

PUBLIC DISCLOSURE COPY

EXTENDED TO MAY 15, 2026

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form 990

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.

2024
Open to Public Inspection

A For the 2024 calendar year, or tax year beginning JUL 1, 2024 and ending JUN 30, 2025

B Check if applicable: C Name of organization: YOUNG MEN'S CHRISTIAN ASSOCIATION OF SAN FRANCISCO
D Employer identification number: 94-0997140
E Telephone number: (415) 777-9622
G Gross receipts \$: 134,430,218.
H(a) Is this a group return for subordinates? No
H(b) Are all subordinates included? No
I Tax-exempt status: 501(c)(3)
J Website: WWW.YMCASF.ORG
K Form of organization: Corporation
L Year of formation: 1853
M State of legal domicile: CA

Part I Summary
Table with columns for Revenue, Expenses, and Net Assets or Fund Balances. Rows include mission statement, membership counts, revenue breakdown, expenses, and asset/liability totals for prior and current years.

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 MITTIE S. GRIGSBY, SVP & CEO / TREASURER
Paid Preparer: MICHAEL LUMSDEN, BAKER TILLY ADVISORY GROUP, LP
Firm's address: 333 BUSH STREET, STE 1000, SAN FRANCISCO, CA 94104

May the IRS discuss this return with the preparer shown above? See instructions [X] Yes [ ] No

YOUNG MEN'S CHRISTIAN ASSOCIATION  
OF SAN FRANCISCO

Form 990 (2024)

94-0997140 Page 2

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:  
OUR MISSION IS TO BUILD HEALTHY, SUSTAINABLE, AND EQUITABLE  
COMMUNITIES FOR ALL GENERATIONS.

2 Did the organization undertake any significant program services during the year which were not listed on the  
prior Form 990 or 990-EZ?  Yes  No  
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes  No  
If "Yes," describe these changes on Schedule O.

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

4a (Code: ) (Expenses \$ 53,870,572. including grants of \$ 1,782,395. ) (Revenue \$ 10,868,778. )  
ECONOMIC & SOCIAL MOBILITY: WE CHAMPION ECONOMIC AND SOCIAL MOBILITY BY  
FOSTERING PATHWAYS TO EDUCATION, EMPLOYMENT, AND FINANCIAL STABILITY.  
WE PARTNER WITH CITY AND COUNTY LEADERSHIP TO ENSURE LONG-TERM  
SUSTAINABILITY OF ANCHOR EFFORTS TOWARDS GENERATIONAL ECONOMIC AND  
SOCIAL MOBILITY. THROUGH CAREER DEVELOPMENT PROGRAMS, TRAINING,  
COMMUNITY NAVIGATION AND REFERRAL SERVICES, BARRIER REMOVAL EFFORTS,  
ACADEMIC ACHIEVEMENT, AND DIGITAL ACCESS EFFORTS, WE EMPOWER  
INDIVIDUALS TOWARDS LASTING ECONOMIC AND SOCIAL MOBILITY. WE PROVIDE  
JOB READINESS AND SKILLS DEVELOPMENT THROUGH LEARNING HUBS, ALTERNATIVE  
EDUCATION, WORKFORCE/EMPLOYMENT TRAINING, AND INTERNSHIP/APPRENTICESHIP  
PARTNERSHIPS WITH LOCAL ORGANIZATIONS AND COMPANIES ACROSS THE BAY  
AREA. OUR FINANCIAL ASSISTANCE AND POVERTY ALLEVIATION EFFORTS ENSURE

4b (Code: ) (Expenses \$ 34,853,669. including grants of \$ 0. ) (Revenue \$ 22,489,121. )  
COMMUNITY WELL-BEING: THE YMCA IS A LEADING CATALYST AND PROVIDER OF  
WHOLE-PERSON HEALTH - SPIRIT, MIND AND BODY. WE CREATE SAFE,  
WELCOMING, AND INCLUSIVE SPACES THAT PROMOTE PHYSICAL AND MENTAL  
WELL-BEING, SOCIAL CONNECTION, AND COMMUNITY BRIDGE-BUILDING. OUR  
HOLISTIC AND CULTURALLY RESPONSIVE HEALTH AND WELL-BEING PROGRAMS  
CONSIST OF INDIVIDUAL AND GROUP EXERCISE, YOUTH AND ADULT SPORTS,  
REHABILITATION AND REENGAGEMENT PROGRAMS, AQUATICS, MENTAL WELLNESS  
EDUCATION, AND MORE. WE PRIORITIZE HUMAN-CENTERED WELL-BEING  
OPPORTUNITIES THROUGH DONOR-FUNDED FINANCIAL ASSISTANCE, AND ENSURE ALL  
INDIVIDUALS, REGARDLESS OF INCOME OR BACKGROUND, HAVE ACCESS TO HIGH  
IMPACT AND QUALITY OPPORTUNITIES, ALIGNING WITH OUR EFFORTS TO BUILD  
THRIVING COMMUNITIES. WE ENSURE THAT OUR PROGRAMS ENHANCE QUALITY OF

4c (Code: ) (Expenses \$ 15,524,087. including grants of \$ 0. ) (Revenue \$ 18,706,577. )  
YOUTH DEVELOPMENT - ALL AGES AND LIFE STAGES: AT THE YMCA, WE STRIVE TO  
CREATE A SAFE AND INCLUSIVE COMMUNITY WHERE INDIVIDUALS AND FAMILIES OF  
ALL AGES - ESPECIALLY YOUTH - CAN DISCOVER AND NURTURE THEIR POTENTIAL.  
WE BELIEVE THAT GROWTH AND LEARNING ARE LIFELONG JOURNEYS AND ARE  
PRIVILEGED TO SUPPORT INDIVIDUALS AT EVERY STAGE OF LIFE. THROUGH  
EARLY CHILDHOOD, YOUTH AND LEADERSHIP DEVELOPMENT, AND INITIATIVES THAT  
BRIDGE GENERATIONS, WE AIM TO CULTIVATE STRONG VALUES, ENCOURAGE  
LEARNING, AND FOSTER MEANINGFUL ENGAGEMENT. OUR YOUTH PROGRAMS FOCUS  
ON BUILDING ESSENTIAL COGNITIVE, SOCIAL-EMOTIONAL, LEADERSHIP, AND LIFE  
SKILLS, GROUNDED IN CORE VALUES. WE OFFER OPPORTUNITIES FOR  
EMPOWERMENT, INCLUDING THERAPEUTIC MENTORING AND LEADERSHIP  
DEVELOPMENT, WITH THE HOPE OF FOSTERING SELF-CONFIDENCE, ADVOCACY

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

4e Total program service expenses 104,248,328.

