

Return of Organization Exempt From Income Tax

2018

Open to Public Inspection

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

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

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

Department of the Treasury
Internal Revenue Service

A For the 2018 calendar year, or tax year beginning		, 2018, and ending		, 20		
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF MONROE MICHIGAN			D Employer identification number		
	Doing business as OF MONROE MICHIGAN			38-1508585		
	Number and street (or P.O. box if mail is not delivered to street address)		Room/suite		E Telephone number	
	1111 W EST ELM AVENUE				(734) 241-2606	
	City or town, state or province, country, and ZIP or foreign postal code			G Gross receipts \$		3,285,159
F Name and address of principal officer: MARK JOHNSON			H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
SAME AS C ABOVE			H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No			
			If "No," attach a list. (see instructions)			
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			H(c) Group exemption number ▶			
J Website: ▶ WWW.YMCAOFMONROE.ORG			L Year of formation: 1954		M State of legal domicile: MI	
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶						

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: <u>TO PUT CHRISTIAN PRINCIPLES INTO PRACTICE THROUGH PROGRAMS THAT BUILD A HEALTHY SPIRIT, MIND AND BODY FOR ALL.</u>		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	18
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	18
	5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)	5	145
	6	Total number of volunteers (estimate if necessary)	6	297
	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 38	7b	0	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year 280,829	Current Year 370,958
	9	Program service revenue (Part VIII, line 2g)	1,761,259	1,820,605
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	330,355	288,501
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,725	13,579
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,375,168	2,493,643
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	303,511	329,745
	14	Benefits paid to or for members (Part IX, column (A), line 4)		
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	1,134,913	1,135,338
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 74,202		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	984,460	932,316
18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	2,422,884	2,397,399	
19	Revenue less expenses. Subtract line 18 from line 12	(47,716)	96,244	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year 6,941,125	End of Year 7,186,272
	21	Total liabilities (Part X, line 26)	182,162	817,868
	22	Net assets or fund balances. Subtract line 21 from line 20	6,758,963	6,368,404

Part II Signature Block

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

Sign Here	Signature of officer	Date			
	Type or print name and title GREG APPLIN, BOARD PRESIDENT				
Paid Preparer Use Only	Print/Type preparer's name THOMAS A O'SULIVAN	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN P01321877
	Firm's name ▶ YEO & YEO, P.C.	Firm's EIN ▶ 38-2706146			
	Firm's address ▶ 1450 EISENHOWER, ANN ARBOR, MI 48108	Phone no. (734) 769-1331			

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

For Paperwork Reduction Act Notice, see the separate instructions.

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: TO PUT CHRISTIAN PRINCIPLES INTO PRACTICE THROUGH PROGRAMS THAT BUILD A 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 [x] No

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

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 \$ 1,178,715 including grants of \$ 329,745) (Revenue \$ 1,453,539) HEALTH & WELLNESS FOR YOUTH AND ADULTS THE YMCA IS RECOGNIZED NATIONALLY AS A LEADING COMMUNITY SERVICE ORGANIZATION, EMPHASIZING ON PROVIDING PROGRAMS AND SERVICES THAT BUILD HEALTHY SPIRIT, MIND, AND BODY FOR ALL. WE BRING FAMILIES CLOSER, ENCOURAGE GOOD HEALTH, AND FOSTER CONNECTIONS THROUGH FITNESS, SPORTS, FUN, AND SHARED INTERESTS. SOME OF OUR PROGRAMS INCLUDE TENNIS LESSONS AND LEAGUES, SWIMMING LESSONS, WATER AEROBICS, ENHANCE FITNESS, ZUMBA, SPINNING AND MANY YOUTH SPORTS AND FITNESS CLASSES. AS A RESULT, OVER 14,000 PEOPLE IN OUR COMMUNITY ARE RECEIVING THE SUPPORT, GUIDANCE, FINANCIAL SUPPORT AND RESOURCES THEY NEED TO ACHIEVE GREATER HEALTH. THIS IS PARTICULARLY IMPORTANT AS OUR COMMUNITY STRUGGLES WITH AN OBESITY AND DIABETES CRISIS, FAMILIES TRY TO MAINTAIN WORK/LIFE BALANCE, AND INDIVIDUALS SEARCH FOR PERSONAL FULFILLMENT. OUR PROGRAMS ARE ACCESSIBLE, AFFORDABLE, AND OTHER TO ALL FAITHS, BACKGROUNDS, ABILITIES, AND INCOME LEVELS.

4b (Code:) (Expenses \$ 627,134 including grants of \$) (Revenue \$ 160,784) YOUTH DEVELOPMENT WE BELIEVE IN GIVING BACK AND SUPPORTING OUR NEIGHBORS. WE HAVE BEEN LISTENING AND RESPONDING TO OUR COMMUNITY'S MOST CRITICAL SOCIAL NEEDS FOR OVER 60 YEARS. Y PROGRAMS, SUCH AS HEALTHY KIDS DAY, SPLASH WEEK, FAMILY NIGHTS, EASTER EGG HUNT, MONROE SWIMS WATER SAFETY, HEALTHY OUT OF SCHOOL TIME (HOST), ARTS & CRAFTS, TEEN LEADERS CLUB, BIBLE STUDY, TEEN TALK, ACHIEVEMENT GAP PROGRAMMING, PRESCHOOL PROGRAMS, AND KID FIT ARE EXAMPLES OF HOW WE DELIVER TRAINING, RESOURCES, AND SUPPORT THAT EMPOWER OUR COMMUNITY TO EFFECT CHANGE, BRIDGE GAPS, AND OVERCOME OBSTACLES. WE ALSO PROVIDED OVER 15,000 MEALS AND SNACKS LAST SUMMER AND SCHOOL YEAR TO CHILDREN TO ADDRESS THE HUNGER ISSUE IN MONROE COUNTY.

4c (Code:) (Expenses \$ 134,911 including grants of \$) (Revenue \$ 219,861) CHILD CARE WE ARE COMMITTED TO NURTURING THE POTENTIAL OF EVERY CHILD AND TEEN. WE BELIEVE THAT ALL KIDS DESERVE THE OPPORTUNITY TO DISCOVER WHO THEY ARE AND WHAT THEY CAN ACHIEVE. THAT'S WHY WE HELP YOUNG PEOPLE CULTIVATE THE VALUES, SKILLS, AND RELATIONSHIPS THAT LEAD TO POSITIVE BEHAVIORS, BETTER HEALTH, AND EDUCATIONAL ACHIEVEMENT. OUR PROGRAMS, SUCH AS BEFORE AND AFTER SCHOOL CARE, DAY CAMP, SWIM TEAM, CHILDWATCH, YOUTH LOUNGE, AND YOUTH SPORTS OFFER A WIDE RANGE OF EXPERIENCES THAT ENRICH COGNITIVE, SOCIAL, PHYSICAL, AND EMOTIONAL GROWTH. WE OFFER DIRECT FINANCIAL ASSISTANCE THAT MAKES PARTICIPATION POSSIBLE FOR THE YOUNG PEOPLE THAT WE ENGAGE. THROUGH COLLABORATION WITH THE MONROE PUBLIC SCHOOLS, TRIUMPH ACADEMY, AND CARLETON AIRPORT COMMUNITY SCHOOLS, WE IMPLEMENTED THE CATCH CURRICULUM, A HEALTH AND WELLNESS COMPONENT, TO THE STUDENTS' DAY. WE TEACH HEALTHY LIVING AND MAKING WISE DECISIONS. WE ALSO FOCUS ON BRIDGING THE SUMMER LEARNING LOSS GAP, HOMEWORK HELP, AND READING IMPROVEMENT IN OUR AFTERSCHOOL AND CAMP PROGRAMS.

