602
Liabilities	17	Accounts payable and accrued expenses		10,092,880	17	14,391,669
	18	Grants payable			18	
	19	Deferred revenue		3,196,227	19	2,171,810
	20	Tax-exempt bond liabilities		33,000,000	20	31,750,000
	21	Escrow or custodial account liability Complete Part IV of Schedule D		211,494	21	343,374
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		0	22	0
	23	Secured mortgages and notes payable to unrelated third parties		11,254,328	23	13,250,030
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		7,966,264	25	8,748,123
	26	Total liabilities. Add lines 17 through 25		65,721,193	26	70,655,006
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets		67,261,464	27	68,951,850
	28	Temporarily restricted net assets		35,661,430	28	39,510,633
	29	Permanently restricted net assets		17,901,576	29	18,057,113
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		120,824,470	33	126,519,596
	34	Total liabilities and net assets/fund balances		186,545,663	34	197,174,602

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	84,296,829
2	Total expenses (must equal Part IX, column (A), line 25)	2	81,673,330
3	Revenue less expenses Subtract line 2 from line 1	3	2,623,499
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	120,824,470
5	Net unrealized gains (losses) on investments	5	932,307
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	2,139,320
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	126,519,596

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 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
2c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
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?	Yes	
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	Yes	

## Additional Data

**Software ID:** 13000248  
**Software Version:** 2013v3.1  
**EIN:** 95-1644052  
**Name:** YOUNG MEN'S CHRISTIAN ASSOCIATION OF  
 METROPOLITAN LOS ANGELES

**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
A HOSTRUP PRESIDENT & CEO	50 00 1 00	X		X				340,067	0	29,386
ALAN KREDITOR VICE CHAIRMAN	1 00	X		X				0	0	0
AVEDICK B POLADIAN PAST CHAIRMAN	1 00	X		X				0	0	0
BRYAN PALBAUM VICE CHAIRMAN	1 00	X		X				0	0	0
CRISTINA ROSE CHAIRMAN OF THE BOARD	1 00 1 00	X		X				0	0	0
FRANKLIN E ULF VICE CHAIRMAN	1 00	X		X				0	0	0
JOHN B EMERSON TO 09-13 VICE CHAIRMAN	1 00	X		X				0	0	0
JOHN F LLEWELLYN TREASURER	1 00 1 00	X		X				0	0	0
JOHN W ALDEN JR VICE CHAIRMAN	1 00	X		X				0	0	0
MARK B HELM VICE CHAIRMAN	1 00 1 00	X		X				0	0	0
RICHARD G NEWMAN VICE CHAIRMAN	1 00	X		X				0	0	0
ROBERT J LOWE PAST CHAIRMAN	1 00	X		X				0	0	0
STEPHEN C MEIER SECRETARY	1 00	X		X				0	0	0
STEPHEN F HINCHLIFFE JR PAST CHAIRMAN	1 00	X		X				0	0	0
THOMAS G MILLER VICE CHAIRMAN	1 00	X		X				0	0	0
TODD M KATZ VICE CHAIRMAN	1 00	X		X				0	0	0
W J ELLISON IMMEDIATE PAST CHAIRMAN	1 00	X		X				0	0	0
ANDREW E CROWELL BOARD MEMBER	1 00	X						0	0	0
ANTON C GARNIER BOARD MEMBER	1 00	X						0	0	0
BERNARD C PARKS BOARD MEMBER	1 00	X						0	0	0
BILL APPEGATE BOARD MEMBER	1 00	X						0	0	0
CARLA CHRISTOFFERSON BOARD MEMBER	1 00	X						0	0	0
CHESTER PIPKIN BOARD MEMBER	1 00	X						0	0	0
DIANE DIXON BOARD MEMBER	1 00	X						0	0	0
EARL E GALES JR BOARD MEMBER	1 00	X						0	0	0

**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
GARY C PETROSINO BOARD MEMBER	1 00	X						0	0	0
GLENVILLE A MARCH JR MD BOARD MEMBER	1 00	X						0	0	0
JANET W LAMKIN BOARD MEMBER	1 00	X						0	0	0
JOHN B POWER BOARD MEMBER	1 00	X						0	0	0
JOHN H SANDERS BOARD MEMBER	1 00	X						0	0	0
JOHN H SEMCKEN III BOARD MEMBER	1 00	X						0	0	0
JUDITH ANDERSON MUNZIG BOARD MEMBER	1 00	X						0	0	0
KENNETH M DORAN TO 01-13 BOARD MEMBER	1 00	X						0	0	0
LEROY D BACA BOARD MEMBER	1 00	X						0	0	0
LINDA ALVAREZ FROM 01-13 BOARD MEMBER	1 00	X						0	0	0
LYNN A SULLIVAN BOARD MEMBER	1 00	X						0	0	0
MELVIN D LINDSEY BOARD MEMBER	1 00	X						0	0	0
MICHAEL PAGANO FROM 01-13 BOARD MEMBER	1 00	X						0	0	0
PATRICK J NIEMANN BOARD MEMBER	1 00	X						0	0	0
PETER W LEE FROM 01-13 BOARD MEMBER	1 00	X						0	0	0
R TODD DONEY BOARD MEMBER	1 00	X						0	0	0
ROBERT J ABERNETHY BOARD MEMBER	1 00	X						0	0	0
ROBERT J JORDAN BOARD MEMBER	1 00	X						0	0	0
STEPHEN M KADENACY BOARD MEMBER	1 00	X						0	0	0
STEVE SILK BOARD MEMBER	1 00	X						0	0	0
STUART M KETCHUM TO 03-13 BOARD MEMBER	1 00	X						0	0	0
SURENDRA JAIN BOARD MEMBER	1 00	X						0	0	0
WALTER B ROSE BOARD MEMBER	1 00	X						0	0	0
WHITLEY C COLLINS BOARD MEMBER	1 00	X						0	0	0
D COOPER EVP & CFO	50 00 1 00			X				199,800	0	26,769