Form 990 (2024)

**YOUNG MEN'S CHRISTIAN ASSOCIATION  
OF SAN FRANCISCO**

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> 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> .....	<b>X</b>	
<b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions .....	<b>X</b>	
<b>3</b> 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> .....		<b>X</b>
<b>4 Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i> .....	<b>X</b>	
<b>5</b> 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 Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i> .....		<b>X</b>
<b>6</b> 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> .....		<b>X</b>
<b>7</b> 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> .....		<b>X</b>
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> .....		<b>X</b>
<b>9</b> 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> .....		<b>X</b>
<b>10</b> Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> .....	<b>X</b>	
<b>11</b> 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.		
<b>a</b> 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> .....	<b>X</b>	
<b>b</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> .....		<b>X</b>
<b>c</b> 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> .....		<b>X</b>
<b>d</b> 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> .....		<b>X</b>
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> .....	<b>X</b>	
<b>f</b> 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> .....	<b>X</b>	
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> .....	<b>X</b>	
<b>b</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> .....		<b>X</b>
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> .....		<b>X</b>
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States? .....		<b>X</b>
<b>b</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> .....		<b>X</b>
<b>15</b> 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> .....		<b>X</b>
<b>16</b> 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> .....		<b>X</b>
<b>17</b> 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.</i> See instructions .....		<b>X</b>
<b>18</b> 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> .....	<b>X</b>	
<b>19</b> 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> .....		<b>X</b>
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> .....		<b>X</b>
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .....		
<b>21</b> 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> .....	<b>X</b>	

**YOUNG MEN'S CHRISTIAN ASSOCIATION  
OF SAN FRANCISCO**

Form 990 (2024)

94-0997140 Page 4

**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> .....	X	
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> .....	X	
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> .....	X	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....		X
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? .....		X
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....		X
25a	<b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> .....		X
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> .....		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i> .....		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> .....		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
b	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
29	Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i> .....	X	
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> .....		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....		X
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> .....		X
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> .....		X
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> .....	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....	X	
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> .....		X
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		X
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> .....		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O .....	X	

**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 .....		
	<b>1a</b> 235		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable .....		
	<b>1b</b> 0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? .....	X	
	<b>1c</b>		

**YOUNG MEN'S CHRISTIAN ASSOCIATION  
OF SAN FRANCISCO**

Form 990 (2024)

94-0997140

Page 5

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

		Yes	No
<b>2a</b>	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	2a		2491
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	X	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule O</i>		
<b>4a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
<b>b</b>	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
<b>c</b>	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
<b>6a</b>	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	X	
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year		
	7d		
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b>	Did the sponsoring organization make any taxable distributions under section 4966?		
<b>b</b>	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12	10a	
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		
<b>a</b>	Gross income from members or shareholders	11a	
<b>b</b>	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	12a	
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>a</b>	Is the organization licensed to issue qualified health plans in more than one state? <b>Note:</b> See the instructions for additional information the organization must report on Schedule O.	13a	
<b>b</b>	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
<b>c</b>	Enter the amount of reserves on hand	13c	
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?		X
<b>b</b>	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	14b	
<b>15</b>	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	15	X
<b>16</b>	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	X
<b>17</b>	<b>Section 501(c)(21) organizations.</b> Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	17	

**YOUNG MEN'S CHRISTIAN ASSOCIATION  
OF SAN FRANCISCO**

Form 990 (2024)

94-0997140 Page 6

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

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

**Section A. Governing Body and Management**

			Yes	No
<b>1a</b> 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 on Schedule O.	<b>1a</b>	30		
<b>b</b> Enter the number of voting members included on line 1a, above, who are independent	<b>1b</b>	29		
<b>2</b> 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?	<b>2</b>			<b>X</b>
<b>3</b> Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	<b>3</b>			<b>X</b>
<b>4</b> Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	<b>4</b>			<b>X</b>
<b>5</b> Did the organization become aware during the year of a significant diversion of the organization's assets?	<b>5</b>			<b>X</b>
<b>6</b> Did the organization have members or stockholders?	<b>6</b>			<b>X</b>
<b>7a</b> 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?	<b>7a</b>			<b>X</b>
<b>b</b> Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	<b>7b</b>			<b>X</b>
<b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
<b>a</b> The governing body?	<b>8a</b>		<b>X</b>	
<b>b</b> Each committee with authority to act on behalf of the governing body?	<b>8b</b>		<b>X</b>	
<b>9</b> Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	<b>9</b>			<b>X</b>

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

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

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed CA
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
 Own website     Another's website     Upon request     Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records  
**MITTIE S. GRIGSBY - (415) 281-6707**  
**169 STEUART STREET, SAN FRANCISCO, CA 94105**

**YOUNG MEN'S CHRISTIAN ASSOCIATION  
OF SAN FRANCISCO**

Form 990 (2024)

94-0997140 Page 7

**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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
  - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
  - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below 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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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) JAMIE BRUNING-MILES PRESIDENT & CEO	50.00	X		X				489,560.	0.	69,475.
(2) WESLEY "CHIP" RICH SVP & CO-COO	50.00				X			276,093.	0.	41,676.
(3) MITTIE GRIGSBY SVP & CFO / TREASURER	50.00			X				252,525.	0.	50,886.
(4) TAKIJA GARDNER SVP, GOV'T RELATIONS & EXT AFFAIRS	50.00				X			238,892.	0.	47,451.
(5) CHRIS MCCOMIC VP, PROPERTY DEVELOPMENT	50.00				X			225,872.	0.	46,062.
(6) ERIN CLARK SVP & CO-COO	50.00				X			246,960.	0.	17,347.
(7) CHAD NICO HIU SVP, STRATEGY, EQUITY, AND IMPACT	50.00				X			215,642.	0.	48,056.
(8) MARCOS SANTIAGO CAO & SVP, MRKTG/COMMS (THRU 6/2025)	50.00				X			219,598.	0.	16,294.
(9) RICH HILLEBRECHT VP, TECHNOLOGY	50.00				X			210,033.	0.	12,098.
(10) INGRID FREED VP, HR & PEOPLE SERVICES	50.00				X			180,268.	0.	36,928.
(11) RACHEL DEL MONTE VP, MEMBERSHIP EXP (THRU 12/2024)	50.00				X			178,010.	0.	38,537.
(12) ROSANNA GOMEZ AVP, LEADERSHIP DEV & INT'L RELATION	50.00				X			176,640.	0.	34,378.
(13) MANUEL RODRIGUEZ SENIOR EXECUTIVE DIRECTOR	50.00					X		168,234.	0.	33,744.
(14) KARI LEE AVP OPERATIONS & GDEI	50.00					X		167,810.	0.	33,747.
(15) CHRISTINA PINHEIRO CHIEF PEOPLE OFFICER	50.00				X			184,067.	0.	17,347.
(16) LAUREN CLAPPERTON AVP, HEALTH INITIATIVES & COMMUNITY	50.00				X			167,336.	0.	33,099.
(17) LARA HITCHCOCK AVP, PEOPLE STRATEGY	50.00					X		164,938.	0.	33,683.

