Form **990**

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.

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

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2019 calendar year, or tax year beginning 01-01-2019 , and ending 12-31-2019

B Check if applicable:
☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization
YOUNG MEN'S CHRISTIAN ASSOCIATION OF WENATCHEE

Doing business as
Wenatchee Valley YMCA

Number and street (or P.O. box if mail is not delivered to street address) | Room/suite
217 Orondo Ave

City or town, state or province, country, and ZIP or foreign postal code
Wenatchee, WA 98801

D Employer identification number
91-0578224

E Telephone number
(509) 662-2109

G Gross receipts $ 3,826,850

F Name and address of principal officer:
Dorry Foster
217 Orondo Ave
Wenatchee, WA 98801

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.WENYMCA.ORG

K Form of organization: ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 1910

M State of legal domicile: WA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities:
The Wenatchee Valley YMCA strengthens the foundations of the community. With a commitment to Youth Development, Healthy Living, and Social Responsibility, the Y works to provide every individual with access to the essentials needed to learn, grow, and thrive. The Y is dedicated to building healthy, confident, connected, and secure children, adults, families and communities.

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3	Number of voting members of the governing body (Part VI, line 1a)	3	29
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	29
5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	219
6	Total number of volunteers (estimate if necessary)	6	450
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 39	7b	0

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	642,380	569,670
	9	Program service revenue (Part VIII, line 2g)	2,399,048	2,903,948
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	48,946	-1,301
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	30,351	24,559
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,120,725	3,496,876
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	186,930	169,463
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	1,807,196	2,175,843
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶63,155		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	815,505	913,829
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	2,809,631	3,259,135
	19	Revenue less expenses. Subtract line 18 from line 12	311,094	237,741
Net Assets or Fund Balances			Beginning of Current Year	End of Year
	20	Total assets (Part X, line 16)	4,245,575	4,420,486
	21	Total liabilities (Part X, line 26)	273,956	112,344
	22	Net assets or fund balances. Subtract line 21 from line 20	3,971,619	4,308,142

Part II Signature Block

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

Sign Here

Signature of officer — Date: 2020-11-13

Dorry Foster Chief Executive Officer
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☑ if self-employed	PTIN
		2017-09-01		P01301652

Firm's name ▶ Goetz Bailey & Yale PS — Firm's EIN ▶ 91-1874918

Firm's address ▶ 159 South Worthen Street Suite 100
Wenatchee, WA 98801 — Phone no. (509) 662-9691

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

Part III **Statement 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 mission of the Wenatchee Valley YMCA is to strengthen youth, families, and communities by promoting Christian principles and putting them into practice through leadership and programs that build healthy spirit, mind, and body for all.

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

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

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

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

4 Describe the 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 $ 1,164,368 including grants of $ 37,156) (Revenue $ 1,301,605)

See Additional Data

4b (Code:) (Expenses $ 1,057,265 including grants of $ 45,178) (Revenue $ 1,139,118)

See Additional Data

4c (Code:) (Expenses $ 552,064 including grants of $ 87,129) (Revenue $ 463,225)

See Additional Data

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

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

4e **Total program service expenses ▶** 2,773,697

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		No
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		No
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		No
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		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a	Yes	
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		No
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		No
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		No
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		No
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		No
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		
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21		No

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a*	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L,* Part 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? *If "Yes," complete Schedule L,* Part I	25b		No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part II*	26		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? *If "Yes," complete Schedule L,*Part III	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, key employee, creator or founder, or substantial contributor? *If "Yes," complete Schedule L, Part IV*	28a	Yes	
b	A family member of any individual described in line 28a? *If "Yes," complete Schedule L, Part IV*	28b		No
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? *If "Yes," complete Schedule L, Part IV*	28c	Yes	
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		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? *If "Yes," complete Schedule R, Part I*	33		No
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b		
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	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? *If "Yes," complete Schedule R, Part VI*	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O.	38	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	12			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	Yes	

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

				Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return . . . **2a**	219			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		**2b**	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**		No
b	If "Yes," enter the name of the foreign country: ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . .		**5a**		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**		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		**7b**		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . .		**7c**		
d	If "Yes," indicate the number of Forms 8282 filed during the year **7d**				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		**7e**		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . .		**7f**		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? . . .		**7g**		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? . . .		**7h**		
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? . . .		**8**		
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the sponsoring organization make any taxable distributions under section 4966? . . .		**9a**		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . .		**9b**		
10	**Section 501(c)(7) organizations.** Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12 . . . **10a**				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities **10b**				
11	**Section 501(c)(12) organizations.** Enter:				
a	Gross income from members or shareholders . . . **11a**				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) . . . **11b**				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?		**12a**		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year. **12b**				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state? . . . **Note.** See the instructions for additional information the organization must report on Schedule O.		**13a**		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans **13b**				
c	Enter the amount of reserves on hand . . . **13c**				
14a	Did the organization receive any payments for indoor tanning services during the tax year? . . .		**14a**		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O* . .		**14b**		
15	Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year? . . . If "Yes," see instructions and file Form 4720, Schedule N.		**15**		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? . . If "Yes," complete Form 4720, Schedule O.		**16**		

Part VI **Governance, Management, and Disclosure** *For each "Yes" response to lines 2 through 7b below, and for a "No" response to 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.	1a 29			
b	Enter the number of voting members included in line 1a, above, who are independent	1b 29			
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	Yes	
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	Yes	
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	Yes	
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	Yes	
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		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
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		No
	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 ▶ WA

18 Section 6104 requires an organization to make its Form 1023 (or 1024-A 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.