4d Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 1,940,760

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

Part IV Checklist of Required Schedules *(continued)*

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	<input type="checkbox"/>	<input type="checkbox"/>
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?	<input type="checkbox"/>	<input type="checkbox"/>
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	<input type="checkbox"/>	<input type="checkbox"/>
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	<input type="checkbox"/>	<input type="checkbox"/>
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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	<input type="checkbox"/>	<input type="checkbox"/>
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	<input type="checkbox"/>	<input type="checkbox"/>
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	<input type="checkbox"/>	<input type="checkbox"/>

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

Table with 3 main columns: Question, Yes, No. Rows include 2a (145 employees), 2b (checked), 3a (checked), 3b, 4a (checked), 4b, 5a (checked), 5b (checked), 5c, 6a (checked), 6b, 7 Organizations that may receive deductible contributions under section 170(c), 7a (checked), 7b, 7c (checked), 7d, 7e (checked), 7f (checked), 7g (checked), 7h (checked), 8, 9 Sponsoring organizations maintaining donor advised funds, 9a, 9b, 10 Section 501(c)(7) organizations, 10a, 10b, 11 Section 501(c)(12) organizations, 11a, 11b, 12a, 12b, 13 Section 501(c)(29) qualified nonprofit health insurance issuers, 13a, 13b, 13c, 14a (checked), 14b, 15 (checked), 16 (checked).

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes 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.		
1b	Enter the number of voting members included in line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		✓
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?		✓
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		✓
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		✓
6	Did the organization have members or stockholders?		✓
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?		✓
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	The governing body?	✓	
8b	Each committee with authority to act on behalf of the governing body?	✓	
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		✓

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?		✓
10b	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?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	✓	
11b	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	✓	
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	✓	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	✓	
13	Did the organization have a written whistleblower policy?	✓	
14	Did the organization have a written document retention and destruction policy?	✓	
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?		
15a	The organization's CEO, Executive Director, or top management official	✓	
15b	Other officers or key employees of the organization	✓	
	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?		✓
16b	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?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed ► MI
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain 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 ►
 PENNY MARINO, 1111 W. ELM AVE, MONROE, MI 48162, (734) 241-2606

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) GREG APPLIN PRESIDENT	1.0	✓		✓				0	0	0
(2) MARK COCHRAN VICE PRESIDENT	1.0	✓		✓				0	0	0
(3) ANGELA BOMIA SECRETARY	1.0	✓		✓				0	0	0
(4) DENNIS MARIETTA TREASURER	1.0	✓		✓				0	0	0
(5) JOHN DOTY DIRECTOR	1.0	✓						0	0	0
(6) TROY GOODNOUGH DIRECTOR	1.0	✓						0	0	0
(7) DR. GERALD HOWE DIRECTOR	1.0	✓						0	0	0
(8) MARK JOHNSON DIRECTOR	1.0	✓						0	0	0
(9) RODNEY JOHNSON DIRECTOR	1.0	✓						0	0	0
(10) MICHELLE LAVOY DIRECTOR	1.0	✓						0	0	0
(11) CHERYL LOHMEYER DIRECTOR	1.0	✓						0	0	0
(12) MELISSA ROOCROFT DIRECTOR	1.0	✓						0	0	0
(13) MICHAEL PREADMORE DIRECTOR	1.0	✓						0	0	0
(14) MYRON SMOLINSKI DIRECTOR	1.0	✓						0	0	0

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) DAVID THOMPSON DIRECTOR	1.0	✓					0	0	0	
(16) SUSAN VANISACKER DIRECTOR	1.0	✓					0	0	0	
(17) DAVE VENSEL DIRECTOR	1.0	✓					0	0	0	
(18) AMY ZAREND DIRECTOR	1.0	✓					0	0	0	
(19) KRISTIN IRWIN EXECUTIVE DIRECTOR	40.0			✓			104,785	0	0	
(20) PENNY MARINO DIRECTOR OF FINANCE	40.0			✓			50,549	0	0	
(21)										
(22)										
(23)										
(24)										
(25)										
1b Sub-total							155,334	0	0	
c Total from continuation sheets to Part VII, Section A							0	0	0	
d Total (add lines 1b and 1c)							155,334	0	0	

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? <i>If "Yes," complete Schedule J for such individual</i>		✓
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? <i>If "Yes," complete Schedule J for such individual</i>		✓
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		✓

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
NONE		

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a	0				
	b	Membership dues	1b	0				
	c	Fundraising events	1c	0				
	d	Related organizations	1d	0				
	e	Government grants (contributions)	1e	0				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	370,958				
	g	Noncash contributions included in lines 1a-1f: \$						
	h	Total. Add lines 1a-1f		370,958				
Program Service Revenue				Business Code				
	2a	MEMBERSHIP REVENUE		1,419,514	1,419,514			
	b	DAY CAMP REVENUE		79,606	79,606			
	c	CHILDCARE REVENUE -- SCHOOL AGE		51,975	51,975			
	d	RESIDENT CAMP REVENUE		0	0			
	e	CHILDCARE REVENUE -- INFANT/TODDLER/PRESCHOOL		0	0			
	f	All other program service revenue .		269,510	269,510	0	0	
	g	Total. Add lines 2a-2f		1,820,605				
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		185,517			185,517	
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties						
	6a	Gross rents	(i) Real	(ii) Personal				
			b	Less: rental expenses				
			c	Rental income or (loss)	0	0		
			d	Net rental income or (loss)				
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
			b	Less: cost or other basis and sales expenses	894,500	0		
			c	Gain or (loss)	791,516	0		
			d	Net gain or (loss)	102,984	0		102,984
	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	a					
			b	Less: direct expenses				
			c	Net income or (loss) from fundraising events				
	9a	Gross income from gaming activities. See Part IV, line 19	a					
			b	Less: direct expenses				
			c	Net income or (loss) from gaming activities				
	10a	Gross sales of inventory, less returns and allowances	a					
b			Less: cost of goods sold					
c			Net income or (loss) from sales of inventory					
Miscellaneous Revenue			Business Code					
11a	OTHER REVENUE	900099	13,579	13,579				
b								
c								
d	All other revenue		0	0	0	0		
e	Total. Add lines 11a-11d		13,579					
12	Total revenue. See instructions		2,493,643	1,834,184	0	288,501		