**YOUNG MEN'S CHRISTIAN ASSOCIATION  
OF SAN FRANCISCO**

Form 990 (2024)

94-0997140 Page **8**

**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 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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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			
(18) MARISSA COWAN VP, CHILD & YOUTH DEVELOPMENT	50.00				X		170,146.	0.	24,861.	
(19) WENDY TANG SR, DIRECTOR, FP&A AND COMPLIANCE	50.00					X	159,511.	0.	31,376.	
(20) EVELYN DASKALAKIS VP, SOCIAL SERVICES & MENTAL HEALTH	50.00				X		166,766.	0.	20,248.	
(21) PHILIP MARABANTE DIR OF IT INFRASTRUCTURE & WORKFORCE	50.00				X		168,946.	0.	12,142.	
(22) GINA GREGORY-BURNS BOARD CHAIR	1.00	X		X			0.	0.	0.	
(23) STEPHEN HANKINS BOARD VICE CHAIR	1.00	X		X			0.	0.	0.	
(24) CARYL B. WELBORN BOARD SECRETARY	1.00	X		X			0.	0.	0.	
(25) JORGE ABAUNZA BOARD MEMBER	1.00	X					0.	0.	0.	
(26) DILLON AUYOUNG BOARD MEMBER	1.00	X					0.	0.	0.	
<b>1b Subtotal</b>							4,427,847.	0.	699,435.	
<b>c Total from continuation sheets to Part VII, Section A</b>							0.	0.	0.	
<b>d Total (add lines 1b and 1c)</b>							4,427,847.	0.	699,435.	

**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 81

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

**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
DOME CONSTRUCTION CORPORATION, 393 EAST GRAND AVE, SOUTH SAN FRANCISCO, CA 94080	CONSTRUCTION / RENOVATION SERVICES	3,532,714.
A TO Z JANITORIAL SERVICES, INC 290 CANYON DRIVE, DALY CITY, CA 94014	CLEANING SERVICES	2,577,113.
CHARLES PANKOW BUILDERS, LTD. 1111 BROADWAY SUITE 200, OAKLAND, CA 94607	CONSTRUCTION / RENOVATION SERVICES	1,028,282.
AWT CONSTRUCTION GROUP, 77 SOLANO SQUARE SUITE 300, BENICIA, CA 94510	CONSTRUCTION / RENOVATION SERVICES	1,007,790.
ZUM SF, INC. PO BOX 103448, PASADENA, CA 91189-3448	TRANSPORTATION SERVICES	671,607.

**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 33

**SEE PART VII, SECTION A CONTINUATION SHEETS**

Form **990** (2024)

**YOUNG MEN'S CHRISTIAN ASSOCIATION  
OF SAN FRANCISCO**

Form 990

94-0997140

**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 line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) JOHN BAKER BOARD MEMBER	1.00	X					0.	0.	0.	
(28) MARK BLEY BOARD MEMBER	1.00	X					0.	0.	0.	
(29) ANNABEL CHANG BOARD MEMBER	1.00	X					0.	0.	0.	
(30) RICHARD CHISHOLM BOARD MEMBER	1.00	X					0.	0.	0.	
(31) JON EBERLY BOARD MEMBER	1.00	X					0.	0.	0.	
(32) JOSUE ESTRADA BOARD MEMBER	1.00	X					0.	0.	0.	
(33) GLENN M. FARRELL BOARD MEMBER	1.00	X					0.	0.	0.	
(34) JENNIFER GRIDLEY BOARD MEMBER	1.00	X					0.	0.	0.	
(35) STEPHEN HAYES BOARD MEMBER	1.00	X					0.	0.	0.	
(36) THOMAS KEARNEY BOARD MEMBER	1.00	X					0.	0.	0.	
(37) DAVID KELLY BOARD MEMBER	1.00	X					0.	0.	0.	
(38) GREG NARVICK BOARD MEMBER	1.00	X					0.	0.	0.	
(39) MICHAEL O'CONNOR BOARD MEMBER	1.00	X					0.	0.	0.	
(40) SHELBY PASARELL TSAI BOARD MEMBER	1.00	X					0.	0.	0.	
(41) MARIANNA PISANO BOARD MEMBER	1.00	X					0.	0.	0.	
(42) AMY PRICE BOARD MEMBER	1.00	X					0.	0.	0.	
(43) ERIC PROSNITZ BOARD MEMBER	1.00	X					0.	0.	0.	
(44) RICHARD ROBINS BOARD MEMBER	1.00	X					0.	0.	0.	
(45) STEPHEN ROGERS BOARD MEMBER	1.00	X					0.	0.	0.	
(46) PETER M. SUSKO BOARD MEMBER	1.00	X					0.	0.	0.	
Total to Part VII, Section A, line 1c .....										



**YOUNG MEN'S CHRISTIAN ASSOCIATION  
OF SAN FRANCISCO**

Form 990 (2024)

94-0997140 Page **9**

**Part VIII Statement of Revenue**

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1 a</b> Federated campaigns .....	<b>1a</b>					
	<b>b</b> Membership dues .....	<b>1b</b>					
	<b>c</b> Fundraising events .....	<b>1c</b>	803,205.				
	<b>d</b> Related organizations .....	<b>1d</b>					
	<b>e</b> Government grants (contributions) .....	<b>1e</b>	49,576,793.				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above ...	<b>1f</b>	14,204,537.				
	<b>g</b> Noncash contributions included in lines 1a-1f .....	<b>1g</b>	\$ 476,869.				
	<b>h Total.</b> Add lines 1a-1f .....			64,584,535.			
<b>Program Service Revenue</b>	<b>2 a</b> MEMBERSHIP DUES	<b>Business Code</b>					
		813410	22,489,121.	22489121.			
	<b>b</b> CHILD AND YOUTH DEVELOPMENT FEES	813410	18,706,577.	18706577.			
	<b>c</b> CAMPING FEES	813410	7,040,021.	7,040,021.			
	<b>d</b> OTHER PROGRAM FEES	813410	3,731,299.	3,731,299.			
	<b>e</b> RESIDENCE ROOM RENTALS	813410	97,458.	97,458.			
	<b>f</b> All other program service revenue .....						
<b>g Total.</b> Add lines 2a-2f .....			52,064,476.				
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts) .....		1,097,700.			1097700.	
	<b>4</b> Income from investment of tax-exempt bond proceeds .....						
	<b>5</b> Royalties .....						
	<b>6 a</b> Gross rents .....	<b>6a</b>	(i) Real				
				1,888,024.			
			<b>b</b> Less: rental expenses ...	<b>6b</b>	110,447.		
	<b>c</b> Rental income or (loss)	<b>6c</b>	1,777,577.				
	<b>d</b> Net rental income or (loss) .....			1,777,577.			1777577.
	<b>7 a</b> Gross amount from sales of assets other than inventory .....	<b>7a</b>	(i) Securities				
				14,166,397.			
			<b>b</b> Less: cost or other basis and sales expenses .....	<b>7b</b>	12,056,818.		
	<b>c</b> Gain or (loss) .....	<b>7c</b>	2,109,579.				
	<b>d</b> Net gain or (loss) .....			2,109,579.			2109579.
	<b>8 a</b> Gross income from fundraising events (not including \$ 803,205. of contributions reported on line 1c). See Part IV, line 18 .....	<b>8a</b>		122,698.			
<b>b</b> Less: direct expenses .....			<b>8b</b>	615,756.			
<b>c</b> Net income or (loss) from fundraising events .....			-493,058.			-493,058.	
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19 .....	<b>9a</b>						
		<b>b</b> Less: direct expenses .....	<b>9b</b>				
<b>c</b> Net income or (loss) from gaming activities .....							
<b>10 a</b> Gross sales of inventory, less returns and allowances .....	<b>10a</b>		82,018.				
		<b>b</b> Less: cost of goods sold .....	<b>10b</b>	66,986.			
		<b>c</b> Net income or (loss) from sales of inventory .....			15,032.		
<b>Miscellaneous Revenue</b>	<b>11 a</b> MISCELLANEOUS REVENUE	<b>Business Code</b>					
		900099	357,196.			357,196.	
	<b>b</b> LOCKERS	713940	67,174.			67,174.	
	<b>c</b> .....						
	<b>d</b> All other revenue .....						
<b>e Total.</b> Add lines 11a-11d .....			424,370.				
<b>12 Total revenue.</b> See instructions .....			121580211.	52064476.	0.	4931200.	