☑ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)

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

20 State the name, address, and telephone number of the person who possesses the organization's books and records:
▶Dorry Foster 217 ORONDO WENATCHEE, WA 98801 (509) 662-2109

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

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

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

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

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(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
See Additional Data Table										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(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
See Additional Data Table										

	(D)	(E)	(F)
1b Sub-Total . . . . ▶			
c Total from continuation sheets to Part VII, Section A . . . . ▶			
d Total (add lines 1b and 1c) . . . . ▶	104,315	0	11,300

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 1

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

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 ▶ 0

Part VIII Statement of Revenue

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

Contributions, Gifts, Grants and Other Similar Amounts

Line	Description	Box	Amount	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
1a	Federated campaigns	1a	785				
b	Membership dues	1b	0				
c	Fundraising events	1c	0				
d	Related organizations	1d	0				
e	Government grants (contributions)	1e	61,350				
f	All other contributions, gifts, grants, and similar amounts not included above	1f	507,535				
g	Noncash contributions included in lines 1a - 1f:$	1g	0				
h	**Total.** Add lines 1a-1f . . . . ▶			569,670			

Program Service Revenue

Line	Description	Business Code	(A)	(B)	(C)	(D)
2a	Membership Revenue	813410	1,286,053	1,286,053		
b	Childcare Revenue -- School Age	813410	917,599	917,599		
c	Resident Camp Revenue	813410	463,226	463,226		
d	Day Camp Revenue	813410	62,815	62,815		
e	Childcare Revenue -- Infant/Toddler/Preschool	813410	0	0		
f	All other program service revenue.		174,255	174,255	0	0
g	**Total.** Add lines 2a–2f. . . . . ▶		2,903,948			

Other Revenue

Line	Description	(i)	(ii)	(A)	(B)	(C)	(D)
3	Investment income (including dividends, interest, and other similar amounts) . . . . . . ▶			23,912	0	0	23,912
4	Income from investment of tax-exempt bond proceeds ▶			0	0	0	0
5	Royalties . . . . ▶			0	0	0	0
		(i) Real	(ii) Personal				
6a	Gross rents	14,283	0				
b	Less: rental expenses	0	0				
c	Rental income or (loss)	14,283	0				
d	Net rental income or (loss) . . . . ▶			14,283	0	0	14,283
		(i) Securities	(ii) Other				
7a	Gross amount from sales of assets other than inventory	301,747	0				
b	Less: cost or other basis and sales expenses	286,932	40,028				
c	Gain or (loss)	14,815	-40,028				
d	Net gain or (loss) . . . . ▶			-25,213	0	0	-25,213
8a	Gross income from fundraising events (not including $ ______ of contributions reported on line 1c). See Part IV, line 18	8a	6,507				
b	Less: direct expenses . . .	8b	3,014				
c	Net income or (loss) from fundraising events . . ▶			3,493		0	3,493
9a	Gross income from gaming activities. See Part IV, line 19 . . .	9a	0				
b	Less: direct expenses . . .	9b	0				
c	Net income or (loss) from gaming activities . . ▶			0	0	0	0
10a	Gross sales of inventory, less returns and allowances . .	10a	0				
b	Less: cost of goods sold . .	10b	0				
c	Net income or (loss) from sales of inventory . . ▶			0	0	0	0

Line	Miscellaneous Revenue	Business Code	(A)	(B)	(C)	(D)
11a	MISCELLANEOUS	813410	6,783	0	0	6,783
b						
c						
d	All other revenue		0	0	0	0
e	**Total.** Add lines 11a–11d . . . . ▶		6,783			
12	**Total revenue.** See instructions . . . . . ▶		3,496,876	2,903,948	0	23,258

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	**(A)** Total expenses	**(B)** Program service expenses	**(C)** Management and general expenses	**(D)** Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	0	0		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	169,463	169,463		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. 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	119,433	41,802	59,717	17,914
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	0
7 Other salaries and wages	1,700,135	1,526,599	142,155	31,381
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	42,146	30,836	9,322	1,988
9 Other employee benefits	136,768	116,620	18,160	1,988
10 Payroll taxes	177,361	148,315	24,939	4,107
11 Fees for services (non-employees):				
a Management	0	0	0	0
b Legal	0	0	0	0
c Accounting	17,975	0	17,975	0
d Lobbying	0	0	0	0
e Professional fundraising services. See Part IV, line 17	0			0
f Investment management fees	9,955	0	9,955	0
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	73,113	70,280	2,549	284
12 Advertising and promotion	11,542	4,635	2,999	3,908
13 Office expenses	65,710	45,928	19,782	0
14 Information technology	53,691	0	53,691	0
15 Royalties	0	0	0	0
16 Occupancy	194,485	179,481	15,004	0
17 Travel	12,727	11,541	1,186	0
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
19 Conferences, conventions, and meetings	22,177	11,518	10,659	0
20 Interest	0	0	0	0
21 Payments to affiliates	53,243	53,243	0	0
22 Depreciation, depletion, and amortization	110,017	110,017	0	0
23 Insurance	11,756	8,898	2,858	0
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 PROGRAM SUPPLIES	168,015	163,265	4,750	0
b EQUIPMENT, REPAIRS, AND MAINTENANCE	74,264	53,883	20,381	0
c OTHER	10,725	6,109	3,315	1,301
d Dues and subscriptions	3,549	663	2,886	0
e All other expenses	20,885	20,601	0	284
25 Total functional expenses. Add lines 1 through 24e	3,259,135	2,773,697	422,283	63,155
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720).	0	0	0	0