**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
K HIRAI EVP & COO	50 00 1 00			X				197,543	0	29,329
S HARLOW EVP FINANCIAL DEVELOPMENT	50 00			X				239,818	0	5,643
W STAPLETON EVP HUMAN RESOURCES	50 00			X				196,770	0	38,309
J STANTON EXECUTIVE DIRECTOR AND VP	50 00				X			159,235	0	24,505
L GOGANZER EXECUTIVE DIRECTOR AND VP	50 00				X			159,529	0	27,249
P DE FELICE SVP BRANCH OPERATIONS	50 00				X			154,425	0	24,554
R CORONA SVP BRANCH OPERATIONS	50 00				X			164,246	0	28,864
R SHAFER EXECUTIVE DIRECTOR AND VP	50 00				X			197,581	0	31,830
A SAMSON EXECUTIVE DIRECTOR	50 00					X		142,899	0	20,797
D PRICE VP INFORMATION SERVICES	50 00					X		120,354	0	24,285
G KOUBEK EXECUTIVE DIRECTOR	50 00					X		140,550	0	14,925
K FOLLETTE EXECUTIVE DIRECTOR	50 00					X		174,835	0	30,563
V DOMINGUEZ SVP BRANCH OPERATIONS	50 00					X		120,522	0	12,619

SCHEDULE A

(Form 990 or 990EZ)

Department of the  
Treasury  
Internal Revenue Service

Public Charity Status and Public Support

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

▶ **Attach to Form 990 or Form 990-EZ.** ▶ **See separate instructions.**  
▶ **Information about Schedule A (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990*.**

OMB No 1545-0047

2013

Open to Public  
Inspection

**Name of the organization**  
YOUNG MEN'S CHRISTIAN ASSOCIATION OF METROPOLITAN LOS ANGELES

**Employer identification number**  
95-1644052

Part I

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

The organization is not a private foundation because it is (For lines 1 through 11, check only one box )

- 1

☐

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E )
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state \_\_\_\_\_
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II )
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II )
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II )
- 9

☐

An organization that normally receives (1) more than 33<sup>1</sup>/<sub>3</sub>% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33<sup>1</sup>/<sub>3</sub>% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III )
- 10

☐

An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h  

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Non-functionally integrated

e

☐

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box

g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?  

(i)

A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?

(ii)

A family member of a person described in (i) above?

(iii)

A 35% controlled entity of a person described in (i) or (ii) above?

h

☐

Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
Total									



Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)  
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	26,323,513	23,297,324	23,580,570	11,795,689	17,777,272	102,774,368
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0
4 Total. Add lines 1 through 3	26,323,513	23,297,324	23,580,570	11,795,689	17,777,272	102,774,368
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						0
6 Public support. Subtract line 5 from line 4						102,774,368

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4	26,323,513	23,297,324	23,580,570	11,795,689	17,777,272	102,774,368
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,459,741	1,797,677	2,061,261	1,900,034	1,644,566	9,863,279
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	2,234,357	1,201,165	2,336,924	1,268,703	1,075,154	8,116,303
11 Total support (Add lines 7 through 10)						120,753,950
12 Gross receipts from related activities, etc. (see instructions)					12	289,776,632
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here . . . . .						▶

Section C. Computation of Public Support Percentage		
14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	85 110 %
15 Public support percentage for 2012 Schedule A, Part II, line 14	15	84 620 %
16a 33 1/3% support test—2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	▶	
b 33 1/3% support test—2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	▶	
17a 10%-facts-and-circumstances test—2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	▶	
b 10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	▶	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	▶	

Part IIISupport Schedule for Organizations Described in Section 509(a)(2)  
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6 )						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage			
15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15		
16 Public support percentage from 2012 Schedule A, Part III, line 15	16		

Section D. Computation of Investment Income Percentage			
17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17		
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18		
19a 33 1/3% support tests—2013. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶			
b 33 1/3% support tests—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶			
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶			

Part IV

**Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test	
Return Reference	Explanation
Schedule A, Part II, Line 10, Other Income	DESCRIPTION - INSURANCE SETTLEMENT, COLUMN A - 1027075, COLUMN B - 109942, COLUMN C - 263042, COLUMN D - 304300, COLUMN E - 70238, COLUMN F - 1774597, DESCRIPTION - GROSS INCOME SPECIAL EVENTS, COLUMN A - 740865, COLUMN B - 580666, COLUMN C - 760153, COLUMN D - 681457, COLUMN E - 679997, COLUMN F - 3443138, DESCRIPTION - RETURNED PAYMENT FEES, COLUMN A - 76446, COLUMN B - 88951, COLUMN C - 71639, COLUMN D - 58495, COLUMN E - 57696, COLUMN F - 353227, DESCRIPTION - OTHER, COLUMN A - 389971, COLUMN B - 421606, COLUMN C - 433757, COLUMN D - 224451, COLUMN E - 267223, COLUMN F - 1737008, DESCRIPTION - ACCRUAL ADJ ON SETTLEMENT, COLUMN A - , COLUMN B - , COLUMN C - 808333, COLUMN D - , COLUMN E - , COLUMN F - 808333,

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527  
▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**  
▶ **See separate instructions.** ▶ **Information about Schedule C (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990*.**

OMB No 1545-0047

2013

Open to Public Inspection

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

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

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

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

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

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

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

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

1	Provide a description of the organization's direct and indirect political campaign activities in Part IV	
2	Political expenditures	▶ \$
3	Volunteer hours	

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

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

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

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

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

Part II-A

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

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

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

4-Year Averaging Period Under Section 501(h)  
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B

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

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.		(a)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?		No	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		No	
c	Media advertisements?		No	
d	Mailings to members, legislators, or the public?	Yes		3,044
e	Publications, or published or broadcast statements?		No	
f	Grants to other organizations for lobbying purposes?		No	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		3,044
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
i	Other activities?		No	
j	Total. Add lines 1c through 1i.			6,088
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b	If "Yes," enter the amount of any tax incurred under section 4912.			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912.			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A

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

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

Part III-B

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

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

Part IV

Supplemental Information

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

Return Reference	Explanation
Schedule C, Part II-B, Line 1, Description of the activities reported on Lines 1a through 1i	LOBBYING ACTIVITIES WHICH FURTHER THE GOALS AND MISSION OF THE YMCA BY SUPPORTING LEGISLATION INCLUDE WRITING LETTERS OF SUPPORT OF LEGISLATION, TESTIMONY BEFORE LEGISLATIVE COMMITTEES AND SPEAKING TO LEGISLATORS

[illegible]

SCHEDULE D  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b  
▶ Attach to Form 990. ▶ See separate instructions. ▶ Information about Schedule D (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2013

Open to Public Inspection

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

Part I

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

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

Part II

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)  
☐ Preservation of land for public use (e g , recreation or education) ☐ Preservation of an historically important land area  
☐ Protection of natural habitat ☐ Preservation of a certified historic structure  
☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ \_\_\_\_\_

4 Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ \_\_\_\_\_

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ \_\_\_\_\_

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ▶ \$ \_\_\_\_\_

(ii) Assets included in Form 990, Part X ▶ \$ \_\_\_\_\_

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenues included in Form 990, Part VIII, line 1 ▶ \$ \_\_\_\_\_

b Assets included in Form 990, Part X ▶ \$ \_\_\_\_\_



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

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

b ☐ Scholarly research

c ☐ Preservation for future generations

d ☐ Loan or exchange programs

e ☐ Other
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? 