**YOUNG MEN'S CHRISTIAN ASSOCIATION  
OF SAN FRANCISCO**

Form 990 (2024)

94-0997140 Page 10

**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 ...	1,476,766.	1,476,766.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22 .....	305,629.	305,629.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 .....				
4 Benefits paid to or for members .....				
5 Compensation of current officers, directors, trustees, and key employees .....	4,153,155.	1,878,443.	2,038,820.	235,892.
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 .....	59,104,762.	53,600,352.	4,169,309.	1,335,101.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	4,357,534.	3,970,394.	274,864.	112,276.
9 Other employee benefits .....	7,747,458.	6,921,137.	640,998.	185,323.
10 Payroll taxes .....	5,000,836.	4,404,118.	472,725.	123,993.
11 Fees for services (nonemployees):				
a Management .....				
b Legal .....	211,990.		211,990.	
c Accounting .....	141,495.		141,495.	
d Lobbying .....				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees .....				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	5,445,153.	3,730,649.	1,602,504.	112,000.
12 Advertising and promotion .....	18,386.	16,348.	1,132.	906.
13 Office expenses .....	2,921,555.	2,785,091.	123,551.	12,913.
14 Information technology .....	1,921,234.	1,369,095.	515,604.	36,535.
15 Royalties .....				
16 Occupancy .....	7,628,473.	7,537,022.	85,534.	5,917.
17 Travel .....	479,371.	426,222.	29,520.	23,629.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings .....	630,669.	560,746.	38,837.	31,086.
20 Interest .....	712,818.	712,818.		
21 Payments to affiliates .....	629,290.	586,886.	42,339.	65.
22 Depreciation, depletion, and amortization .....	4,421,896.	4,392,458.	29,438.	
23 Insurance .....	752,419.	735,009.	17,410.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a <b>PROG SUPPLIES/MATERIALS</b>	7,487,022.	7,395,016.	19,118.	72,888.
b <b>EQUIPMENT</b>	734,538.	701,537.	30,307.	2,694.
c <b>BAD DEBT EXPENSE</b>	282,367.	282,367.		
d <b>RECRUITMENT/RELOCATION</b>	113,940.	101,308.	7,016.	5,616.
e All other expenses	402,312.	358,917.	24,102.	19,293.
<b>25 Total functional expenses.</b> Add lines 1 through 24e	117,081,068.	104,248,328.	10,516,613.	2,316,127.
26 <b>Joint costs.</b> 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)				

**YOUNG MEN'S CHRISTIAN ASSOCIATION  
OF SAN FRANCISCO**

Form 990 (2024)

94-0997140 Page 11

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year	
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	0.	<b>1</b>	2,487,280.	
	<b>2</b> Savings and temporary cash investments .....	8,096,075.	<b>2</b>	9,892,855.	
	<b>3</b> Pledges and grants receivable, net .....	18,175,375.	<b>3</b>	16,998,506.	
	<b>4</b> Accounts receivable, net .....	1,923,484.	<b>4</b>	2,428,939.	
	<b>5</b> Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>5</b>		
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		<b>6</b>		
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>		
	<b>8</b> Inventories for sale or use .....	12,202.	<b>8</b>	12,202.	
	<b>9</b> Prepaid expenses and deferred charges .....	216,255.	<b>9</b>	885,180.	
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 141,636,789.			
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 77,120,060.			
	<b>11</b> Investments - publicly traded securities .....	58,303,906.	<b>10c</b>	64,516,729.	
	<b>12</b> Investments - other securities. See Part IV, line 11 .....	30,292,235.	<b>11</b>	28,464,734.	
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>12</b>		
	<b>14</b> Intangible assets .....		<b>13</b>		
	<b>15</b> Other assets. See Part IV, line 11 .....	5,360,488.	<b>14</b>	4,733,743.	
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	122,380,020.	<b>15</b>	130,420,168.		
<b>17</b> Accounts payable and accrued expenses .....	13,796,114.	<b>16</b>	13,980,153.		
<b>18</b> Grants payable .....		<b>17</b>			
<b>19</b> Deferred revenue .....	3,873,461.	<b>18</b>	3,734,866.		
<b>20</b> Tax-exempt bond liabilities .....	16,721,371.	<b>19</b>	16,245,118.		
<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>20</b>			
<b>22</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>21</b>			
<b>23</b> Secured mortgages and notes payable to unrelated third parties .....	3,289,695.	<b>22</b>	5,626,962.		
<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>23</b>			
<b>25</b> 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 .....	3,525,637.	<b>24</b>	4,470,352.		
<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 .....	41,206,278.	<b>25</b>	44,057,451.		
<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 .....		<b>26</b>			
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>				
	<b>27</b> Net assets without donor restrictions .....	59,909,351.	<b>27</b>	60,344,917.	
	<b>28</b> Net assets with donor restrictions .....	21,264,391.	<b>28</b>	26,017,800.	
	<b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>				
	<b>29</b> Capital stock or trust principal, or current funds .....		<b>29</b>		
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>30</b>		
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>31</b>		
	<b>32</b> Total net assets or fund balances .....	81,173,742.	<b>32</b>	86,362,717.	
	<b>33</b> Total liabilities and net assets/fund balances .....	122,380,020.	<b>33</b>	130,420,168.	

Form 990 (2024)

**YOUNG MEN'S CHRISTIAN ASSOCIATION  
OF SAN FRANCISCO**

Form 990 (2024)

94-0997140 Page **12**

**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	121,580,211.
2 Total expenses (must equal Part IX, column (A), line 25) .....	2	117,081,068.
3 Revenue less expenses. Subtract line 2 from line 1 .....	3	4,499,143.
4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) .....	4	81,173,742.
5 Net unrealized gains (losses) on investments .....	5	702,030.
6 Donated services and use of facilities .....	6	
7 Investment expenses .....	7	
8 Prior period adjustments .....	8	
9 Other changes in net assets or fund balances (explain on Schedule O) .....	9	-12,198.
10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) .....	10	86,362,717.