Part X **Balance Sheet**

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

Section	Line	Description			(A) Beginning of year		(B) End of year
Assets	1	Cash–non-interest-bearing			511,522	1	645,791
	2	Savings and temporary cash investments			0	2	0
	3	Pledges and grants receivable, net			15,108	3	0
	4	Accounts receivable, net			28,416	4	25,448
	5	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			0	5	0
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)			0	6	0
	7	Notes and loans receivable, net			0	7	0
	8	Inventories for sale or use			0	8	0
	9	Prepaid expenses and deferred charges			10,412	9	14,643
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	5,531,088			
	b	Less: accumulated depreciation	10b	2,613,206	2,856,775	10c	2,917,882
	11	Investments—publicly traded securities			716,109	11	812,615
	12	Investments—other securities. See Part IV, line 11			0	12	
	13	Investments—program-related. See Part IV, line 11			0	13	
	14	Intangible assets			0	14	0
	15	Other assets. See Part IV, line 11			107,233	15	4,107
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)			4,245,575	16	4,420,486
Liabilities	17	Accounts payable and accrued expenses			87,638	17	77,511
	18	Grants payable			0	18	0
	19	Deferred revenue			38,026	19	34,833
	20	Tax-exempt bond liabilities			0	20	0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			0	21	0
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			0	22	0
	23	Secured mortgages and notes payable to unrelated third parties			0	23	0
	24	Unsecured notes and loans payable to unrelated third parties			0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D			148,292	25	0
	26	**Total liabilities.** Add lines 17 through 25			273,956	26	112,344
Net Assets or Fund Balances		**Organizations that follow FASB ASC 958, check here ▶ ☐ and complete lines 27, 28, 32, and 33.**					
	27	Net assets without donor restrictions			3,679,653	27	4,131,066
	28	Net assets with donor restrictions			291,966	28	177,076
		Organizations that do not follow FASB ASC 958, check here ▶ ☐ and complete lines 29 through 33.					
	29	Capital stock or trust principal, or current funds			0	29	0
	30	Paid-in or capital surplus, or land, building or equipment fund			0	30	0
	31	Retained earnings, endowment, accumulated income, or other funds			0	31	0
	32	Total net assets or fund balances			3,971,619	32	4,308,142
	33	Total liabilities and net assets/fund balances			4,245,575	33	4,420,486

Part XI **Reconcilliation 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	3,496,876
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,259,135
3	Revenue less expenses. Subtract line 2 from line 1	3	237,741
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,971,619
5	Net unrealized gains (losses) on investments	5	98,782
6	Donated services and use of facilities	6	0
7	Investment expenses	7	0
8	Prior period adjustments	8	0
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	4,308,142

Part XII **Financial Statements and Reporting**

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

			Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☑ Accrual ☐ Other ____________ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
	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: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
	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: ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		

Additional Data

Software ID: 19010655
Software Version: 2019v5.0
EIN: 91-0578224
Name: YOUNG MEN'S CHRISTIAN ASSOCIATION OF WENATCHEE

Form 990 (2019)

Form 990, Part III, Line 4a:

Health Enhancement Programs: YMCA Healthy initiatives stress the value of prevention through sound physical activities and healthy lifestyle habits. A positive environment and supportive staff build a spirit of community that encourages participants who need consistent support to reach their wellness goals. A reduced fee membership is available to individuals whose annual income is less than $25,000 and to households whose annual income is less than $40,000. The availability of affordable programs, facilities, and equipment contributes to the health of the community. YMCA Healthy Living Program offerings including Coach Connections, Group Exercise, Personal Training, Cancer Survivors Rehabilitation Program, Water Exercise, Strength and Functional Fitness Training, Cardiovascular Training, Recreational Swim, Basketball, Racquetball, Family Activities, Tai Chi, Yoga, and Group Cycling. 2019 Participants totaled 2,299.

Form 990, Part III, Line 4b:

YOUTH DEVELOPMENT: YMCA YOUTH AND TEEN PROGRAMS PROVIDE QUALITY, ENRICHMENT ACTIVITIES LED BY APPROPRIATE ROLE MODELS AND QUALIFIED STAFF IN POSITIVE ENVIRONMENTS FOR CHILDREN WHO MIGHT OTHERWISE BE UNSUPERVISED. PARTICIPANTS DEVELOP SELF ESTEEM AND GOOD VALUES LIKE CARING, HONESTY, RESPECT, AND RESPONSIBILITY. THE YMCA YOUTH AND TEEN CENTER IS OPEN 25 HOURS PER WEEK AND INCLUDES GAME ROOMS, STEM ACTIVITY ROOM, AND KITCHEN. SWIMMING LESSONS, TEEN STRENGTH TRAINING, YOUTH BASKETBALL, YOUTH SOCCER, AND RECREATION SWIMS ALLOW CHILDREN TO DEVELOP NEW SKILLS AND PROVIDE POSITIVE OUTLETS FOR DEVELOPMENT. YMCA STUDENT CARE, SUMMER DAY CAMP, TEEN AFTER SCHOOL ENRICHMENT, OUT OF BOUNDS, EXTREME TEENS, ALL SUPPORT HEALTHY FAMILIES BY PROVIDING OUT-OF-SCHOOL CARE FOR CHILDREN OF WORKING PARENTS. EARLY LEARNING PROVIDES LICENSED CARE TO INFANTS AND TODDLERS. NO CHILD IS EVER DENIED PARTICIPATION BECAUSE OF INABILITY TO PAY. YMCA YOUTH DEVELOPMENT PROGRAMS SERVED 4,100 YOUTH IN 2019.