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				
2 Grants and other assistance to domestic individuals. See Part IV, line 22	329,745	329,745		
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				
5 Compensation of current officers, directors, trustees, and key employees	155,335	73,350	81,985	0
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	842,120	661,941	127,371	52,808
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	29,483	18,460	11,023	0
9 Other employee benefits	18,817	17,918	573	326
10 Payroll taxes	89,583	72,832	12,697	4,054
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	21,583		21,583	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	19,545		19,545	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	88,487	12,428	74,374	1,685
12 Advertising and promotion	20,048	20,048	0	0
13 Office expenses	136,145	113,695	11,752	10,698
14 Information technology				
15 Royalties				
16 Occupancy	259,697	257,936	1,761	0
17 Travel	25,111	19,622	1,443	4,046
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	3,008	2,163	460	385
20 Interest	1,290	1,240	50	0
21 Payments to affiliates	0	0	0	0
22 Depreciation, depletion, and amortization	297,064	282,216	14,848	0
23 Insurance				
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 EQUIPMENT	35,440	33,516	1,724	200
b REPAIRS	24,898	23,650	1,248	0
c				
d FEES				
e All other expenses	0	0	0	0
25 Total functional expenses. Add lines 1 through 24e	2,397,399	1,940,760	382,437	74,202
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash—non-interest-bearing	225,253	1	185,959
	2 Savings and temporary cash investments	303,398	2	503,542
	3 Pledges and grants receivable, net	0	3	0
	4 Accounts receivable, net	7,714	4	31,692
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0	5	0
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	0
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	1,657	8	1,505
	9 Prepaid expenses and deferred charges	0	9	2,140
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 7,161,052		
	b Less: accumulated depreciation	10b 4,404,347	2,390,017	10c 2,756,705
	11 Investments—publicly traded securities	3,988,081	11	3,679,637
	12 Investments—other securities. See Part IV, line 11	0	12	0
	13 Investments—program-related. See Part IV, line 11	0	13	0
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	25,005	15	25,092
16 Total assets. Add lines 1 through 15 (must equal line 34)	6,941,125	16	7,186,272	
Liabilities	17 Accounts payable and accrued expenses	40,103	17	46,539
	18 Grants payable		18	
	19 Deferred revenue	81,857	19	93,894
	20 Tax-exempt bond liabilities	0	20	0
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	0
	23 Secured mortgages and notes payable to unrelated third parties	60,202	23	677,435
	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	0	25	0
	26 Total liabilities. Add lines 17 through 25	182,162	26	817,868
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	2,495,137	27	2,540,526
	28 Temporarily restricted net assets	4,263,826	28	3,827,878
	29 Permanently restricted net assets	0	29	0
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	6,758,963	33	6,368,404	
34 Total liabilities and net assets/fund balances	6,941,125	34	7,186,272	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,493,643
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,397,399
3	Revenue less expenses. Subtract line 2 from line 1	3	96,244
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	6,758,963
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	6,855,207

Part XII Financial Statements and Reporting

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

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		✓
b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	✓	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain 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?		✓
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.		

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2018

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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.

Name of the organization THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF MONROE MICHIGAN	Employer identification number 38-1508585
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Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

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

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state:
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
- 10 An organization that normally receives: (1) more than 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?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2017 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test—2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 33 1/3% support test—2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10%-facts-and-circumstances test—2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	463,880	290,968	407,493	280,829	370,958	1,814,128
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	1,621,272	1,685,260	2,019,409	1,457,748	1,490,860	8,274,549
3 Gross receipts from activities that are not an unrelated trade or business under section 513	0	0	0	0	0	0
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
5 The value of services or facilities furnished by a governmental unit to the organization without charge						0
6 Total. Add lines 1 through 5	2,085,152	1,976,228	2,426,902	1,738,577	1,861,818	10,088,677
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	352,113	88,092	221,226	106,028	179,609	947,068
c Add lines 7a and 7b	352,113	88,092	221,226	106,028	179,609	947,068
8 Public support. (Subtract line 7c from line 6.)						9,141,609

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6	2,085,152	1,976,228	2,426,902	1,738,577	1,861,818	10,088,677
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	257,338	179,534	95,642	128,876	185,517	846,907
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	0	0	0	0	0	0
c Add lines 10a and 10b	257,338	179,534	95,642	128,876	185,517	846,907
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	0	0	0	0	0	0
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	27,565	35,079	5,457	2,725	13,579	84,405
13 Total support. (Add lines 9, 10c, 11, and 12.)	2,370,055	2,190,841	2,528,001	1,870,178	2,060,914	11,019,989
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f))	15	82.95 %
16 Public support percentage from 2017 Schedule A, Part III, line 15	16	83.05 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f))	17	7.69 %
18 Investment income percentage from 2017 Schedule A, Part III, line 17	18	7.01 %
19a 33 1/3% support tests—2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support tests—2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization		<input type="checkbox"/>
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions		<input type="checkbox"/>

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations *(continued)*

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	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? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>	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? <i>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.</i>	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? <i>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.</i>	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)? <i>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).</i>	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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>	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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>	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 <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>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.</i>	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? <i>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.</i>	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? <i>Provide details in Part VI.</i>	3a	
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>	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):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C—Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7 <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).			

Schedule A (Form 990 or 990-EZ) 2018

Part VI

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

Return Reference - Identifier	Explanation						
SCHEDULE A, PART III, LINE 12 - OTHER INCOME	Other Income Type	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	(1)	20,000	22,595	5,457	2,725	13,579	64,356
	(2)	7,565	12,484	0	0	0	20,049

Schedule of Contributors

2018

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

Name of the organization THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF MONROE MICHIGAN	Employer identification number 38-1508585
---	---

Organization type (check one):

Filers of:

Section:

- Form 990 or 990-EZ 501(c)(3) (enter number) organization
- 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
- 527 political organization
- Form 990-PF 501(c)(3) exempt private foundation
- 4947(a)(1) nonexempt charitable trust treated as a private foundation
- 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

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

General Rule

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

Special Rules

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

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

Name of organization THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF MONROE MICHIGAN	Employer identification number 38-1508585
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Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Y-USA ----- ----- -----	\$ 150,218	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	MONROE COUNTY ----- ----- -----	\$ 8,798	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	COMMUNITY FOUADATION OF SOUTHEAST MI ----- ----- -----	\$ 25,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	LA-Z-BOY FOUNDATION ----- ----- -----	\$ 25,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF MONROE MICHIGAN	Employer identification number 38-1508585
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Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----

Name of organization THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF MONROE MICHIGAN	Employer identification number 38-1508585
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Part III **Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor.** Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ▶ \$ _____
 Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

SCHEDULE 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

2018

Open to Public Inspection

Name of the organization: THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF MONROE MICHIGAN; Employer identification number: 38-1508585

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.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows 1-4 for values, 5-6 for Yes/No questions.

Part II Conservation Easements.

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

Form with multiple rows for questions 1-9 regarding conservation easements, including checkboxes and a table for line 2.