**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 on Schedule O.			
2a Were the organization's financial statements compiled or reviewed by an independent accountant? .....	2a		X
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? .....	2b	X	
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? .....	2c	X	
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.			
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F? .....	3a	X	
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits .....	3b	X	

Form **990** (2024)



**YOUNG MEN'S CHRISTIAN ASSOCIATION  
OF SAN FRANCISCO**

**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) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	66737269.	59063995.	55602410.	70784977.	64584535.	316773186
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 through 3 .....	66737269.	59063995.	55602410.	70784977.	64584535.	316773186
<b>5</b> 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) .....						
<b>6 Public support.</b> Subtract line 5 from line 4.						316773186

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
<b>7</b> Amounts from line 4 .....	66737269.	59063995.	55602410.	70784977.	64584535.	316773186
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....	1349235.	2398739.	3001893.	2936924.	2985724.	12672515.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....	384,247.	533,322.	9974325.	390,029.	506,388.	11788311.
<b>11 Total support.</b> Add lines 7 through 10						341234012
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12 179,975,149.	
<b>13 First 5 years.</b> 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 <b>stop here</b> .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f)) .....	<b>14</b>	92.83 %
<b>15</b> Public support percentage from 2023 Schedule A, Part II, line 14 .....	<b>15</b>	92.71 %
<b>16a 33 1/3% support test - 2024.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input checked="" type="checkbox"/>
<b>b 33 1/3% support test - 2023.</b> 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 <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>17a 10% -facts-and-circumstances test - 2024.</b> 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 <b>stop here.</b> 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>b 10% -facts-and-circumstances test - 2023.</b> 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 <b>stop here.</b> 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>18 Private foundation.</b> 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"/>

**YOUNG MEN'S CHRISTIAN ASSOCIATION  
OF SAN FRANCISCO**

**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) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> 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 .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</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 .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						

**14 First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2024 (line 8, column (f), divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2023 Schedule A, Part III, line 15 .....	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2024 (line 10c, column (f), divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from 2023 Schedule A, Part III, line 17 .....	<b>18</b>	%

**19a 33 1/3% support tests - 2024.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

**b 33 1/3% support tests - 2023.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

**YOUNG MEN'S CHRISTIAN ASSOCIATION  
OF SAN FRANCISCO**

**Part IV Supporting Organizations**

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

**Section A. All Supporting Organizations**

	Yes	No
<b>1</b> 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>		
<b>2</b> 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>		
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
<b>b</b> Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
<b>c</b> 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>		
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
<b>c</b> 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>		
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
<b>b Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
<b>c Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>6</b> 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>		
<b>7</b> 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).</i>		
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
<b>9a</b> Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
<b>b</b> Did one or more disqualified persons (as defined on 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>		
<b>c</b> Did a disqualified person (as defined on 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>		
<b>10a</b> 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 line 10b below.</i>		
<b>b</b> Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

**YOUNG MEN'S CHRISTIAN ASSOCIATION  
OF SAN FRANCISCO**

**Part IV Supporting Organizations** *(continued)*

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

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, 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 officers, 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>		
<b>2</b> 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>		
<b>1</b>		
<b>2</b>		

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> 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>		
<b>1</b>		

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> 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?		
<b>2</b> 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>		
<b>3</b> By reason of the relationship described on line 2, above, 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>		
<b>1</b>		
<b>2</b>		
<b>3</b>		

**Section E. Type III Functionally Integrated Supporting Organizations**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).		
<b>2</b> Activities Test. Answer lines 2a and 2b below.		
<b>a</b> 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>		
<b>b</b> Did the activities described on line 2a, above, 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>		
<b>3</b> Parent of Supported Organizations. Answer lines 3a and 3b below.		
<b>a</b> 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>If "Yes" or "No," provide details in Part VI.</i>		
<b>b</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>		
<b>2a</b>		
<b>2b</b>		
<b>3a</b>		
<b>3b</b>		

**YOUNG MEN'S CHRISTIAN ASSOCIATION  
OF SAN FRANCISCO**

**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.

<b>Section A - Adjusted Net Income</b>		(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	<b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	8	

<b>Section B - Minimum Asset Amount</b>		(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	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors ( <i>explain in detail in Part VI</i> ):		
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 0.015 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 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	

<b>Section C - Distributable Amount</b>		(A) Prior Year	(B) Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	Current Year
2	Enter 0.85 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	<b>Distributable Amount.</b> 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).		

**YOUNG MEN'S CHRISTIAN ASSOCIATION  
OF SAN FRANCISCO**

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

<b>Section D - Distributions</b>		<b>Current Year</b>
<b>1</b>	Amounts paid to supported organizations to accomplish exempt purposes	<b>1</b>
<b>2</b>	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	<b>2</b>
<b>3</b>	Administrative expenses paid to accomplish exempt purposes of supported organizations	<b>3</b>
<b>4</b>	Amounts paid to acquire exempt-use assets	<b>4</b>
<b>5</b>	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i> )	<b>5</b>
<b>6</b>	Other distributions (describe in <b>Part VI</b> ). See instructions.	<b>6</b>
<b>7</b>	<b>Total annual distributions.</b> Add lines 1 through 6.	<b>7</b>
<b>8</b>	Distributions to attentive supported organizations to which the organization is responsive ( <i>provide details in Part VI</i> ). See instructions.	<b>8</b>
<b>9</b>	Distributable amount for 2024 from Section C, line 6	<b>9</b>
<b>10</b>	Line 8 amount divided by line 9 amount	<b>10</b>

<b>Section E - Distribution Allocations</b> (see instructions)	<b>(i) Excess Distributions</b>	<b>(ii) Underdistributions Pre-2024</b>	<b>(iii) Distributable Amount for 2024</b>
<b>1</b> Distributable amount for 2024 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2024 (reasonable cause required - <i>explain in Part VI</i> ). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2024			
<b>a</b> From 2019			
<b>b</b> From 2020			
<b>c</b> From 2021			
<b>d</b> From 2022			
<b>e</b> From 2023			
<b>f</b> <b>Total</b> of lines 3a through 3e			
<b>g</b> Applied to under distributions of prior years			
<b>h</b> Applied to 2024 distributable amount			
<b>i</b> Carryover from 2019 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
<b>4</b> Distributions for 2024 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2024 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from line 4.			
<b>5</b> Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
<b>6</b> Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
<b>7</b> <b>Excess distributions carryover to 2025.</b> Add lines 3j and 4c.			
<b>8</b> Breakdown of line 7:			
<b>a</b> Excess from 2020			
<b>b</b> Excess from 2021			
<b>c</b> Excess from 2022			
<b>d</b> Excess from 2023			
<b>e</b> Excess from 2024			

YOUNG MEN'S CHRISTIAN ASSOCIATION  
OF SAN FRANCISCO

Schedule A (Form 990) 2024

94-0997140 Page 8

**Part VI**

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

**SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:**

**GROSS SALES OF INVENTORY**

2020 AMOUNT: \$ 1,842.  
2021 AMOUNT: \$ 52,410.  
2022 AMOUNT: \$ 49,387.  
2023 AMOUNT: \$ 60,064.  
2024 AMOUNT: \$ 82,018.