Form 990, Part III, Line 4c:

CAMPING: LAKE WENATCHEE YMCA CAMPING PROGRAMS PROMOTE SPIRITUAL AWARENESS, ENVIRONMENTAL EDUCATION, PHYSICAL WELL-BEING AND SOCIAL GROWTH. YMCA CAMPING PROGRAMS EMPHASIZE CHARACTER DEVELOPMENT, TEACHING NEW SKILLS, AND ARE DESIGNED TO BUILD SELF ESTEEM IN CHILDREN AND TEENS. FINANCIAL ASSISTANCE IS AVAILABLE TO CHILDREN UNABLE TO AFFORD THE REGULAR FEES. THE YMCA ALSO PROVIDES OUTDOOR EDUCATION AND RECREATION FOR A NUMBER OF SCHOOLS AND NOT-FOR-PROFIT ORGANIZATIONS. LAKE WENATCHEE YMCA CAMPING PROGRAMS SERVED NEARLY 528 CHILDREN AND 23 FAMILIES IN 2019.

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: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(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
Don Myers Director	1.0	X		X				0	0	0
Jason Underwood Past President	1.0	X		X				0	0	0
Jeff Rounds Secretary	1.0	X		X				0	0	0
Kathy Emerick Chief Volunteer Officer	1.0	X		X				0	0	0
Rana Wilcox Director	1.0	X		X				0	0	0
Sarah Bumps Director	1.0	X		X				0	0	0
Sean Patton Treasurer	1.0	X		X				0	0	0
Agustin Reyes Director	1.0	X						0	0	0
Alicia Nakata Director	1.0	X						0	0	0
Art Ruckman Vice Chair	1.0	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			
Carolyn Magee Director	1.0	X						0	0	0
Cindy Ulrich Director	1.0	X						0	0	0
Claudia De Robles Director	1.0	X						0	0	0
David Wood Director	1.0	X						0	0	0
Ernest Radillo Trustee	1.0	X						0	0	0
Julie Norton Director	1.0	X						0	0	0
Katie Kavanaugh Pauly Trustee	1.0	X						0	0	0
Kenzie Conley Director	1.0	X						0	0	0
Krista Beck Trustee	1.0	X						0	0	0
Krystal Frost Director	1.0	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			
Rob Johnson Trustee	1.0	X						0	0	0
Ron Skagen Trustee	1.0	X						0	0	0
Roxanne Cates Director	1.0	X						0	0	0
Rufus Woods Trustee Chair	1.0	X						0	0	0
Steve Kolk Director	1.0	X						0	0	0
Steve Lee Trustee	1.0	X						0	0	0
Steve Robinson Director	1.0	X						0	0	0
Tom Merrill Director	1.0	X						0	0	0
Dorry Foster Chief Executive Officer	40.0					X		104,315	0	11,300

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

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
YOUNG MEN'S CHRISTIAN ASSOCIATION OF WENATCHEE

Employer identification number
91-0578224

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

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

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

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)

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

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

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

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

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

8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)

9 ☐ An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university:

10 ☑ An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

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

12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**

b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations . . . .

g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document? Yes	No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
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 failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public support.** Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 **Total support.** Add lines 7 through 10						

12 Gross receipts from related activities, etc. (see instructions) **12**

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)) **14**

15 Public support percentage for 2018 Schedule A, Part II, line 14 . . . . **15**

16a **33 1/3% support test—2019.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . ▶ ☐

b **33 1/3% support test—2018.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . ▶ ☐

17a **10%-facts-and-circumstances test—2019.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . ▶ ☐

b **10%-facts-and-circumstances test—2018.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . ▶ ☐

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 III **Support Schedule for Organizations Described in Section 509(a)(2)**
(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .	630,647	624,389	479,980	583,130	569,670	2,887,816
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	1,725,274	1,810,744	1,876,832	2,458,298	2,903,948	10,775,096
3 Gross receipts from activities that are not an unrelated trade or business under section 513				0		0
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . .				0		0
5 The value of services or facilities furnished by a governmental unit to the organization without charge				0		0
6 **Total.** Add lines 1 through 5	2,355,921	2,435,133	2,356,812	3,041,428	3,473,618	13,662,912
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	0	0	0	0	0	0
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year.	0	0	0	0	0	0
c Add lines 7a and 7b. .	0	0	0	0	0	0
8 **Public support.** (Subtract line 7c from line 6.)						13,662,912