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.

Form with rows for questions 1a, 1b, 2, 2a, 2b regarding art and historical treasures, including dollar amounts.

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

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

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

Part V Endowment Funds.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	4,203,268	3,866,720	3,959,113	4,138,179	3,754,186
b Contributions	25,000	0	0	100,000	375,814
c Net investment earnings, gains, and losses	(199,460)	654,149	221,435	20,872	234,438
d Grants or scholarships	241,943	297,999	291,451	276,649	202,078
e Other expenditures for facilities and programs	0	0	0	0	0
f Administrative expenses	19,545	19,602	22,377	23,289	24,181
g End of year balance	3,767,320	4,203,268	3,866,720	3,959,113	4,138,179

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

- a** Board designated or quasi-endowment ▶ 0.00 %
- b** Permanent endowment ▶ 0.00 %
- c** Temporarily restricted endowment ▶ 100.00 %

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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
(ii) related organizations	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	<input type="checkbox"/>	
3b	<input type="checkbox"/>	<input type="checkbox"/>

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	68,814			68,814
b Buildings	6,102,234		4,091,993	2,010,241
c Leasehold improvements				
d Equipment	453,072		312,354	140,718
e Other	536,932			536,932
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				2,756,705

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 XIII

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

Return Reference - Identifier	Explanation	
SCHEDULE D, PART XI, LINE 2(D) - OTHER REVENUES IN AUDITED FINANCIAL STATEMENTS NOT IN FORM 990	(a) Description	(b) Amount
	DIRECT ASSISTANCE TO INDIVIDUALS	- 329,745
SCHEDULE D, PART XII, LINE 2(D) - OTHER EXPENSES IN AUDITED FINANCIAL STATEMENTS NOT IN FORM 990	(a) Description	(b) Amount
	DIRECT ASSISTANCE TO INDIVIDUALS	- 329,745

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF MONROE MICHIGAN

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.

1 (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 non-cash 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 ▶

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

Cat. No. 50055P

Schedule I (Form 990) (2018)

OMB No. 1545-0047

2018

Open to Public Inspection

Employer identification number

38-1508585

Part IV

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

Return Reference - Identifier	Explanation
SCHEDULE I, PART I, LINE 2 - PROCEDURES FOR MONITORING USE OF GRANT FUNDS.	SCHOLARSHIPS ARE AWARDED TO ELIGIBLE INDIVIDUALS BASED ON FINANCIAL NEED OR ACTIVE MILITARY STATUS

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

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

OMB No. 1545-0047

2018

Open to Public Inspection

Name of the Organization
THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF MONROE MICHIGANEmployer Identification Number
38-1508585

Return Reference - Identifier	Explanation
FORM 990, PART VI, LINE 11B - REVIEW OF FORM 990 BY GOVERNING BODY	DRAFT OF THE RETURN IS GIVEN TO THE BOARD FOR REVIEW AND FINAL APPROVAL BEFORE IT IS FILED
FORM 990, PART VI, LINE 12C - CONFLICT OF INTEREST POLICY	ENFORCEMENT OF CONFLICTS OF POLICY IS EACH DIRECTOR, OFFICER, OTHER VOLUNTEER AND SELECTED EMPLOYEE SHALL PROVIDE THE MONROE FAMILY YMCA OR THE EXECUTIVE COMMITTEE WITH A FULL AND COMPLETE WRITTEN DISCLOSURE OF ALL FACTS OF ANY TRANSACTION OR SITUATION THAT MAY BE SUBJECT TO ANY REASONABLE DOUBT CONCERNING THE POSSIBLE EXISTENCE OF A CONFLICT OF INTEREST BY THE DIRECTOR, OFFICER, OTHER VOLUNTEER OR SELECTED EMPLOYEE
FORM 990, PART VI, LINE 15A - PROCESS TO ESTABLISH COMPENSATION OF TOP MANAGEMENT OFFICIAL	THE BOARD PERFORMS ANNUAL REVIEW OF THE EXECUTIVE DIRECTOR AND DETERMINES HIS/HER COMPENSATION
FORM 990, PART VI, LINE 15B - PROCESS TO ESTABLISH COMPENSATION OF OTHER EMPLOYEES	COMPENSATION PROCESS FOR OFFICERS: THE EXECUTIVE DIRECTOR DETERMINES COMPENSATION FOR KEY EMPLOYEES
FORM 990, PART VI, LINE 19 - REQUIRED DOCUMENTS AVAILABLE TO THE PUBLIC	GOVERNING DOCUMENTS DISCLOSURE EXPLANATION: AVAILABLE UPON REQUEST OR ONLINE THROUGH PUBLIC INFORMATION WEBSITE.

Exempt Organization Declaration and Signature for Electronic Filing

For calendar year 2018, or tax year beginning _____, 2018, and ending _____, 20_____

2018

Department of the Treasury
Internal Revenue Service

For use with Forms 990, 990-EZ, 990-PF, 1120-POL, and 8868

Name of exempt organization

THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF MONROE MICHIGAN

Employer identification number

38-1508585

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the type of return being filed with Form 8453-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a below and the amount on that line of the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). If you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a	Form 990 check here	<input checked="" type="checkbox"/>	b	Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	2,493,643
2a	Form 990-EZ check here	<input type="checkbox"/>	b	Total revenue, if any (Form 990-EZ, line 9)	2b	
3a	Form 1120-POL check here	<input type="checkbox"/>	b	Total tax (Form 1120-POL, line 22)	3b	
4a	Form 990-PF check here	<input type="checkbox"/>	b	Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	
5a	Form 8868 check here	<input type="checkbox"/>	b	Balance due (Form 8868, line 3c)	5b	

Part II Declaration of Officer

- 6 I authorize the U.S. Treasury and its designated Financial Agent to initiate an Automated Clearing House (ACH) electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment.
- If a copy of this return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I certify that I executed the electronic disclosure consent contained within this return allowing disclosure by the IRS of this Form 990/990-EZ/990-PF (as specifically identified in Part I above) to the selected state agency(ies).

Under penalties of perjury, I declare that I am an officer of the above named organization and that I have examined a copy of the organization's 2018 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund.

Sign Here

Bryan A. Applin
Signature of officer

05/16/2019
Date

BOARD PRESIDENT
Title

Part III Declaration of Electronic Return Originator (ERO) and Paid Preparer (see instructions)

I declare that I have reviewed the above organization's return and that the entries on Form 8453-EO are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return. The organization officer will have signed this form before I submit the return. I will give the officer a copy of all forms and information to be filed with the IRS, and have followed all other requirements in Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. If I am also the Paid Preparer, under penalties of perjury I declare that I have examined the above organization's return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. This Paid Preparer declaration is based on all information of which I have any knowledge.

ERO's Use Only	ERO's signature	<i>[Signature]</i>	Date	5/16/19	Check if also paid preparer <input type="checkbox"/>	Check if self-employed <input type="checkbox"/>	ERO's SSN or PTIN	
	Firm's name (or yours if self-employed), address, and ZIP code							EIN
							Phone no.	