☐ Yes ☐ No

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? 

☒ Yes ☐ No
- b If "Yes," explain the arrangement in Part XIII and complete the following table
- |                                  |         |
|----------------------------------|---------|
|                                  | Amount  |
| 1c Beginning balance             | 211,494 |
| 1d Additions during the year     | 918,306 |
| 1e Distributions during the year | 786,426 |
| 1f Ending balance                | 343,374 |
- 2a Did the organization include an amount on Form 990, Part X, line 21? 

☒ Yes ☐ No
- b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII 

☒

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

- |  |                 |               |                     |                     |                    |
|--|-----------------|---------------|---------------------|---------------------|--------------------|
|  | (a)Current year | (b)Prior year | b (c)Two years back | (d)Three years back | (e)Four years back |
| 1a Beginning of year balance . . . . .                     | 47,010,181      | 44,888,544    | 45,204,864          | 38,444,728          | 29,319,582         |
| b Contributions . . . . .                                  | 875,186         | 1,698,499     | 1,261,682           | 2,265,294           | 1,304,515          |
| c Net investment earnings, gains, and losses               | 5,173,576       | 2,484,916     | 424,333             | 6,618,793           | 11,105,957         |
| d Grants or scholarships . . . . .                         |                 |               |                     |                     |                    |
| e Other expenditures for facilities and programs . . . . . | 12,851,989      | 1,883,193     | 1,728,797           | 1,873,365           | 3,038,459          |
| f Administrative expenses . . . . .                        | 169,099         | 178,585       | 273,538             | 250,586             | 246,867            |
| g End of year balance . . . . .                            | 40,037,855      | 47,010,181    | 44,888,544          | 45,204,864          | 38,444,728         |
- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as
- a Board designated or quasi-endowment ▶ 29 400 %

b Permanent endowment ▶ 43 400 %

c Temporarily restricted endowment ▶ 27 200 %
- The percentages in lines 2a, 2b, and 2c should equal 100%
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by
- (i) unrelated organizations . . . . .

(ii) related organizations . . . . .
- |        |     |    |
|--------|-----|----|
|        | Yes | No |
| 3a(i)  |     | No |
| 3a(ii) |     | No |
| 3b     |     |    |
- b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? . . . . .
- 4 Describe in Part XIII the intended uses of the organization's endowment funds

**Part VI Land, Buildings, and Equipment.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land . . . . .		17,241,217		17,241,217
b Buildings . . . . .		141,148,759	82,972,121	58,176,638
c Leasehold improvements . . . . .		384,774	13,906,844	-13,522,070
d Equipment . . . . .		19,131,274	368,267	18,763,007
e Other . . . . .		25,436,072		25,436,072
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . . .				106,094,864



Part XI

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

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

Part XII

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

Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

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

Part XIII

Supplemental Information

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

Return Reference	Explanation
Schedule D, Part IV, Line 1b, Agent, trustee, custodian, or other intermediary arrangement	THE ASSOCIATION SERVES AS THE CUSTODIAN FOR FUNDS HELD INDEPENDENTLY OF THE ASSOCIATION FOR CLUBS, YOUTH SPORTS TEAMS AND SPECIALIZED PROGRAMS, WHEN THESE OUTSIDE GROUPS DO NOT HOLD BANK ACCOUNTS
Schedule D, Part IV, Line 2b, Explanation of escrow agreement	THE ASSOCIATION SERVES AS THE CUSTODIAN FOR FUNDS HELD INDEPENDENTLY OF THE ASSOCIATION FOR CLUBS, YOUTH SPORTS TEAMS AND SPECIALIZED PROGRAMS, WHEN THESE OUTSIDE GROUPS DO NOT HOLD BANK ACCOUNTS
Schedule D, Part V, Line 4, Intended uses of endowment funds	THE ASSOCIATION'S ENDOWMENT FUNDS INCLUDE THOSE ASSETS OF DONOR-RESTRICTED FUNDS THAT THE ORGANIZATION MUST HOLD IN PERPETUITY OR FOR A DONOR-SPECIFIED PERIOD AND PURPOSE, AS WELL AS UNRESTRICTED FUNDS FUNCTIONING AS ENDOWMENT THE ASSOCIATION HAS ADOPTED INVESTMENT AND SPENDING POLICIES FOR ASSETS THAT ATTEMPT TO PROVIDE SUFFICIENT INCOME TO SUSTAIN FUNDING TO PROGRAMS SUPPORTED BY ENDOWMENT WHILE SEEKING TO MAINTAIN THE PURCHASING POWER OF THE ENDOWMENT THE ASSOCIATION HAS A POLICY OF APPROPRIATING FOR DISTRIBUTION EACH YEAR A PERCENTAGE OF THE THREE YEAR TRAILING AVERAGE OF THE FAIR VALUE OF THE ENDOWMENT AS OF AUGUST 31 OF THE PRIOR YEAR THE DISTRIBUTION RATE FOR THE PERIOD ENDING DECEMBER 31, 2013 WAS 4% ADDITIONAL TERM ENDOWMENT DISTRIBUTIONS MAY BE MADE IN ACCORDANCE WITH DONOR RESTRICTIONS ADDITIONAL DISTRIBUTIONS OF UNRESTRICTED FUNDS FUNCTIONING AS ENDOWMENT MAY BE MADE IN ACCORDANCE WITH ASSOCIATION NEEDS
Schedule D, Part X, Line 2, FIN 48 (ASC 740) footnote	THE ASSOCIATION WAS ORGANIZED PURSUANT TO THE GENERAL NONPROFIT CORPORATION LAW OF THE STATE OF CALIFORNIA THE ASSOCIATION HAS BEEN RECOGNIZED BY THE INTERNAL REVENUE SERVICE AS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE THE ASSOCIATION HAS ALSO BEEN RECOGNIZED BY THE CALIFORNIA FRANCHISE TAX BOARD AS EXEMPT FROM CALIFORNIA FRANCHISE TAXES AND CERTAIN GENERAL COUNTY REAL AND PERSONAL PROPERTY TAXES UNDER SECTION 23701D OF THE CALIFORNIA REVENUE AND TAXATION CODE HOWEVER, THE ASSOCIATION IS SUBJECT TO INCOME TAXES ON ANY NET INCOME THAT IS DERIVED FROM A TRADE OR BUSINESS, REGULARLY CARRIED ON, AND NOT IN FURTHERANCE OF THE PURPOSES FOR WHICH IT WAS GRANTED EXEMPTION NO INCOME TAX PROVISION HAS BEEN RECORDED AS THE NET INCOME, IF ANY, FROM ANY UNRELATED TRADE OR BUSINESS, IN THE OPINION OF MANAGEMENT, IS NOT MATERIAL TO THE COMBINED FINANCIAL STATEMENTS TAKEN AS A WHOLE TAX POSITIONS TAKEN RELATED TO THE ASSOCIATION'S TAX EXEMPT STATUS, UNRELATED BUSINESS ACTIVITIES TAXABLE INCOME, AND DEDUCTIBILITY OF EXPENSES, AND OTHER MISCELLANEOUS TAX POSITIONS HAVE BEEN REVIEWED, AND MANAGEMENT IS OF THE OPINION THAT MATERIAL POSITIONS TAKEN BY THE ASSOCIATION WOULD MORE LIKELY THAN NOT BE SUSTAINED BY EXAMINATION ACCORDINGLY, THE ASSOCIATION HAS NOT RECORDED AN INCOME TAX LIABILITY FOR UNCERTAIN TAX BENEFITS