**LOCKERS / SALES TO THE PUBLIC & ADMIN FEES**

2020 AMOUNT: \$ 64,037.  
2021 AMOUNT: \$ 53,437.  
2022 AMOUNT: \$ 63,192.  
2023 AMOUNT: \$ 64,234.  
2024 AMOUNT: \$ 67,174.

**INSURANCE REIMBURSEMENTS**

2020 AMOUNT: \$ 17,645.  
2021 AMOUNT: \$ 23,636.  
2022 AMOUNT: \$ 3,069.

**MISCELLANEOUS REVENUE**

2020 AMOUNT: \$ 300,723.  
2021 AMOUNT: \$ 403,839.  
2022 AMOUNT: \$ 338,431.  
2023 AMOUNT: \$ 265,731.  
2024 AMOUNT: \$ 357,196.

**SALE OF EASEMENT**

2022 AMOUNT: \$ 9,520,246.

Schedule B (Form 990)

(Rev. December 2024) Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

Table with 2 columns: Name of the organization (YOUNG MEN'S CHRISTIAN ASSOCIATION OF SAN FRANCISCO) and Employer identification number (94-0997140)

Organization type (check one):

Filers of:

Section:

- Form 990 or 990-EZ: [X] 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

- [X] For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), 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), 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).

Name of organization <b>YOUNG MEN'S CHRISTIAN ASSOCIATION OF SAN FRANCISCO</b>	Employer identification number <b>94-0997140</b>
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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
<u>1</u>	<hr/> <hr/> <hr/>	\$ <u>13,137,710.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>2</u>	<hr/> <hr/> <hr/>	\$ <u>10,591,622.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>3</u>	<hr/> <hr/> <hr/>	\$ <u>5,050,167.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>4</u>	<hr/> <hr/> <hr/>	\$ <u>3,212,686.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>5</u>	<hr/> <hr/> <hr/>	\$ <u>3,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>6</u>	<hr/> <hr/> <hr/>	\$ <u>2,644,140.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization <b>YOUNG MEN'S CHRISTIAN ASSOCIATION OF SAN FRANCISCO</b>	Employer identification number <b>94-0997140</b>
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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
7	<hr/> <hr/> <hr/>	\$ <u>2,594,105.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	<hr/> <hr/> <hr/>	\$ <u>1,635,244.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	<hr/> <hr/> <hr/>	\$ <u>1,500,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization <b>YOUNG MEN'S CHRISTIAN ASSOCIATION OF SAN FRANCISCO</b>	Employer identification number <b>94-0997140</b>
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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 <b>YOUNG MEN'S CHRISTIAN ASSOCIATION OF SAN FRANCISCO</b>	Employer identification number <b>94-0997140</b>
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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 info. once.) \$ \_\_\_\_\_  
 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
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	

**SCHEDULE C**  
**(Form 990)**

**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

**2024**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

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

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

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

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

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

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

Name of organization <b>YOUNG MEN'S CHRISTIAN ASSOCIATION OF SAN FRANCISCO</b>	Employer identification number (EIN) <b>94-0997140</b>
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**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

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

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

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

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

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

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

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

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

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

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2021	(b) 2022	(c) 2023	(d) 2024	(e) Total
<b>2a</b> Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots nontaxable amount					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					
<b>f</b> Grassroots lobbying expenditures					

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

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a)		(b)
	Yes	No	Amount
<b>1</b> During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
<b>a</b> Volunteers?		X	
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X	
<b>c</b> Media advertisements?		X	
<b>d</b> Mailings to members, legislators, or the public?		X	
<b>e</b> Publications, or published or broadcast statements?		X	
<b>f</b> Grants to other organizations for lobbying purposes?		X	
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body?	X		0.
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
<b>i</b> Other activities?		X	
<b>j</b> Total. Add lines 1c through 1i			0.
<b>2a</b> Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?		X	
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
<b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

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

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

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

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

**Part IV Supplemental Information**

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

**PART II-B, LINE 1, LOBBYING ACTIVITIES:**

THE YMCA OF SAN FRANCISCO HAS WRITTEN LETTERS TO LEGISLATORS IN SUPPORT OF STATE AND LOCAL LEGISLATION THAT IMPACTS THE CHILDREN AND ADULTS IN OUR COMMUNITY, AND HAS BEEN A PARTICIPANT IN EFFORTS TO WRITE, PASS, AND ENDORSE LEGISLATION RELATING TO FUNDING FOR PROGRAMS FOR YOUTH IN SAN FRANCISCO AS WELL AS LEGISLATION RELATED TO HEALTHY EATING. EXPENSES ARE DE MINIMIS AND NOT EASILY QUANTIFIABLE.

THE YMCA OF SAN FRANCISCO WAS NOT INVOLVED IN ANY POLITICAL CAMPAIGNS.

SCHEDULE D

(Form 990)

(Rev. December 2024)

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

Open to Public Inspection

Name of the organization YOUNG MEN'S CHRISTIAN ASSOCIATION OF SAN FRANCISCO

Employer identification number 94-0997140

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 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two yes/no questions about donor property and grant fund usage.

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose of easements, total number and acreage, number of easements on historic structures, and monitoring expenses.

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.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include reporting requirements for art and historical treasures.

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

Schedule D (Form 990) (Rev. 12-2024)

LHA 432051 01-02-25



**YOUNG MEN'S CHRISTIAN ASSOCIATION**

**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)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, line 12, col. (B))		

**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)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, line 13, col. (B))		

**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)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, line 15, col. (B))	

**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) <b>FINANCE LEASE OBLIGATIONS</b>	1,115,514.
(3) <b>LIABILITY TO TRUST BENEFICIARIES</b>	116,431.
(4) <b>OPERATING LEASE LIABILITY</b>	3,084,479.
(5) <b>DEPOSITS</b>	153,928.
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, line 25, col. (B))	4,470,352.

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

**YOUNG MEN'S CHRISTIAN ASSOCIATION**

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

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

<b>1</b>	Total revenue, gains, and other support per audited financial statements	<b>1</b>	123,063,232.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
<b>a</b>	Net unrealized gains (losses) on investments	<b>2a</b>	702,030.
<b>b</b>	Donated services and use of facilities	<b>2b</b>	
<b>c</b>	Recoveries of prior year grants	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	-12,198.
<b>e</b>	Add lines 2a through 2d	<b>2e</b>	689,832.
<b>3</b>	Subtract line 2e from line 1	<b>3</b>	122,373,400.
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	-793,189.
<b>c</b>	Add lines 4a and 4b	<b>4c</b>	-793,189.
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.)	<b>5</b>	121,580,211.