Under penalties of perjury, I declare that I have examined the above return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which the preparer has any knowledge.

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	THOMAS A O'SULIVAN				P01321877
	Firm's name	YEO & YEO, P.C.		Firm's EIN	38-2706146
Firm's address				1450 EISENHOWER, ANN ARBOR, MI 48108	
				Phone no.	(734) 769-1331

The Monroe Family YMCA

Financial Statements

December 31, 2018

**(With Summarized Comparative
Information for 2017)**



YEO & YEO
CPAs & BUSINESS CONSULTANTS

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Independent Auditors' Report

Board of Directors
The Monroe Family YMCA
Monroe, MI

Report on the Financial Statements

We have audited the accompanying financial statements of The Monroe Family YMCA which comprise the statement of financial position as of December 31, 2018, and the related statements of activities, functional expenses, and cash flows for the year then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditors' Responsibility

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

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

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

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of The Monroe Family YMCA as of December 31, 2018, and the changes in its net assets and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Adoption of New Accounting Standards

As described in Note 1 to the financial statements, The Monroe Family YMCA changed its method of accounting for net assets and functional expenses in 2018 as required by the provisions of FASB Accounting Standards Update 2016-14 *Presentation of Financial Statements of Not-for-Profit Entities*. Our opinion is not modified with respect to that matter.

Report on Summarized Comparative Information

We have previously audited The Monroe Family YMCA's December 31, 2017, financial statements, and our report dated March 15, 2018 expressed an unmodified opinion on those financial statements. In our opinion, the summarized comparative information presented herein, with the exception of the matter discussed in Note 1, as of and for the year ended December 31, 2017 is consistent, in all material respects, with the audited financial statements from which it has been derived.

Report on Supplementary Information

Our audit was conducted for the purpose of forming an opinion on the 2018 financial statements as a whole. The 2018 statement of revenues by department is presented for purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the 2018 information is fairly stated in all material respects in relation to the financial statements as a whole.

Yeo & Yeo, P.C.

Ann Arbor, MI
April 12, 2019

The Monroe Family YMCA
Statement of Financial Position
December 31, 2018
(With Summarized Comparative Information for 2017)

	Operating Fund	Building Fund	Endowment Fund	Total 2018	Total 2017
Assets					
Current assets					
Cash and cash equivalents	\$ 474,517	\$ 140,875	\$ 74,109	\$ 689,501	\$ 528,651
Certificate of deposit	25,092	-	-	25,092	25,005
Investments	-	-	3,679,637	3,679,637	3,988,081
Accounts receivable	13,579	-	18,113	31,692	7,714
Inventories	1,505	-	-	1,505	1,657
Prepaid expense	2,140	-	-	2,140	-
Total current assets	516,833	140,875	3,771,859	4,429,567	4,551,108
Property and equipment, net	-	2,756,705	-	2,756,705	2,390,017
Total assets	\$ 516,833	\$ 2,897,580	\$ 3,771,859	\$ 7,186,272	\$ 6,941,125
Liabilities and net assets					
Current liabilities					
Accounts payable	\$ -	\$ 981	\$ -	\$ 981	\$ -
Accrued expenses	41,019	-	4,539	45,558	40,103
Loan payable, current portion	-	56,378	-	56,378	50,291
Deferred revenue	93,894	-	-	93,894	81,857
Total current liabilities	134,913	57,359	4,539	196,811	172,251
Long-term liabilities					
Loan payable	-	621,057	-	621,057	9,911
Total liabilities	134,913	678,416	4,539	817,868	182,162
Net assets					
Without donor restrictions	250,019	139,894	-	389,913	165,322
Undesignated	-	2,079,270	-	2,079,270	2,329,815
Net investment in capital assets less related debt	250,019	2,219,164	-	2,469,183	2,495,137
Total without donor restrictions	500,038	2,458,128	-	2,958,166	3,160,274
With donor restrictions	131,901	-	3,767,320	3,899,221	4,263,826
Purpose restrictions	381,920	2,219,164	3,767,320	6,368,404	6,758,963
Total net assets	516,833	2,897,580	3,771,859	7,186,272	6,941,125
Total liabilities and net assets	\$ 516,833	\$ 2,897,580	\$ 3,771,859	\$ 7,186,272	\$ 6,941,125

See Accompanying Notes to the Financial Statements

The Monroe Family YMCA
Statement of Activities
Year Ended December 31, 2018
(With Summarized Comparative Information for 2017)

	Undesignated		With Donor Restrictions		Total All Funds	
	Operating Fund	Building Fund	Operating Fund	Endowment Fund	2018	2017
Public support and program revenues						
Public support	\$ 150,011	\$ -	\$ -	\$ 25,000	\$ 175,011	\$ 116,594
Contributions						
Program revenues	1,089,769	-	-	-	1,089,769	1,068,513
Memberships	401,091	-	-	-	401,091	420,888
Program service fees	47,615	-	138,511	-	186,126	122,646
Grants	9,821	-	-	-	9,821	9,936
Special events	13,579	-	-	-	13,579	2,725
Other revenue	128,168	180,943	(67,168)	(241,943)	-	-
Net assets released from restrictions	1,840,054	180,943	71,343	(216,943)	1,875,397	1,741,302
Total public support, revenues and gains						
Transfers						
Transfer in	-	18,186	-	-	18,186	66,274
Transfer out	(18,186)	-	-	-	(18,186)	(66,274)
Total transfers	(18,186)	18,186	-	-	-	-
Total public support, program revenues and transfers	1,821,868	199,129	71,343	(216,943)	1,875,397	1,741,302
Expenses	1,725,063	323,046	-	-	2,048,109	2,099,771
Other income (loss)						
Investment income	1,158	-	-	184,359	185,517	128,876
Realized gain on investments	-	-	-	102,984	102,984	203,337
Unrealized gain (loss) on investments	-	-	-	(486,803)	(486,803)	323,348
Investment expense	-	-	-	(19,545)	(19,545)	(19,602)
Loss on disposal of equipment	-	-	-	-	-	(1,858)
Total other income (loss)	1,158	-	-	(219,005)	(217,847)	634,101
Change in net assets	97,963	(123,917)	71,343	(435,948)	(390,559)	275,632
Net assets - beginning of the year	152,056	2,343,081	60,558	4,203,268	6,758,963	6,483,331
Net assets - end of the year	\$ 250,019	\$ 2,219,164	\$ 131,901	\$ 3,767,320	\$ 6,368,404	\$ 6,758,963

See Accompanying Notes to the Financial Statements

The Monroe Family YMCA
Statement of Functional Expenses
Year Ended December 31, 2018
(With Summarized Comparative Information for 2017)