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9 Amounts from line 6. . .	2,355,921	2,435,133	2,356,812	3,041,428	3,473,618	13,662,912
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . .	13,764	60,877	111,117	48,947	-1,301	233,404
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						0
c Add lines 10a and 10b.	13,764	60,877	111,117	48,947	-1,301	233,404
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						0
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . .	32,296	13,313	15,606	30,351	24,559	116,125
13 **Total support.** (Add lines 9, 10c, 11, and 12.). .	2,401,981	2,509,323	2,483,535	3,120,726	3,496,876	14,012,441

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

Section C. Computation of Public Support Percentage

15	Public support percentage for 2019 (line 8, column (f) divided by line 13, column (f))	15	97.51 %
16	Public support percentage from 2018 Schedule A, Part III, line 15	16	97.11 %

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2019** (line 10c, column (f) divided by line 13, column (f))	17	1.67 %
18	Investment income percentage from **2018** Schedule A, Part III, line 17	18	2.01 %

19a **331/3% support tests—2019.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . ▶ ☑

b **33 1/3% support tests—2018.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . ▶ ☐

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 **Supporting Organizations**

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

Section A. All Supporting Organizations

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

Part IV **Supporting Organizations** (continued)

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year **(see instructions)**:

a ☐ The organization satisfied the Activities Test. Complete **line 2** below.

b ☐ The organization is the parent of each of its supported organizations. Complete **line 3** below.

c ☐ The organization supported a governmental entity. Describe in **Part VI** how you supported a government entity (see instructions)

			Yes	No
2	Activities Test. **Answer (a) and (b) below.**			
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in* ***Part VI identify those supported organizations and explain*** *how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*	**2a**		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in* ***Part VI*** *the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*	**2b**		
3	Parent of Supported Organizations. **Answer (a) and (b) below.**			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in* ***Part VI.***	**3a**		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? *If "Yes," describe in* ***Part VI.*** *the role played by the organization in this regard.*	**3b**		

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

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

	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	**Adjusted Net Income** (subtract lines 5, 6 and 7 from line 4)	8		

	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1		
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	**Total** (add lines 1a, 1b, and 1c)	1d		
e	**Discount** claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	**Minimum Asset Amount** (add line 7 to line 6)	8		

	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	**Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		

7 ☐ Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

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

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

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

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

Facts And Circumstances Test

990 Schedule A, Supplemental Information

Return Reference	Explanation
Schedule A, Part I, Line 6 Part I Line 6	450 VOLUNTEERS SHARE THEIR TIME (3,568 HRS) AND TALENTS TO ENHANCE THE QUALITY AND STRENGT H OF YMCA PROGRAMS IN 2019, INCLUDING 63 CAMPAIGN VOLUNTEERS THAT RAISE FUNDS ANNUALLY FOR THE YMCA'S PARTNERS WITH YOUTH CAMPAIGN TO PROVIDE YMCA YOUTH SCHOLARSHIPS. YMCA GOVERNAN CE VOLUNTEERS DEVELOP POLICIES AND SHAPE THE FUTURE OF THE WENATCHEE VALLEY YMCA BY SERVIN G ON THE BOARD OF DIRECTORS AND TRUSTEES. THE LAKE WENATCHEE YMCA CAMP RELIES HEAVILY ON V OLUNTEER NURSES THROUGHOUT THE SUMMER AND WORK WEEKENDS RELY ON DOZENS OF DEDICATED VOLUNT EERS FOR SEASONAL PROJECTS TO BE COMPLETED.

990 Schedule A, Supplemental Information

Return Reference	Explanation
Schedule A, Part III, Line 12 Other Income	DESCRIPTION - RENTAL INCOME, COLUMN A - 11717.0, COLUMN B - 10429.0, COLUMN C - 11972.0, COLUMN D - 13461.0, COLUMN E - 14283.0, COLUMN F - 61862.0; DESCRIPTION - OTHER INCOME, COLUMN A - 20579.0, COLUMN B - 2884.0, COLUMN C - 3634.0, COLUMN D - 16890.0, COLUMN E - 10276.0, COLUMN F - 54263.0;

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
▶ Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
YOUNG MEN'S CHRISTIAN ASSOCIATION OF WENATCHEE

Employer identification number
91-0578224

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

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

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ 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? ☐ Yes ☐ No

Part II Conservation Easements.

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

☐ 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 7/25/06, and not on a historic structure listed in the National Register	2d	

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

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

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

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ ______

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ $ ______

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ 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" on 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) Revenue included on Form 990, Part VIII, line 1 ▶ $ ______

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

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

a Revenue included on Form 990, Part VIII, line 1 ▶ $ ______

b Assets included in Form 990, Part X ▶ $ ______

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

3 Using the organization's acquisition, accession, and other records, check any of the following that 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" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

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

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

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

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . . ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII . . . . ☐

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	543,786	593,668	536,385	525,513	553,775
b Contributions	600	350	4,916	3,226	2,860
c Net investment earnings, gains, and losses	90,068	-27,652	74,141	35,798	849
d Grants or scholarships		0	0	0	0
e Other expenditures for facilities and programs	22,596	22,580	21,774	21,752	25,361
f Administrative expenses	0	0	0	6,400	6,610
g End of year balance	611,858	543,786	593,668	536,385	525,513

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

a Board designated or quasi-endowment ▶ 71 %

b Permanent endowment ▶ 29 %

c Temporarily restricted endowment ▶ 0 %

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

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

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

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

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	0	1,515,958		1,515,958
b Buildings	0	2,697,742	1,660,090	1,037,652
c Leasehold improvements	0	514,514	355,579	158,935
d Equipment	0	802,874	597,537	205,337
e Other	0	0	0	0
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				2,917,882