[illegible]

SCHEDULE F  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" to Form 990,  
Part IV, line 14b, 15, or 16.

▶ Attach to Form 990. ▶ See separate instructions.

▶ Information about Schedule F (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2013

Open to Public  
Inspection

Name of the organization  
YOUNG MEN'S CHRISTIAN ASSOCIATION OF METROPOLITAN LOS ANGELES

Employer identification number  
95-1644052

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

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . ☐ Yes ☐ No

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

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

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
( 1 ) CENTRAL AMERICA AND THE CARIBBEAN			INVESTMENTS		2,519,488
( 2 )					
( 3 )					
( 4 )					
( 5 )					
3a Sub-total					
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)					2,519,488

Part II

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
( 1 )									
( 2 )									
( 3 )									
( 4 )									

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

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

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

**Part IV Foreign Forms**

- 1

Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)*

☒ Yes ☐ No
- 2

Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)*

☐ Yes ☒ No
- 3

Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)*

☒ Yes ☐ No
- 4

Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)*

☐ Yes ☒ No
- 5

Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)*

☐ Yes ☒ No
- 6

Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).*

☐ Yes ☒ No



**Part V**

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

990 Schedule F, Supplemental Information

Return Reference	Explanation
Schedule F, Part I, Line 3, Method to account for expenditures on org 's financial statements	CENTRAL AMERICA AND THE CARIBBEAN BOOK VALUE

990 Schedule F, Supplemental Information

Return Reference	Explanation
Schedule F, Part I, Line 3, Method to account for expenditures on org 's financial statements	CENTRAL AMERICA AND THE CARIBBEAN BOOK VALUE

SCHEDULE G  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

Supplemental Information Regarding  
Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 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. ▶ See separate instructions.  
▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization  
YOUNG MEN'S CHRISTIAN ASSOCIATION OF METROPOLITAN LOS ANGELES

Employer identification number  
95-1644052

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

1

Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a

☒

Mail solicitations

e

☒

Solicitation of non-government grants

b

☒

Internet and email solicitations

f

☒

Solicitation of government grants

c

☒

Phone solicitations

g

☒

Special fundraising events

d

☒

In-person solicitations

2a

Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☒ Yes ☐ No

b

If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 FIREFLY INC	GRANT WRITING		No	990,633	113,102	877,531
2 PGCALC	PLANNED GIVING CONSULTANT		No	448,931	14,505	434,426
3 NETZEL GRIGSBY ASSOCIATES INC	CAMPAIGN FEASIBILITY		No	1,149,037	14,015	1,135,022
4						
5						
6						
7						
8						
9						
10						
Total . . . . . ▶				2,588,601	141,622	2,446,979

3

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

CA

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		STAIR CLIMB (event type)	NV DINNER (event type)	21 (total number)	(add col (a) through col (c))
Revenue	1	Gross receipts . . . .	646,646	294,078	1,544,009
	2	Less Contributions . . . .	644,415	275,178	919,525
	3	Gross income (line 1 minus line 2) . . . .	2,231	18,900	624,484
Direct Expenses	4	Cash prizes . . . .	0	0	0
	5	Noncash prizes . . . .	0	0	0
	6	Rent/facility costs . . . .	47,450	1,755	56,006
	7	Food and beverages . . . .	4,653	17,559	164,240
	8	Entertainment . . . .	3,025	1,980	8,897
	9	Other direct expenses . . . .	94,757	31,050	286,073
	10	Direct expense summary Add lines 4 through 9 in column (d) . . . . .			(717,445)
	11	Net income summary Subtract line 10 from line 3, column (d) . . . . .			-71,830

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

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1	Gross revenue . . . . .		34,382	34,382
	2	Cash prizes . . . . .		5,000	5,000
Direct Expenses	3	Non-cash prizes . . . . .		24,650	24,650
	4	Rent/facility costs . . . . .		0	0
	5	Other direct expenses . . . . .		0	0
	6	Volunteer labor . . . . . <input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7	Direct expense summary Add lines 2 through 5 in column (d) . . . . .			29,650
	8	Net gaming income summary Subtract line 7 from line 1, column (d) . . . . .			4,732

9 Enter the state(s) in which the organization operates gaming activities CA

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

b If "No," explain

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

b If "Yes," explain

Does the organization operate gaming activities with nonmembers? ☒ **Yes** ☐ **No**