	Program Services											Supporting Services		Totals		
	Aquatics	Fitness	Youth Sports	School Age Programs	Camps	Tennis/Racquet Sports	Wellness	Food / Off Site	Child Watch	Christian Emphasis	Other Programs	Total Program	Management and General	Development	2018	2017
Salaries	\$ 109,193	\$ 137,138	\$ 29,317	\$ 86,383	\$ 69,504	\$ 86,209	\$ 25,458	\$ 67,435	\$ 65,065	\$ 27,429	\$ 33,159	\$ 735,290	\$ 209,361	\$ 52,808	\$ 997,459	\$ 1,000,403
Employee benefits	711	954	711	4,737	711	6,539	711	711	711	711	711	17,918	573	326	18,817	14,375
Pension	2,461	4,526	726	2,640	635	4,074	635	792	701	635	635	18,460	11,023	-	29,483	30,775
Payroll taxes	10,631	13,397	4,489	7,584	6,468	7,870	3,098	6,231	6,128	3,249	3,687	72,832	12,697	4,054	89,583	89,360
Total salaries and related expenses	122,996	156,015	35,243	101,344	77,318	103,692	29,902	75,169	72,605	32,024	38,192	844,500	233,654	57,188	1,135,342	1,134,913
Supplies and travel	18,692	10,556	9,458	20,707	20,571	14,468	11,491	26,108	8,603	8,510	13,089	162,253	11,131	14,919	188,303	193,959
Promotion and advertising	1,732	1,904	1,732	1,732	1,732	1,732	1,732	2,113	1,732	1,732	2,175	20,048	-	-	20,048	25,989
Services and professional fees	935	2,735	935	830	915	1,158	935	1,185	935	935	935	12,433	95,952	1,685	110,070	134,650
Office expense	416	416	420	416	416	416	416	416	416	416	416	4,580	3,788	25	8,393	8,783
Conferences and meetings	356	333	4	897	4	4	4	59	4	4	494	2,163	460	385	3,008	7,163
Occupancy	22,716	22,807	22,716	22,752	22,738	26,696	22,716	26,243	22,716	22,716	23,116	257,932	1,761	-	259,693	255,399
Interest expense	-	-	-	-	-	-	206	-	-	-	-	206	-	-	206	1,066
Total expenses before Building and Endowment expenses	167,843	194,766	70,508	148,678	123,694	148,166	67,402	131,293	107,011	66,337	78,417	1,304,115	346,746	74,202	1,725,063	1,761,922
Building expenses	2,150	2,150	2,150	2,150	2,150	2,150	2,150	2,150	2,150	2,150	2,150	23,650	1,248	-	24,898	10,372
Equipment interest expense	94	94	94	94	94	94	94	94	94	94	94	1,034	50	-	1,084	3,863
Fees	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	17
Depreciation	25,656	25,656	25,656	25,656	25,656	25,656	25,656	25,656	25,656	25,656	25,656	282,216	14,848	-	297,064	323,597
Total Building and Endowment expenses	27,900	27,900	27,900	27,900	27,900	27,900	27,900	27,900	27,900	27,900	27,900	306,900	16,146	-	323,046	337,949
Total expenses	\$ 195,743	\$ 222,666	\$ 98,408	\$ 176,578	\$ 151,594	\$ 176,066	\$ 95,302	\$ 159,193	\$ 134,911	\$ 94,237	\$ 106,317	\$ 1,611,015	\$ 362,892	\$ 74,202	\$ 2,048,109	\$ 2,099,771

See Accompanying Notes to the Financial Statements

The Monroe Family YMCA
Statement of Cash Flows
Year Ended December 31, 2018
(With Summarized Comparative Information for 2017)

	2018	2017
Cash flows from operating activities		
Change in net assets	\$ (390,559)	\$ 275,632
Items not requiring cash		
Depreciation	297,064	323,597
Loss on disposal of equipment	-	1,858
Realized gain on investments	(102,984)	(203,337)
Unrealized loss (gain) on investments	486,803	(323,348)
Changes in operating assets and liabilities		
Accounts receivable	(23,978)	50,784
Inventory	152	50
Prepaid expense	(2,140)	16,461
Accounts payable	981	(5,635)
Accrued expenses	5,455	3,203
Deferred revenue	12,037	(8,322)
Net cash provided by operating activities	<u>282,831</u>	<u>130,943</u>
Cash flows from investing activities		
Purchases of property and equipment	(663,752)	(195,914)
Purchase of certificate of deposit	(87)	(25,005)
Purchases of investments	(969,875)	(2,287,312)
Proceeds from sale or maturity of investments	894,500	2,662,749
Net cash provided (used) by investing activities	<u>(739,214)</u>	<u>154,518</u>
Cash flows from financing activities		
Loan proceeds	677,435	24,932
Repayments on long term debt	(60,202)	(131,524)
Net cash provided (used) by financing activities	<u>617,233</u>	<u>(106,592)</u>
Change in cash and cash equivalents	160,850	178,869
Cash and cash equivalents - beginning of year	<u>528,651</u>	<u>349,782</u>
Cash and cash equivalents - end of year	\$ 689,501	\$ 528,651
Supplemental disclosure		
Cash paid for interest	<u>1,290</u>	<u>4,929</u>

See Accompanying Notes to the Financial Statements

The Monroe Family YMCA
Notes to the Financial Statements
Year Ended December 31, 2018
(With Summarized Comparative Information for 2017)

Note 1 - Nature of Activities and Significant Accounting Policies

The Monroe Family YMCA (YMCA) is essentially a membership association of men, women, and children of all ages, abilities, income, races, and religions. It is dedicated to building healthy body, mind, and spirit of individuals and families. It puts Christian principles into practice through programs that promote good health, strong families, youth leadership, community development, and international understanding.

Fund Accounting

The financial activities of the YMCA are recorded in separate funds, described as follows:

Operating Fund

This fund includes resources, which represent the portion of expendable funds that is available for support of the YMCA operations and revolving and custodial accounts that are assets held by the YMCA as agent for associated organizations.

Building Fund

This fund includes resources available for major building repairs and new equipment purchases and funds to be expended for property and equipment.

Endowment Fund

The purpose of the Endowment Fund is to insure financial resources are available for future needs of the YMCA and to provide for annual program enrichment needs.

Basis of Presentation

Net assets, revenues, gains, and losses are classified based on the existence or absence of donor or grantor imposed restrictions. Accordingly, net assets and changes therein are classified and reported as follows:

Net assets without donor restrictions – Net assets available for use in general operations and not subject to donor (or certain grantor) restrictions. The governing board has designated, from net assets without donor restrictions, net assets for an operating reserve and board-designated endowment.

Net assets with donor restrictions – Net assets subject to donor- (or certain grantor-) imposed restrictions. Some donor-imposed restrictions are temporary in nature, such as those that will be met by the passage of time or other events specified by the donor. Other donor-imposed restrictions are perpetual in nature, where the donor stipulates that resources be maintained in perpetuity.

Donor-imposed restrictions are released when a restriction expires, that is, when the stipulated time has elapsed, when the stipulated purpose for which the resource was restricted has been fulfilled, or both.

Comparative Financial Information

The financial information for the year ended December 31, 2017, presented for comparative purposes, is not intended to be complete financial statement presentation.