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

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

Part VIII Investments—Program Related.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

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

Part IX Other Assets.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

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

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

1. **(a)** Description of liability	**(b)** Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 25.)* ▶	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII ☐

Part XI **Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	3,585,703
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a	98,782		
b	Donated services and use of facilities	2b	0		
c	Recoveries of prior year grants	2c	0		
d	Other (Describe in Part XIII.)	2d	0		
e	Add lines **2a** through **2d**			2e	98,782
3	Subtract line **2e** from line **1**			3	3,486,921
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	9,955		
b	Other (Describe in Part XIII.)	4b	0		
c	Add lines **4a** and **4b**			4c	9,955
5	Total revenue. Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12.)			5	3,496,876

Part XII **Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	3,249,180
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a	0		
b	Prior year adjustments	2b	0		
c	Other losses	2c	0		
d	Other (Describe in Part XIII.)	2d	0		
e	Add lines **2a** through **2d**			2e	0
3	Subtract line **2e** from line **1**			3	3,249,180
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	9,955		
b	Other (Describe in Part XIII.)	4b	0		
c	Add lines **4a** and **4b**			4c	9,955
5	Total expenses. Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18.)			5	3,259,135

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
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID: 19010655
Software Version: 2019v5.0
EIN: 91-0578224
Name: YOUNG MEN'S CHRISTIAN ASSOCIATION OF WENATCHEE

Supplemental Information

Return Reference	Explanation
Schedule D, Part V, Line 4 Intended uses of endowment funds	IN ACCORDANCE WITH THE WISHES OF DONORS, INCOME FROM ENDOWMENT FUNDS IS USED TO FURTHER TH E YMCA'S MISSION. 2019 POLICY ALLOWS UP TO 4% OF THE VALUE OF ENDOWMENT FUNDS TO BE USED.

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

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," on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Go to *www.irs.gov/Form990* for the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
YOUNG MEN'S CHRISTIAN ASSOCIATION OF WENATCHEE

Employer identification number
91-0578224

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 Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on 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 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 noncash assistance	**(h)** Purpose of grant or assistance
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

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

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

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on 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 noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) YOUTH CAMPING SCHOLARSHIPS	192		87,129	Published Price	Fee Credit
(2) YOUTH MEMBER SCHOLARSHIPS	304		37,565	Published Price	Fee Credit
(3) Youth Program Scholarships	264		44,769	Published Price	Fee Credit
(3)					
(4)					
(5)					
(6)					
(7)					

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.	The Wenatchee Valley YMCA provides membership and program scholarships to youth whose parent indicates they are unable to afford the regular fees. Each applicant is required to complete a brief form that must be signed by a parent certifying they are unable to afford the regular fees and to identify their household income. When an application is received, the parent is notified that their application has been approved and the amount of assistance they have been awarded. The assistance is in the form of a credit that is applied to the appropriate program or membership fee upon registration. The number of recipients listed in Part III column (b) is the number of scholarships used and is a duplicated count as recipients may have received multiple scholarships. The total value of scholarships redeemed is listed in Part III column c. We have listed this value based on the amount credited to the published prices charged, but it should be noted that YMCA youth membership and programs fees do not cover the full cost of youth membership and program services. Therefore, the total cost of services provided by scholarships would be considerably higher.

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

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
YOUNG MEN'S CHRISTIAN ASSOCIATION OF WENATCHEE

Employer identification number
91-0578224

Part I **Excess Benefit Transactions** (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only).
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

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

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

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

Part II **Loans to and/or From Interested Persons.**
Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

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

Part III **Grants or Assistance Benefiting Interested Persons.**
Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

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

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

Part V **Supplemental Information**
Provide additional information for responses to questions on Schedule L (see instructions).