**12** Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ **Yes** ☒ **No**

**13** Indicate the percentage of gaming activity operated in

<b>a</b> The organization's facility	<b>13a</b>	0 %
<b>b</b> An outside facility	<b>13b</b>	100 %

**14** Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶ DAN COOPER - CHIEF FINANCIAL OFFICER

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

**15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ **Yes** ☒ **No**

**b** If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party ▶ \$ \_\_\_\_\_

**c** If "Yes," enter name and address of the third party

Name ▶

Address ▶

**16** Gaming manager information

Name ▶ DAN COOPER - CHIEF FINANCIAL OFFICER

Gaming manager compensation ▶ \$ \_\_\_\_\_

Description of services provided ▶ ALL RELATED FINANCIAL AND ACCOUNTING SER

☒ Director/officer ☐ Employee ☐ Independent contractor

**17** Mandatory distributions

**a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☒ **Yes** ☐ **No**

**b** Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ 30,944

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

Return Reference	Explanation
Schedule G, Part III, Line 17b, Distributions required under state law	STATE=CALIFORNIA,MANDATORY DISTRIBUTION AMOUNT=30944,

Schedule I  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Grants and Other Assistance to Organizations,  
Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.  
▶ Attach to Form 990

▶ Information about Schedule I (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2013

Open to Public  
Inspection

Name of the organization  
YOUNG MEN'S CHRISTIAN ASSOCIATION OF METROPOLITAN LOS ANGELES

Employer identification number  
95-1644052

Part I

General Information on Grants and Assistance

- 1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . .

☒ Yes ☐ No
- 2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) TIJUANA YMCA EMER FUND-YMCA OF SAN DIEGO 3708 RUFFIN ROAD SAN DIEGO,CA 92123	95-2039198	501C3	15,000				

2

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . .

1

3

Enter total number of other organizations listed in the line 1 table . . . . .

0

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.  
Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV

Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Return Reference	Explanation
Schedule I, Part I, Line 2, Procedures for monitoring use of grant funds	GRANTS ARE MADE TO QUALIFYING 501C3 ORGANIZATIONS WHOSE MISSIONS ARE COMPATIBLE WITH THE ASSOCIATION'S MISSION OF BUILDING STRONG KIDS, STRONG FAMILIES AND STRONG COMMUNITIES. GRANTEEES ARE SELECTED BY THE PRESIDENT WHO MONITORS THE WORK OF THE ORGANIZATIONS WHO RECEIVE GRANT FUNDS THROUGH EMAIL AND CONVERSATIONS WITH GRANTEEES, PARTICIPATES IN THE GRANTEEES PROGRAMS, AND HAS A STRONG FAMILIARITY WITH THE GRANTEE'S OPERATIONS

Schedule J  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Compensation Information

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

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.  
▶ Attach to Form 990. ▶ See separate instructions.

▶ Information about Schedule J (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization  
YOUNG MEN'S CHRISTIAN ASSOCIATION OF METROPOLITAN LOS ANGELES

Employer identification number  
95-1644052

Part I

Questions Regarding Compensation

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



**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 in 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 are not listed on Form 990, Part VII

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
See Additional Data Table								

**Part III**   **Supplemental Information**

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

Return Reference	Explanation
Schedule J, Part I, Line 1a, Housing allowance or residence for personal use	THE ORGANIZATION APPLIES SPECIFIED GUIDELINES FOR RELOCATION EXPENSES TO COMPENSATION NEGOTIATIONS FOR OFFICERS AND KEY EMPLOYEES

# Additional Data

**Software ID:** 13000248  
**Software Version:** 2013v3.1  
**EIN:** 95-1644052  
**Name:** YOUNG MEN'S CHRISTIAN ASSOCIATION OF METROPOLITAN LOS ANGELES

## Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
P DE FELICE SVP BRANCH OPERATIONS	(i) (ii)	154,025 0	0 0	400 0	15,690 0	8,864 0	178,979 0	0 0
A SAMSON EXECUTIVE DIRECTOR	(i) (ii)	142,540 0	0 0	359 0	14,452 0	6,345 0	163,696 0	0 0
L GOGANZER EXECUTIVE DIRECTOR AND VP	(i) (ii)	159,101 0	0 0	428 0	16,534 0	10,715 0	186,778 0	0 0
J STANTON EXECUTIVE DIRECTOR AND VP	(i) (ii)	158,306 0	0 0	929 0	16,073 0	8,432 0	183,740 0	0 0
R CORONA SVP BRANCH OPERATIONS	(i) (ii)	163,803 0	0 0	443 0	17,106 0	11,758 0	193,110 0	0 0
G KOUBEK EXECUTIVE DIRECTOR	(i) (ii)	140,204 0	0 0	346 0	14,000 0	925 0	155,475 0	0 0
K HIRAI EVP & COO	(i) (ii)	197,003 0	0 0	540 0	20,010 0	9,319 0	226,872 0	0 0
R SHAFER EXECUTIVE DIRECTOR AND VP	(i) (ii)	197,030 0	0 0	551 0	20,418 0	11,412 0	229,411 0	0 0
A HOSTRUP PRESIDENT & CEO	(i) (ii)	340,067 0	0 0	0 0	27,394 0	1,992 0	369,453 0	0 0
K FOLLETTE EXECUTIVE DIRECTOR	(i) (ii)	173,906 0	0 0	929 0	16,050 0	14,513 0	205,398 0	0 0
D COOPER EVP & CFO	(i) (ii)	199,260 0	0 0	540 0	20,125 0	6,644 0	226,569 0	0 0
W STAPLETON EVP HUMAN RESOURCES	(i) (ii)	196,209 0	0 0	561 0	20,752 0	17,557 0	235,079 0	0 0
S HARLOW EVP FINANCIAL DEVELOPMENT	(i) (ii)	239,204 0	0 0	614 0	0 0	5,643 0	245,461 0	0 0

Schedule K  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Name of the organization  
YOUNG MEN'S CHRISTIAN ASSOCIATION OF METROPOLITAN LOS ANGELES

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.  
▶ Attach to Form 990. ▶ See separate instructions.  
▶ Information about Schedule K (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2013

Open to Public Inspection

Employer identification number  
95-1644052

Part I Bond Issues											
(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
						Yes	No	Yes	No	Yes	No
A CALIFORNIA I-BANK	68-0304653		04-13-2012	33,000,000	SEE SCHEDULE O SUPPLEMENT FOR DETAILS		X		X		X