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

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

<b>1</b>	Total expenses and losses per audited financial statements	<b>1</b>	117,874,257.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
<b>a</b>	Donated services and use of facilities	<b>2a</b>	
<b>b</b>	Prior year adjustments	<b>2b</b>	
<b>c</b>	Other losses	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	793,189.
<b>e</b>	Add lines 2a through 2d	<b>2e</b>	793,189.
<b>3</b>	Subtract line 2e from line 1	<b>3</b>	117,081,068.
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	
<b>c</b>	Add lines 4a and 4b	<b>4c</b>	0.
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.)	<b>5</b>	117,081,068.

**Part XIII Supplemental Information**

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

**PART V, LINE 4:**

THE PRINCIPAL OF THE ENDOWMENT FUND IS KEPT IN PERPETUITY AND A PERCENTAGE OF THE TRAILING 20 QUARTERS AVERAGE MARKET VALUE OF THE ENDOWMENT FUND IS DISTRIBUTED TO FUND PROGRAM ACTIVITIES OF THE ORGANIZATION.

**PART X, LINE 2:**

THE ASSOCIATION OPERATES AS A NONPROFIT ORGANIZATION AND HAS BEEN NOTIFIED BY THE TAXING AUTHORITIES THAT IT IS EXEMPT FROM FEDERAL INCOME AND STATE FRANCHISE TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND SECTION 23701D OF THE REVENUE AND TAXATION CODE OF THE STATE OF CALIFORNIA, RESPECTIVELY. ACCORDINGLY, NO PROVISION FOR INCOME TAXES IS INCLUDED IN THE FINANCIAL STATEMENTS. THE ASSOCIATION HAD NO UNRECOGNIZED TAX BENEFITS AT JUNE 30, 2025 OR 2024. THE ASSOCIATION FILES EXEMPT ORGANIZATION RETURNS AND, IF APPLICABLE, UNRELATED BUSINESS INCOME TAX RETURNS IN THE U.S. FEDERAL AND CALIFORNIA JURISDICTIONS. THERE IS NO UNRELATED BUSINESS INCOME TAX FOR THE YEARS ENDED JUNE 30, 2025 AND 2024; AS SUCH, NO PROVISION FOR INCOME TAXES HAS BEEN REFLECTED IN THE ACCOMPANYING FINANCIAL STATEMENTS.

**PART XI, LINE 2D - OTHER ADJUSTMENTS:**

CHANGE IN VALUE OF ASSETS HELD IN CHARITABLE TRUSTS -12,198.

**PART XI, LINE 4B - OTHER ADJUSTMENTS:**

COST OF GOODS SOLD -66,986.  
 FUNDRAISING EVENT EXPENSES -615,756.





**YOUNG MEN'S CHRISTIAN ASSOCIATION**

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		CHINATOWN LNY RUN (event type)	MISSION GOLF (event type)	11 (total number)	
Revenue	1	205,705.	185,805.	534,393.	925,903.
	2	204,454.	146,083.	452,668.	803,205.
	3	1,251.	39,722.	81,725.	122,698.
Direct Expenses	4	0.	7,000.		7,000.
	5	0.	3,800.		3,800.
	6	0.	29,032.	254,894.	283,926.
	7	1,251.	24,922.	75,055.	101,228.
	8	0.	4,000.	6,671.	10,671.
	9	0.	7,914.	201,217.	209,131.
	10	Direct expense summary. Add lines 4 through 9 in column (d)			
11	Net income summary. Subtract line 10 from line 3, column (d)				-493,058.

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

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1				
	Direct Expenses	2			
		3			
		4			
		5			
6	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No		
7	Direct expense summary. Add lines 2 through 5 in column (d)				
8	Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: \_\_\_\_\_  
 a Is the organization licensed to conduct gaming activities in each of these states?  Yes  No  
 b If "No," explain: \_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?  Yes  No  
 b If "Yes," explain: \_\_\_\_\_

YOUNG MEN'S CHRISTIAN ASSOCIATION

Schedule G (Form 990) (Rev. 12-2024) OF SAN FRANCISCO

94-0997140 Page 3

- 11 Does the organization conduct gaming activities with nonmembers?  Yes  No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?  Yes  No
- 13 Indicate the percentage of gaming activity conducted in:
 

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name \_\_\_\_\_

Address \_\_\_\_\_

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

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

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

Name \_\_\_\_\_

Address \_\_\_\_\_

- 16 Gaming manager information:

Name \_\_\_\_\_

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

Description of services provided \_\_\_\_\_

Director/officer       Employee       Independent contractor

- 17 Mandatory distributions:

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

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

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



**SCHEDULE I  
(Form 990)**

(Rev. December 2024)  
Department of the Treasury  
Internal Revenue Service

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

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

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

Open to Public  
Inspection

Name of the organization **YOUNG MEN'S CHRISTIAN ASSOCIATION  
OF SAN FRANCISCO** Employer identification number **94-0997140**

**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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
FRIENDS OF SCHOOL OF THE ART FOUNDATION - 424 PERSIA AVENUE - SAN FRANCISCO, CA 94112	94-3373066	501(C)(3)	209,611.	0.			YOUTH EMPOWERMENT
YMCA OF METRO ATLANTA INC., 569 MARTIN LUTHER KING JR DRIVE NW ATLANTA, GA 30314	58-0566253	501(C)(3)	158,107.	0.			REACH AND RISE
BUTLER COUNTY FAMILY YOUNG MENS CHRISTIAN ASSOCIATION - 339 NORTH WASHINGTON STREET - BUTLER, PA 16001	25-0965619	501(C)(3)	146,390.	0.			REACH AND RISE
YMCA OF NEWARK AND VICINITY 600 BROAD STREET NEWARK, NJ 07102	22-1552820	501(C)(3)	143,191.	0.			REACH AND RISE
YOUNG MEN'S CHRISTIAN ASSOCIATION OF CENTRAL MARYLAND INC. - 303 W. CHESAPEAKE AVENUE - BALTIMORE, MD 21204	52-0591699	501(C)(3)	137,661.	0.			REACH AND RISE
OLD COLONY YOUNG MEN'S CHRISTIAN ASSOCIATION INC. - 320 MAIN STREET - BROCKTON, MA 02301	04-2125014	501(C)(3)	110,136.	0.			REACH AND RISE

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ..... 22.