Cash and Cash Equivalents

For purposes of the statements of cash flows, the YMCA considers all unrestricted highly liquid investments with an initial maturity of three months or less to be cash equivalents.

All cash accounts are insurance by the Federal Deposit Insurance Corporation (FDIC) up to \$250,000 per institution. As of December 31, 2018, \$503,809 of the \$754,134 bank balance was not FDIC insured.

The Monroe Family YMCA
Notes to the Financial Statements
Year Ended December 31, 2018
(With Summarized Comparative Information for 2017)

Investments

Investments in debt equities and equity securities with readily determinable fair values are carried at fair value based on quoted market prices.

Realized gains and losses on investments, interest, dividends, fees and foreign taxes are included in the change in unrestricted net assets unless the income or loss is restricted by donor or law. Cash maintained in money market accounts are classified as short-term investments.

Accounts Receivable

Accounts receivable are primarily related to grants that have been earned, but not received as of year end. No allowance was recorded as all receivables are deemed to be collectible in full.

Inventory

Inventories are stated at the lower of cost or net realizable value. Inventories consist of merchandise for resale.

Prepaid Expense

Prepays are amounts paid for expenses in advance of the service or use period.

Property and Equipment

Acquired assets are stated at cost and donated assets at fair market value. Expenditures for new acquisitions, renewals and betterments, which increase productive capacity or prolong service lives of the property and equipment, are capitalized. Planned maintenance and repairs which do not enhance the value or extend the useful life are charged to expenses as incurred. The YMCA uses the direct expensing method to account for planned major maintenance activities.

Property and equipment donations are reported as support without donor restrictions unless the donor has restricted the donated asset to

a specific purpose. Assets donated with explicit restrictions regarding their use and contributions of cash that must be used to acquire property and equipment are reported as support with donor restrictions, unless the restriction will expire during the same year. Absent donor stipulations regarding how long those donated assets must be maintained, the YMCA reports expirations of donor restrictions when the donated or acquired assets are placed in service as instructed by the donor. The YMCA reclassifies net assets with donor restrictions to net assets without donor restrictions at that time. Property and equipment are depreciated using the straight-line method over the estimated useful lives of the respective assets.

Long-Lived Assets

The YMCA evaluates long-lived assets for impairment using a discounted cash flow method whenever events or changes in circumstances indicate that the carrying amount of an asset may not be recoverable in accordance with accounting principles generally accepted in the United States of America.

Membership Fees

Membership fees are recognized in the applicable membership period. Joiner fees are recorded as revenue in the period the fees are due.

Grant Revenues

Grant revenues are recorded as they are earned from the various sources. Most grants are earned on an expense reimbursement payment. Any amounts received in advance, but not earned are recorded as deferred revenues.

Revenue Recognition

Revenue is recorded net of sales returns, and sales tax. Expenses are reported net of returns and discounts.

The Monroe Family YMCA
Notes to the Financial Statements
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Advertising Costs

Advertising costs are charged to operations when incurred. The advertising expense for the years ended December 31, 2018 and 2017 was \$20,048 and \$25,989, respectively.

Functional Expenses

The costs of program and supporting services activities have been summarized on a functional basis in the statements of activities. The statements of functional expenses present the natural classification detail of expenses by function. Accordingly, certain costs have been allocated among the programs and supporting services benefited. Those expenses include occupancy, maintenance, depreciation, membership, facility rents, marketing, and enrichment. Those expenses are allocated based on a proportionate amount of expense by each program.

Income Tax Status

The YMCA is exempt from income taxes under Section 501(c)(3) of the Internal Revenue Code as a charitable organization whereby only unrelated business income, as defined by Section 509(a)(1) of the Code is subject to federal income tax. The YMCA has no unrelated business income. The YMCA files informational returns in the U.S. Federal and Michigan jurisdiction.

Risks and Uncertainties

The YMCA invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect the amounts reported in the balance sheet.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

Subsequent Events

Management has evaluated subsequent events through April 12, 2019, which is the date the financial statements were available to be issued.

Change in Accounting Principle

On August 18, 2016, FASB issued ASU 2016-14, Not-for-Profit Entities (Topic 958) – *Presentation of Financial Statements of Not-for-Profit Entities*. The update addressed the complexity and understandability of net asset classification, deficiencies in information about liquidity and availability of resources, and the lack of consistency in the type of information provided about expenses and investment return. The YMCA has adjusted the presentation of these statements accordingly. The ASU has been applied retrospectively to all periods presented.

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Notes to the Financial Statements
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Note 2 - Liquidity and Availability

Financial assets available for general expenditure, that is, without donor or other restrictions limiting their use, within one year of the statement of financial position date, comprise the following:

	Total
Cash and cash equivalents	\$ 689,501
Accounts receivable	31,692
	\$ 721,193

The YMCA's endowment funds consist of donor restricted endowments and funds designated by the board as endowments. Income from donor restricted endowments is restricted for specific purposes, with the exception of the amounts available for general use. Donor restricted endowment funds are not available for general expenditure.

The YMCA's goal is generally to maintain a bank cash balance of at least \$200,000 at all times.

Note 3 - Investments

The following tables represent information about the YMCA's assets and liabilities measured at fair value on a recurring basis at December 31, 2018 and 2017, and the valuation techniques used by the YMCA to determine those fair values.

In general, fair values determined by Level 1 inputs use quoted prices in active markets for identical assets or liabilities that the YMCA has the ability to access.

Fair values determined by Level 2 inputs use other inputs that are observable, either directly or indirectly. These Level 2 inputs include quoted prices for similar assets and liabilities in active markets, and other inputs such as interest rates and yield curves that are observable at commonly quoted intervals.

Level 3 inputs are unobservable inputs, including inputs that are available in situations where there is little, if any, market activity for the related asset or liability.

There are only level 1 inputs, no level 2 or 3.

In instances where inputs used to measure fair value fall into different levels in the above fair value hierarchy, fair value measurements in the entirety are categorized based on the lowest level input that is significant to the valuation. The YMCA's assessment of the significance of particular inputs to these fair value measurements requires judgment and considers factors specific to each asset or liability.