Part II Proceeds									
		A		B		C		D	
1	Amount of bonds retired	0							
2	Amount of bonds legally defeased	0							
3	Total proceeds of issue	33,000,000							
4	Gross proceeds in reserve funds	2,310,679							
5	Capitalized interest from proceeds	0							
6	Proceeds in refunding escrows	0							
7	Issuance costs from proceeds	414,999							
8	Credit enhancement from proceeds	0							
9	Working capital expenditures from proceeds	0							
10	Capital expenditures from proceeds	1,450,069							
11	Other spent proceeds	28,824,253							
12	Other unspent proceeds	0							
13	Year of substantial completion								
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?	X							
15	Were the bonds issued as part of an advance refunding issue?		X						
16	Has the final allocation of proceeds been made?		X						
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X							

Part III Private Business Use									
		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X						
2	Are there any lease arrangements that may result in private business use of bond-financed property?		X						

Part III

Private Business Use (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?		X						
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c	Are there any research agreements that may result in private business use of bond-financed property?		X						
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government	0 %							
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government	0 %							
6	Total of lines 4 and 5	0 %							
7	Does the bond issue meet the private security or payment test?	X							
8a	Has there been a sale or disposition of any of the bond financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X						
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of								
c	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?	X							

Part IV

Arbitrage

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the issuer filed Form 8038-T?		X						
2	If "No" to line 1, did the following apply?								
a	Rebate not due yet?								
b	Exception to rebate?								
c	No rebate due?	X							
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed								
3	Is the bond issue a variable rate issue?	X							
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?	X							
b	Name of provider	UNION BANK NA							
c	Term of hedge	200							
d	Was the hedge superintegrated?		X						
e	Was the hedge terminated?		X						

Part IV

Arbitrage (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		X						
b	Name of provider								
c	Term of GIC	0 0							
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?		X						
7	Has the organization established written procedures to monitor the requirements of section 148?	X							

Part V

Procedures To Undertake Corrective Action

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
	X							

Part VI

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

Return Reference	Explanation
, DESCRIPTION OF PURPOSE	THE PROCEEDS OF THE 2012 REVENUE BONDS WERE USED TO (I) DEFEASE AND REFUND ITS 2001 REVENUE BONDS AND (II) FUND A PORTION OF THE ASSOCIATION'S COSTS OF THE ACQUISITION, CONSTRUCTION, REFURBISHMENT, INSTALLATION, AND EQUIPPING OF CERTAIN OF ITS FACILITIES
Sch K, Part IV, Line 2c, ISSUER NAME California I-Bank No Rebate Due	THE CALCULATION FOR COMPUTING NO REBATE DUE WAS PERFORMED ON 08/04/14

Schedule L  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

Transactions with Interested Persons  
▶ Complete if the organization answered  
"Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c,  
or Form 990-EZ, Part V, line 38a or 40b.  
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.  
▶ Information about Schedule L (Form 990 or 990-EZ) and its instructions is at  
[www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047  
**2013**  
Open to Public Inspection

Name of the organization  
YOUNG MEN'S CHRISTIAN ASSOCIATION OF METROPOLITAN LOS ANGELES

Employer identification number  
95-1644052

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).

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

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

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

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

Part II Loans to and/or From Interested Persons.

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

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?	(i) Written agreement?	
			To	From			Yes	No		Yes	No
Total ▶ \$											

Part III Grants or Assistance Benefitting Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

**Part IV Business Transactions Involving Interested Persons.**

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) ANDERSON MUNGER YMCA INC	RELATED DIRECTORS AND OFFICERS	4,000,000	SALE / LEASEBACK OF LAND		No

**Part V Supplemental Information**

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

Return Reference	Explanation
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SCHEDULE M  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Noncash Contributions

►Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.  
► Attach to Form 990.

►Information about Schedule M (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization  
YOUNG MEN'S CHRISTIAN ASSOCIATION OF METROPOLITAN LOS ANGELES

Employer identification number  
95-1644052

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art . . . . .				
2 Art—Historical treasures . . . . .				
3 Art—Fractional interests . . . . .				
4 Books and publications . . . . .				
5 Clothing and household goods . . . . .				
6 Cars and other vehicles . . . . .				
7 Boats and planes . . . . .				
8 Intellectual property . . . . .				
9 Securities—Publicly traded . . . . .	X	13	121,458	FMV ON RECEIPT DATE
10 Securities—Closely held stock . . . . .				
11 Securities—Partnership, LLC, or trust interests . . . . .				
12 Securities—Miscellaneous . . . . .				
13 Qualified conservation contribution—Historic structures . . . . .				
14 Qualified conservation contribution—Other . . . . .				
15 Real estate—Residential . . . . .				
16 Real estate—Commercial . . . . .				
17 Real estate—Other . . . . .				
18 Collectibles . . . . .				
19 Food inventory . . . . .				
20 Drugs and medical supplies . . . . .				
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
25 Other ► ( ATTACHMENT 1 )	X	2,202	2,604,448	ATTACHMENT 1
26 Other ► ( )				
27 Other ► ( )				
28 Other ► ( )				

29

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

0

30a

During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . . . . .

30a

No

b

If "Yes," describe the arrangement in Part II

31

Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

31

Yes

32a

Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? . . . . .

32a

No

b

If "Yes," describe in Part II

33

If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

Part II

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

Return Reference	Explanation
SCHEDULE M, PART I, LINE 25, ATTACHMENT 1 - OTHER NONCASH CONTRIBUTIONS	DESCRIPTION / # OF CONTRIBUTIONS / REVENUES / METHOD RAFFLE ITEMS / 284 / \$24,650 / FMV ON RECEIPT DATE CHANGE IN VALUE - SPLIT INTEREST / 54 / \$537,793 / EST OF NET REAL VALUE PLEDGE RECEIVABLE / 1,863 / \$1,392,005/NPV MULTI & NEW PLEDGES GRANT RECEIVABLE / 1 / \$650,000
Schedule M, part I, column (b), Line 9, Number of contributions or items contributed	
Schedule M, part I, column (b), Line other, Number of contributions or items contributed	OTHER=ATTACHMENT 1