Return Reference	Explanation
Schedule L, Part II Explanation	Claudia De Robles is a Branch Manager for Cashmere Valley Bank and a member of the YMCA Board of Directors. The YMCA had a loan with a 12/31/09 balance of $713,000 with Cashmere Valley Bank and made regular loan payments totaling $101,177.45 in 2010, until the loan was refinanced in December 2010. The new loan for $650,000 was secured from Cashmere Valley Bank in December of 2010 and the loan payments made from the YMCA totaled $60,344.88 in 2011, $120,000 in 2012, $80,344.88 in 2013, $75,344.88 in 2014 and 2015, $60,600 in 2016, $45,600 in 2017 and $108,930 in 2018. The loan was paid off in 2019. Total debt service for 2019 to CVB is 153,336. The loan terms were modified by Cashmere Valley Bank in December 2014. The original loan decision was made by the YMCA Finance Committee and Board of Directors before Claudia De Robles was on the Board of Directors. Loan terms from three banks were considered and the names of the banks were withheld during the discussion and decision process. The YMCA has several bank accounts with Cashmere Valley Bank from which a standard interest is paid to the YMCA. The selection process for these accounts was made by the YMCA Finance Committee based on interest rates and bank locations. Claudia De Robles was not on the YMCA Board of Directors during the discussions that led to these decisions nor was she a part of these discussions. The YMCA purchases ACH and Credit Card services from Cashmere Valley Bank. The decision to purchase these services was made by the YMCA Executive Director based on bank location and convenience of having all banking services handled by one bank. Claudia De Robles was not involved in the decision process. All interest rates and charges were based on current market rates. Not reportable (990 L part II)
Schedule L, Part IV Explanation	Jeff Rounds is a member and past president of the YMCA Board of Directors. Jeff Rounds is the owner of Libke Insurance Associates, an insurance broker for the YMCA. The YMCA purchased insurance services through Libke Insurance Associates in 2018 and 2019.
Schedule L, Part II Expanation	Steve Lee is a loan officer for Cashmere Valley Bank and a member of the YMCA Board of Directors. The YMCA had a loan with a 12/31/09 balance of $713,000 with Cashmere Valley Bank and made regular loan payments totaling $101,177.45 in 2010, until the loan was refinanced in December 2010. The new loan for $650,000 was secured from Cashmere Valley Bank in December of 2010 and the loan payments made from the YMCA totaled $60,344.88 in 2011, $120,000 in 2012, $80,344.88 in 2013, $75,344.88 in 2014 and 2015, $60,600 in 2016, $45,600 in 2017 and $108,930 in 2018. The loan was paid off in 2019 for a total of 153,336. The loan terms were modified by Cashmere Valley Bank in December 2014 after Steve Lee had left the Board of Directors. The original loan decision was made by the YMCA Finance Committee and Board of Directors before Steve Lee was on the Board of Directors. Loan terms from three banks were considered and the names of the banks were withheld during the discussion and decision process. The YMCA has several bank accounts with Cashmere Valley Bank from which a standard interest is paid to the YMCA. The selection process for these accounts was made by the YMCA Finance Committee based on interest rates and bank locations. Steve Lee was not on the YMCA Board of Directors during the discussions that led to these decisions nor was he a part of these discussions. The YMCA purchases ACH and Credit Card services from Cashmere Valley Bank. The decision to purchase these services was made by the YMCA Executive Director based on bank location and convenience of having all banking services handled by one bank. Steve Lee was not involved in the decision process. All interest rates and charges were based on current market rates. Not reportable (990 L Part II).
Schedule L, Part II Explanation	Rob Johnson works for D.A. Davidson. The YMCA holds investment accounts with D.A. Davidson as of 2019.

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

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
YOUNG MEN'S CHRISTIAN ASSOCIATION OF WENATCHEE

Employer identification number
91-0578224

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part I, Line 6 Explanation	450 VOLUNTEERS SHARE THEIR TIME (3,568 HRS) AND TALENTS TO ENHANCE THE QUALITY AND STRENGT H OF YMCA PROGRAMS IN 2019, INCLUDING 63 CAMPAIGN VOLUNTEERS THAT RAISE FUNDS ANNUALLY FOR THE YMCA'S PARTNERS WITH YOUTH CAMPAIGN TO PROVIDE YMCA YOUTH SCHOLARSHIPS. YMCA GOVERNAN CE VOLUNTEERS DEVELOP POLICIES AND SHAPE THE FUTURE OF THE WENATCHEE VALLEY YMCA BY SERVIN G ON THE BOARD OF DIRECTORS AND TRUSTEES. THE LAKE WENATCHEE YMCA CAMP RELIES HEAVILY ON V OLUNTEER NURSES THROUGHOUT THE SUMMER AND WORK WEEKENDS RELY ON DOZENS OF DEDICATED VOLUNT EERS FOR SEASONAL PROJECTS TO BE COMPLETED.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Part I Additional DBAs	WENATCHEE VALLEY YMCA

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part IV, Line 26 Part IV Line 26, 28C	Steve Lee is a loan officer for Cashmere Valley Bank and was a member of the YMCA Board of Directors from May 2010 through April 2014. The YMCA had a loan with a 12/31/09 balance o f $713,000 with Cashmere Valley Bank and made regular loan payments totaling $101,177.45 i n 2010, until the loan was refinanced in December 2010. The new loan for $650,000 was secu red from Cashmere Valley Bank in December of 2010 and regular loan payments totaling $60,3 44.88 were made by the YMCA in 2011; $120,000 in payments were made in 2012; $80,344.88 in payments were made in 2013; $75,344.88 in payments were made in 2014: and $75,344.88 in p ayments were made in 2015: and $45,600 in payments were made in 2016. : and $45,600 in 201 7 and 119,400 in 2018. Loan terms were modified by Cashmere Valley Bank in December of 201 4. The original loan decision was made by the YMCA Finance Committee and Board of Director s before Steve Lee was on the Board of Directors. Loan terms from three banks were conside red and the names of the banks were withheld during the discussion and decision process. S teve Lee was not present during the discussion and decision process. The YMCA has several bank accounts with Cashmere Valley Bank from which a standard interest is paid to the YMCA . The selection process for these accounts was made by the YMCA Finance Committee based on interest rates and bank locations. Steve Lee was not on the YMCA Board of Directors durin g the discussions that led to these decisions nor was he a part of these discussions. The YMCA purchases ACH and Credit Card services from Cashmere Valley Bank. The decision to pur chase these services was made by the YMCA Chief Executive Officer based on bank location a nd convenience of having all banking services handled by one bank. Steve Lee was not invol ved in the decision process. All interest rates and charges were based on current market r ates. The loan held at Cashmere Valley Bank was paid off during 2019.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part IV, Line 28c Part IV Line 28A, 28C	Jeff Rounds is a member of the YMCA Board of Directors. Jeff Rounds is the owner of Libke Insurance Associates, an insurance broker for the YMCA. The YMCA did purchase insurance se rvices through Libke Insurance Associates in 2019. The YMCA paid Redwoods Insurance compan y for auto, liability and property insurance services. The YMCA also purchases medical and dental insurance services through Libke Insurance Services, but makes payments of less th an $10,000 per month directly to the insurance carriers. Libke Insurance Services has been providing insurance services to the YMCA for more than twenty years.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 15b Explanation	The Chief Executive Officer of the Wenatchee Valley YMCA is an officer of the organization , but does not meet the definition of a key employee. No other Wenatchee Valley YMCA emplo yee meets the definitions of officer or key employee.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 2 Family/business relationships amongst interested persons	Claudia De Robles - Business relationship, Steve Lee - Business relationship, Jeff Rounds - Business relationship, Rob Johnson - Business relationship