Investment securities are valued using level 1 inputs and consist of the following at December 31, 2018 and 2017:

	2018		2017	
	Cost	Fair Market Value	Cost	Fair Market Value
Managed Investments- Wealth Management Department				
PNC Institutional Investments	\$ 1,082,202	\$ 1,053,374	\$ 1,046,173	\$ 1,055,818
Fixed Income securities	2,523,483	2,626,263	2,381,153	2,932,263
Equities				
Balance at end of year	\$ 3,605,685	\$ 3,679,637	\$ 3,427,326	\$ 3,988,081

The Monroe Family YMCA
Notes to the Financial Statements
Year Ended December 31, 2018
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Changes in investments during the years ended December 31, 2018 and 2017, respectively, are as follows:

	2018	2017
Investments, beginning of year	\$ 3,988,081	\$ 3,836,833
Contributions	25,000	30,000
Interest	36,979	33,697
Dividends	131,508	92,854
Disbursements, net of transfers	(98,567)	(512,386)
Investment fees	(19,545)	(19,602)
Realized gain	102,984	203,337
Unrealized gain (loss)	(486,803)	323,348
Investments, end of year	\$ 3,679,637	\$ 3,988,081

Note 4 - Property and Equipment

Major classes of assets and related accumulated depreciation thereon are summarized as follows:

	December 31,		Useful Life
	2018	2017	
Land	\$ 68,814	\$ 68,814	
Construction in process	536,932	-	
Building and improvements	6,102,234	6,113,992	7-50 years
Furniture and equipment	453,072	570,331	3-15 years
	7,161,052	6,753,137	
Less: accumulated depreciation	(4,404,347)	(4,363,120)	
	\$ 2,756,705	\$ 2,390,017	

Depreciation expense for the year ended December 31, 2018 and 2017 amounted to \$297,064 and \$323,597, respectively.

Note 5 - Loans Payable

Loans payable consists of the following obligations at December 31, 2018 and 2017:

	2018	2017
Note payable to Education Plus for wellness youth area and fitness room renovations for \$677,435. The note is secured by the assets and property. The note is payable in 10 annual installments including interest charged at 3.90%; The note matures on April 1, 2028.	\$ 677,435	\$ -

Note payable to Education Plus for 24 Hour Access Renovations for \$160,125. The note is secured by the building. The note is payable in 4 annual installments of \$43,071 including interest charged at 2.99%; The note matures on November 1, 2018.

-

42,016

Note payable to Monroe Bank and Trust for fitness equipment for \$24,932. The note is secured by a certificate of deposit in the amount of the loan. The note is payable in 36 monthly installments of \$719 including interest charged at 2.40%; The note matures on February 15, 2020.

Total loans	-	18,186
Less current portion	677,435	60,202
Loan payable, net of current portion	56,378	50,291
	\$ 621,057	\$ 9,911

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Scheduled principal maturities of loans payable for each of the three years succeeding December 31, 2018 are summarized as follows:

Year Ending December 31,	Amount
2019	\$ 56,378
2020	58,889
2021	61,280
2022	63,625
2023	66,106
Thereafter	<u>371,157</u>
	<u>\$ 677,435</u>

Note 6 - Lease Commitments – Operating Leases

The YMCA entered into an operating lease agreement with Leaf Copier for the use of a copy machine. The lease term is sixty (60) months, ending December 2020, with payments of \$521 per month. Related expenses were \$6,252 and \$6,252, as of December 31, 2018 and 2017, respectively.

As of December 31, 2018, minimum future rental payments under non-cancelable operating leases having remaining terms in excess of one year for each of the next remaining years and in the aggregate are:

Year Ending December 31,	Total
2019	\$ 6,252
2020	<u>6,252</u>
	<u>\$ 12,504</u>

Note 7 - Pension Plan

The YMCA participates in a national YMCA defined contribution plan. Employees over 21 years old, having greater than 1,000 hours, after two years, are required to participate in the YMCA's pension plan. Under this plan, the employees contribute 5% and the YMCA contributes 7%. Contributions to the plan are based upon a percentage of salaries and wages paid and contributions are fully vested.

Pension expense for the years ended December 31, 2018 and 2017 was \$29,483 and \$30,775, respectively. The YMCA has no liability for past service costs.

Note 8 - Net Assets with Donor Restrictions

Net assets with donor restrictions are restricted for the following purposes at December 31:

	2018	2017
Subject to expenditure for specified purpose:		
Endowment	\$ 3,767,320	\$ 4,203,268
Community Kitchen	30,000	30,000
Health Endowment Fund	10,048	18,860
Year Round Food Program	32,046	11,495
Youth Sports	23,019	203
Healthy Weight and Your Child	16,788	-
Character Development Learning Institute	<u>20,000</u>	<u>-</u>
	<u>\$ 3,899,221</u>	<u>\$ 4,263,826</u>

The Monroe Family YMCA
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Net assets were released from donor restrictions by incurring expenses satisfying the restricted purpose as follows for the years ended December 31, 2018 and 2017:

	2018	2017
Satisfaction of purpose		
Endowment	\$ 241,943	\$ 297,999
Health Endowment Fund	8,812	21,382
Year Round Food Program	44,162	79,766
Youth Sports	2,184	24,797
Commission on Aging	8,798	-
Healthy Weight and Your Child	3,212	-
	\$ 309,111	\$ 423,944

Note 9 - Related Party Transactions

The Monroe Family YMCA is an affiliate of the YMCA of the USA. As such, they pay a monthly affiliate fee based on gross revenues less grants and contributions. Affiliate fees amounted to \$31,614 and \$24,889, as of December 31, 2018 and 2017, respectively.

There are also certain promotional items that the National YMCA sells to its affiliates. This amount is immaterial and varies from year to year.

Other related parties also include the members of the board. Transactions between the YMCA and its board members include memberships purchased at full price and non-reciprocal donations from the members to the YMCA.

Supplementary Information

The Monroe Family YMCA
Statement of Revenues by Department
Year Ended December 31, 2018
(With Summarized Comparative Information for 2017)

	Operating Fund												Total Operating Fund	2018	2017	
	Aquatics	Fitness	Youth Sports	School Age Programs	Camps	Tennis/ Racquet Sports	Wellness	Food / Off Site	Child Watch	Christian Emphasis	Other Programs	Manage- ment and General				Development
Public support																
Contributions	\$ 5,599	\$ 11,350	\$ 4,747	\$ 3,671	\$ 3,497	\$ 6,497	\$ -	\$ 8,668	\$ 3,497	\$ 3,497	\$ -	\$ 291	\$ 98,697	\$ 150,011	\$ 175,011	\$ 116,594
Revenues																
Memberships	217,954	217,954	-	-	-	217,954	217,953	-	217,954	-	-	-	-	1,089,769	1,089,769	1,068,513
Program service fees	51,091	36,584	10,072	55,964	88,920	116,423	-	38,341	1,907	1,789	-	-	-	401,091	401,091	420,888
Grants	7,111	12,020	1,111	1,111	1,111	1,111	-	95,329	1,111	1,111	65,000	-	-	186,126	186,126	122,646
Special events	923	5,248	421	421	1,124	421	-	421	421	421	-	-	-	9,821	9,821	9,936
Other revenue	845	2,925	-	-	-	123	-	5,647	-	-	-	2,114	1,925	13,579	13,579	2,725
Total revenues	<u>\$283,523</u>	<u>\$286,081</u>	<u>\$ 16,361</u>	<u>\$ 61,167</u>	<u>\$ 94,652</u>	<u>\$342,529</u>	<u>\$217,953</u>	<u>\$148,406</u>	<u>\$224,890</u>	<u>\$ 6,818</u>	<u>\$ 65,000</u>	<u>\$ 2,405</u>	<u>\$ 100,622</u>	<u>\$1,850,397</u>	\$ 1,875,397	<u>\$ 1,741,302</u>