**SCHEDULE O**  
(Form 990 or 990-EZ)Department of the 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 to provide any additional information.****▶ Attach to Form 990 or 990-EZ.****▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at  
[www.irs.gov/form990](http://www.irs.gov/form990).**

OMB No 1545-0047

**2013****Open to Public  
Inspection**Name of the organization  
YOUNG MEN'S CHRISTIAN ASSOCIATION OF METROPOLITAN LOS ANGELES**Employer identification number**

95-1644052

**Return  
Reference****Explanation**FORM 990,  
PART III, LINE 4,  
EXEMPT  
PURPOSE

THE YMCA OF METROPOLITAN LOS ANGELES IS A VOLUNTEER-LED NON-PROFIT ORGANIZATION DEDICATED TO PUTTING JUDEO-CHRISTIAN PRINCIPLES INTO PRACTICE THROUGH PROGRAMS THAT BUILD A HEALTHY SPIRIT, MIND AND BODY FOR ALL. THE ASSOCIATION'S 25 BRANCHES, 57 SCHOOL-BASED CHILD CARE CENTERS, 16 AFTER SCHOOL ENRICHMENT PROGRAMS, 10 PRESCHOOL SITES, 5 TEEN CENTERS AND 3 WILDERNESS CAMPS PROVIDE PROGRAMS THAT NURTURE THE POTENTIAL OF KIDS, PROMOTE HEALTHY LIVING AND FOSTER A SENSE OF SOCIAL RESPONSIBILITY ACROSS 100 MILES OF LOS ANGELES COUNTY, FROM THE ANTELOPE VALLEY TO SAN PEDRO. THANKS TO THE YMCA'S DONORS AND VOLUNTEERS, YMCA MEMBERSHIP AND PROGRAMS ARE OPEN TO ALL AT AN AFFORDABLE COST.

Return Reference	Explanation
Form 990, Part VI, Sec B, Line 11b, Review of form 990 by governing body	A COPY OF THE DRAFT FORM 990 WAS PROVIDED TO THE AUDIT COMMITTEE FOR REVIEW. FOLLOWING THIS REVIEW, A COMPLETE DRAFT WAS PROVIDED TO THE BOARD OF DIRECTORS FOR REVIEW. IT WAS SUBSEQUENTLY FILED WITH THE INTERNAL REVENUE SERVICE.

Return Reference	Explanation
Form 990, Part VI, Sec B, Line 12c, Conflict of interest policy	UNDER THE TERMS OF THE ASSOCIATION'S COMPREHENSIVE CONFLICT OF INTEREST POLICY, ALL MEMBERS OF THE BOARD OF DIRECTORS, OFFICERS, KEY EMPLOYEES AND EXECUTIVE DIRECTORS ARE REQUIRED TO COMPLETE A CONFLICT OF INTEREST DISCLOSURE STATEMENT ANNUALLY. THE DISCLOSURE FORMS ARE SUBMITTED TO THE ASSISTANT TO THE PRESIDENT, WHO COMPILES THE RESPONSES TO THE DISCLOSURE FORMS ON A DOCUMENT THAT IS REVIEWED BY THE AUDIT COMMITTEE OF THE BOARD OF DIRECTORS. THE AUDIT COMMITTEE REPORTS ANY ACTUAL OR POTENTIAL CONFLICTS OF INTEREST TO THE BOARD OF DIRECTORS. ALL INDIVIDUALS WHO ARE REQUIRED TO COMPLETE THE CONFLICT OF INTEREST FORM ARE ALSO REQUIRED TO DISCLOSE ANY POTENTIAL CONFLICT OF INTEREST PRIOR TO ANY TRANSACTION ON AN ONGOING BASIS.

Return Reference	Explanation
Form 990, Part VI, Sec B, Line 15a, Process to establish compensation of top management official	THE ASSOCIATION'S PERSONNEL AND STAFF DEVELOPMENT COMMITTEE, UNDER THE AUTHORITY OF THE BOARD OF DIRECTORS, CONDUCTS AN ANNUAL INDEPENDENT REVIEW OF THE TOTAL COMPENSATION FOR SENIOR EXECUTIVES. THE COMMITTEE, MADE UP OF INDEPENDENT VOLUNTEERS, REVIEWS COMPARABLE DATA FOR THE COMPENSATION PACKAGE OF ALL OFFICERS AND KEY EMPLOYEES TO THE COMPENSATION PROVIDED TO INDIVIDUALS IN SIMILAR POSITIONS AT OTHER DIRECT SERVICE PROVIDERS AND YMCAS WITH SIMILAR REVENUE, MEMBERSHIP, NUMBER OF EMPLOYEES AND SERVICE AREAS, AND PREPARES A PROPOSED COMPENSATION PACKAGE FOR EACH OFFICER AND KEY EMPLOYEE. PROPOSED SALARY ADJUSTMENTS ARE REVIEWED AND APPROVED BY THE PERSONNEL AND STAFF DEVELOPMENT COMMITTEE, AND ARE THEN APPROVED BY THE BOARD OF DIRECTORS ANNUALLY.

Return Reference	Explanation
Form 990, Part VI, Sec B, Line 15b, Process to establish compensation of other employees	SEE FORM 990, PART VI, LINE 15A

Return Reference	Explanation
Form 990, Part VI, Sec C, Line 19, Required documents available to the public	THE ASSOCIATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY , FINANCIAL STATEMENTS AND INTERNAL REVENUE SERVICE FORMS 990 AND 990-T ARE AVAILABLE TO THE PUBLIC UPON REQUEST AT THE CORPORATE OFFICE AT 625 S NEW HAMPSHIRE AVENUE, LOS ANGELES, CA 90005



Return Reference	Explanation
Form 990 , Part XI, Line 9, Other changes in net assets or fund balances	UNREALIZED GAIN ON INTEREST RATE SWAP OBLIGATION - 2139320,

SCHEDULE R  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.  
▶ Attach to Form 990. ▶ See separate instructions.  
▶ Information about Schedule R (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization  
YOUNG MEN'S CHRISTIAN ASSOCIATION OF METROPOLITAN LOS ANGELES

Employer identification number  
95-1644052

Part I Identification of Disregarded Entities

Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) ANDERSON MUNGER YMCA INC  625 S NEW HAMPSHIRE AVENUE  LOS ANGELES, CA 90005 46-0553184	SPECIAL PURPOSE ENTITY	CA	501(C)(3)	11 - Type I	YOUNG MEN'S CHRISTIAN ASSOCIATION OF METROPOLITAN LOS ANGELES	Yes	