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 6 Classes of members or stockholders	The Young Men's Christian Association of Wenatchee is a public charity open to all without regard to ability to pay. Members have the right to elect board members and must approve any changes to the Articles of Incorporation, but do not receive any distributions of inco me or assets from the organization.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 7a Members or stockholders electing members of governing body	The Young Men's Christian Association of Wenatchee is a public charity open to all without regard to ability to pay. Members have the right to elect board members and must approve any changes to the Articles of Incorporation, but do not receive any distributions of inco me or assets from the organization.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 7b Decisions requiring approval by members or stockholders	In accordance with the adopted by-laws of the Young Men's Christian Association of Wenatch ee, the sale of any land or buildings of the organization is subject to review by the Boar d of Trustees. If the Board of Trustees votes against any such sale, the Board of Director s may overturn the decision of the Board of Trustees only with a 75% vote at a regular or special meeting of the Board of Directors at which a quorum is present.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 11b Review of form 990 by governing body	An unredacted copy of the 990 Form is made available to all members of the Board of Direct ors prior to filing. Questions or concerns are reviewed by the Finance Committee and forwa rded to the Board of Directors.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 12c Conflict of interest policy	The Conflict of Interest Policy is reviewed at the first Board meeting of each Board year. Conflict of Interest Disclosure Questionnaires are distributed to all directors, trustees , and key employees at the beginning of each Board year. The results of returned questionn aires are compiled and reviewed by the Executive Committee whose members are responsible f or enforcement of the Conflict of Interest Policy.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 15a Process to establish compensation of top management official	The Board of Directors must annually approve the compensation or any change to the compens ation of the YMCA Chief Executive Officer. The Board of Directors delegates its authority to determine the compensation of the Chief Executive Officer to the Executive Committee. W hen considering the compensation of the Chief Executive Officer, the Executive Committee m eets without the Chief Executive Officer being present. Any other committee member who has a personal interest in the compensation of the Chief Executive Officer is also excluded f rom discussion and determination of the Chief Executive Officer's compensation. Before cha nging the compensation of the Chief Executive Officer, the Executive Committee determines that the compensation to be paid is reasonable. When determining whether or not the compen sation of the Chief Executive Officer is reasonable, the Executive Committee considers all elements of compensation, compensation of Chief Executive Officers of full-facility YMCAs in Eastern Washington State, the YMCA of the USA recommended salary range for Chief Execu tive Officers of YMCAs with budget sizes similar to the Wenatchee Valley YMCA, and committ ee members' knowledge of compensation trends in North Central Washington. The Executive Co mmittee process is documented in the committee minutes, in a letter to the Chief Executive Officer, and in a written report presented at the next regular meeting of the Wenatchee V alley YMCA Board of Directors. Documentation includes the date of compensation discussion, the compensation recommendation, the effective date of the action, committee members pres ent, description of comparability data, and the action that the approved compensation reco mmendation is reasonable.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 19 Required documents available to the public	The Wenatchee Valley YMCA makes copies of the following items available for public review upon request: * Articles of Incorporation. * By Laws. * Conflict of Interest Policy. * 501 (c)3 Determination Letter from the Internal Revenue Service. * Form 990 for each of the la st three fiscal years.* * YMCA Annual Reports for the last three years. The Wenatchee Vall ey did not have a copy of form 1023 in its possession on July 15, 1987 and is therefore no t required to make a copy available for public review. The Wenatchee Valley YMCA has inste ad opted to make a copy of its 501(c)3 determination letter available for public review. * Form 990 is reviewed by the YMCA Board of Trustees before being submitted to the Internal Revenue Service. Form 990 is added to the public disclosure documents at the same time it is submitted to the Internal Revenue Service. Two sets of public disclosure documents are available at the Wenatchee Valley YMCA, 217 Orondo, Wenatchee, Washington. One set is avai lable in the administrative offices and another set is in the office of the Chief Executiv e Officer. Public disclosure documents are also available for public inspection on the Wen atchee Valley YMCA web site www.wenymca.org.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VIII, Line 2f Other Program Service Revenue	Other Program Revenue - Total Revenue: 174255, Related or Exempt Function Revenue: 174255, Unrelated Business Revenue: , Revenue Excluded from Tax Under Sections 512, 513, or 514: ; Residence Revenue - Total Revenue: 0, Related or Exempt Function Revenue: 0, Unrelated B usiness Revenue: , Revenue Excluded from Tax Under Sections 512, 513, or 514: ;