Part III

Identification of Related Organizations Taxable as a Partnership

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end- of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
See Additional Data Table									

Part V

Transactions With Related Organizations

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

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

1

During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a

Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity

b

Gift, grant, or capital contribution to related organization(s)

c

Gift, grant, or capital contribution from related organization(s)

d

Loans or loan guarantees to or for related organization(s)

e

Loans or loan guarantees by related organization(s)

f

Dividends from related organization(s)

g

Sale of assets to related organization(s)

h

Purchase of assets from related organization(s)

i

Exchange of assets with related organization(s)

j

Lease of facilities, equipment, or other assets to related organization(s)

k

Lease of facilities, equipment, or other assets from related organization(s)

l

Performance of services or membership or fundraising solicitations for related organization(s)

m

Performance of services or membership or fundraising solicitations by related organization(s)

n

Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o

Sharing of paid employees with related organization(s)

p

Reimbursement paid to related organization(s) for expenses

q

Reimbursement paid by related organization(s) for expenses

r

Other transfer of cash or property to related organization(s)

s

Other transfer of cash or property from related organization(s)

Yes

No

1a

Yes

1b

No

1c

No

1d

No

1e

No

1f

No

1g

No

1h

No

1i

No

1j

No

1k

Yes

1l

No

1m

No

1n

No

1o

No

1p

No

1q

No

1r

No

1s

No

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) SEE PART VII SUPPLEMENTAL INFORMATION FOR DETAILS			

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

[illegible]

Part VII

Supplemental Information

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

Return Reference	Explanation
PART V, LINE 2, RELATED ORGANIZATION TRANSACTION DETAILS	THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF METROPOLITAN LOS ANGELES ("YMCA") EXECUTED A NEW MARKETS TAX CREDIT TRANSACTION IN 2012 UNDER THE REQUIRED STRUCTURE OF THE TRANSACTION, A SPECIAL PURPOSE ENTITY WAS CREATED, ENTITLED ANDERSON MUNGER YMCA, INC ("AMY") AMY HAS RECEIVED A DETERMINATION LETTER FROM THE INTERNAL REVENUE SERVICE AS A SUPPORTING ORGANIZATION AND IS A CONTROLLED ENTITY FOR REPORTING PURPOSES ITS OPERATIONS ARE INCLUDED IN THE CONSOLIDATED REPORTING OF THE YMCA PURSUANT TO THE TERMS OF THE TRANSACTION, THE YMCA ISSUED A LOAN AND ALSO PROVIDED CAPITAL OF APPROXIMATELY \$1 1 MILLION AMY PURCHASED LAND FROM THE YMCA AND CONCURRENTLY EXECUTED A LEASEBACK TO THE YMCA

Additional Data

Software ID: 13000248

Software Version: 2013v3.1

EIN: 95-1644052

Name: YOUNG MEN'S CHRISTIAN ASSOCIATION OF METROPOLITAN LOS ANGELES

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b) (13) controlled entity?	
								Yes	No
CHARITABLE REMAINDER TRUST #1	CRUT	CA	YMCA METRO LA	TRUST		17,604	27 %		
CHARITABLE REMAINDER TRUST #2	CRUT	CA	YMCA METRO LA	TRUST		9,930	3 %		
CHARITABLE REMAINDER TRUST #3	CRUT	CA	YMCA METRO LA	TRUST		1,325	2 %		
CHARITABLE REMAINDER TRUST #4	CRUT	CA	YMCA METRO LA	TRUST		15,441	52 %		
CHARITABLE REMAINDER TRUST #5	CRUT	CA	YMCA METRO LA	TRUST		73,966	42 %		
CHARITABLE REMAINDER TRUST #6	CRUT	CA	YMCA METRO LA	TRUST		125,112	78 %		
CHARITABLE REMAINDER TRUST #7	CRUT	CA	YMCA METRO LA	TRUST		33,564	62 %		
CHARITABLE REMAINDER TRUST #8	CRUT	CA	YMCA METRO LA	TRUST		43,921	39 %		
CHARITABLE REMAINDER TRUST #9	CRUT	CA	YMCA METRO LA	TRUST		38,899	42 %		
CHARITABLE REMAINDER TRUST #10	CRUT	CA	YMCA METRO LA	TRUST		2,929	33 %		
CHARITABLE REMAINDER TRUST #11	CRUT	CA	YMCA METRO LA	TRUST		51,961	46 %		
CHARITABLE REMAINDER TRUST #12	CRUT	CA	YMCA METRO LA	TRUST		38,126	62 %		
CHARITABLE REMAINDER TRUST #13	CRUT	CA	YMCA METRO LA	TRUST		114,969	32 %		
CHARITABLE REMAINDER TRUST #14	CRUT	CA	YMCA METRO LA	TRUST		5,365	40 %		
CHARITABLE REMAINDER TRUST #15	CRUT	CA	YMCA METRO LA	TRUST		2,227	16 %		

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
CHARITABLE REMAINDER TRUST #16	CRUT	CA	YMCA METRO LA	TRUST		527	70 %		
CHARITABLE REMAINDER TRUST #17	CRUT	CA	YMCA METRO LA	TRUST		31,525	44 %		
CHARITABLE REMAINDER TRUST #18	CRUT	CA	YMCA METRO LA	TRUST		28,739	40 %		
CHARITABLE REMAINDER TRUST #19	CRUT	CA	YMCA METRO LA	TRUST		3,191	12 %		
CHARITABLE REMAINDER TRUST #20	CRUT	CA	YMCA METRO LA	TRUST		2,467	6 %		
CHARITABLE REMAINDER TRUST #21	CRUT	CA	YMCA METRO LA	TRUST		2,860	8 %		
CHARITABLE REMAINDER TRUST #22	CRUT	CA	YMCA METRO LA	TRUST		34,821	20 %		
CHARITABLE REMAINDER TRUST #23	CRUT	CA	YMCA METRO LA	TRUST		20,449	55 %		
CHARITABLE REMAINDER TRUST #24	CRUT	CA	YMCA METRO LA	TRUST		33,955	93 %		
POOLED INCOME FUND	POOLED INC FD	CA	YMCA METRO LA	TRUST		2,034	73 %		