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

**For Paperwork Reduction Act Notice, see the Instructions for Form 990.** **Schedule I (Form 990) (Rev. 12-2024)**

**YOUNG MEN'S CHRISTIAN ASSOCIATION  
OF SAN FRANCISCO**

<b>Part II</b> Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)							
(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
HOT SPRINGS FAMILY YMCA 130 WERNER STREET HOT SPRINGS, AR 71913	71-0236925	501(C)(3)	94,474.	0.			REACH AND RISE
YMCA OF METROPOLITAN FORT WORTH 512 LAMAR STREET SUITE 400 FORT WORTH, TX 76102	75-0827471	501(C)(3)	80,570.	0.			REACH AND RISE
YMCA OF GREATER BIRMINGHAM 2401 20TH PLACE SOUTH BIRMINGHAM, AL 35223	63-0299894	501(C)(3)	79,243.	0.			REACH AND RISE
THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF THE CAPITAL AREA - 8704 JEFFERSON HIGHWAY SUITE B - BATON ROUGE, LA 70809	72-0408994	501(C)(3)	67,284.	0.			BLACK HISTORY MONTH
YOUNG MEN'S CHRISTIAN ASSOCIATION OF EAST TENNESSEE INC. - 616 JESSAMINE STREET - KNOXVILLE, TN 37917	62-0475700	501(C)(3)	49,416.	0.			REACH AND RISE
GATEWAY PUBLIC SCHOOLS 1430 SCOTT STREET SAN FRANCISCO, CA 94115	94-3278357	501(C)(3)	29,981.	0.			YOUTH EMPOWERMENT
RICHMOND DISTRICT NEIGHBORHOOD CENTER INC. - 741 30TH AVENUE - SAN FRANCISCO, CA 94121	94-2684271	501(C)(3)	24,823.	0.			YOUTH EMPOWERMENT
HER IDEA SF 782 31ST AVENUE SAN FRANCISCO, CA 94121	86-3603375	501(C)(3)	19,978.	0.			YOUTH EMPOWERMENT
SAN FRANCISCO STUDY CENTER INC. 1663 MISSION STREET SUITE 310 SAN FRANCISCO, CA 94103	94-2168838	501(C)(3)	13,885.	0.			COMMUNITY SUPPORT

**YOUNG MEN'S CHRISTIAN ASSOCIATION  
OF SAN FRANCISCO**

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(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
BAY AREA COMMUNITY RESOURCES INC. 11175 SAN PABLO AVENUE EL CERRITO, CA 94530	94-2346815	501(C)(3)	10,000.	0.			YOUTH EMPOWERMENT
MISSION HIGH FOUNDATION 3750 18TH STREET SAN FRANCISCO, CA 94114	47-4047243	501(C)(3)	9,204.	0.			YOUTH EMPOWERMENT
MISSION GRADUATES 3040 16TH STREET SAN FRANCISCO, CA 94103	23-7172909	501(C)(3)	8,681.	0.			YOUTH EMPOWERMENT
THE SAN FRANCISCO CHAMBER OF COMMERCE FOUNDATION - 235 MONTGOMERY STREET SUITE 760 - SAN FRANCISCO, CA 94104	94-3114015	501(C)(3)	8,535.	0.			YOUTH EMPOWERMENT
ENLIVEN LEARNING PARTNERS, INC. 3730 CLAY STREET SAN FRANCISCO, CA 94118	88-3623712	501(C)(3)	8,070.	0.			YOUTH EMPOWERMENT
TAMARA WALKER (BURGE LLC) 1238 SHAFER AVENUE SUITE C SAN FRANCISCO, CA 94124	92-2668836		7,500.	0.			UNITY PARADE
LOWELL ALUMNI ASSOCIATION PO BOX 320009 SAN FRANCISCO, CA 94132	94-6125408	501(C)(3)	7,496.	0.			YOUTH EMPOWERMENT
ABRAHAM LINCOLN HIGH SCHOOL PTSA 2162 24TH AVENUE SAN FRANCISCO, CA 94116	94-6080909	501(C)(3)	7,220.	0.			YOUTH EMPOWERMENT

**YOUNG MEN'S CHRISTIAN ASSOCIATION**

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
CAR PAYMENT ASSISTANCE	2	2,738.	0.		
DMV ASSISTANCE	1	1,913.	0.		
FUNERAL COST ASSISTANCE	2	6,695.	0.		
GROCERIES AND FOOD ASSISTANCE	56	141,829.	0.		
HOUSING AND FURNITURE ASSISTANCE	9	11,761.	0.		

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

**PART I, LINE 2:**

THE YMCA OF SAN FRANCISCO (YMCASF) ISSUES GRANTS OR DISTRIBUTES A PORTION OF GRANT FUNDS TO OTHER YMCAS OR COMMUNITY-BASED ORGANIZATIONS (CBO). THERE ARE TWO METHODS THROUGH WHICH IT MONITORS THE USE OF GRANT FUNDS. FIRST, THE PROGRAM STAFF REGULARLY COMMUNICATES WITH THE YMCA/CBO GRANTEE AS IT CONDUCTS THE WORK FUNDED. SECOND, THE YMCASF TYPICALLY REQUIRES A REPORT ON USE OF FUNDING FROM THE YMCA/CBO GRANTEE. THE REPORT IS REQUESTED AND STORED THROUGH THE DATA MANAGEMENT SYSTEM. REPORTS REQUEST INFORMATION ABOUT HOW THE YMCA/CBO USED THE GRANT FUNDS, INCLUDING ACTIVITIES CONDUCTED, PROGRESS TOWARD OBJECTIVES, AND OUTCOMES. IN SOME CASES, YMCASF REQUIRES A DETAILED ACCOUNTING OF HOW OTHER YMCAS OR CBOs ALLOCATED THE GRANT FUNDS AND WHETHER ANY OF THESE FUNDS REMAIN. THIS REPORT TYPICALLY INCLUDES FINANCIAL RECORDS WITH BACK-UP DOCUMENTATION (INCLUDING PAYROLL RECORDS, BENEFIT REPORTS, AND MISCELLANEOUS EXPENSE DOCUMENTATION AND RECEIPTS FROM VENDORS).

YMCASF ALSO HAS AVAILABLE A VARIETY OF BARRIER REMOVAL AWARDS THAT PROVIDE GOODS AND SERVICES TO ALLOW COMMUNITY RESIDENTS TO OVERCOME OBSTACLES TO

**YOUNG MEN'S CHRISTIAN ASSOCIATION  
OF SAN FRANCISCO**

Schedule I (Form 990)

94-0997140

Page 2

**Part III** Continuation of Grants and Other Assistance to Domestic Individuals (Schedule I (Form 990), Part III.)

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
OTHER ASSISTANCE	20.	37,581.	0.		
RENTAL ASSISTANCE	32.	84,521.	0.		
UTILITIES ASSISTANCE	10.	18,591.	0.		

Schedule I (Form 990)



**SCHEDULE J  
(Form 990)**

(Rev. December 2024)  
Department of the Treasury  
Internal Revenue Service

**Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest  
Compensated Employees  
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.  
Attach to Form 990.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

Open to Public  
Inspection

Name of the organization **YOUNG MEN'S CHRISTIAN ASSOCIATION  
OF SAN FRANCISCO** Employer identification number **94-0997140**

**Part I Questions Regarding Compensation**

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

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

Schedule J (Form 990) (Rev. 12-2024)

**YOUNG MEN'S CHRISTIAN ASSOCIATION**  
**Schedule J (Form 990) (Rev. 12-2024) OF SAN FRANCISCO**

94-0997140

Page 2

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

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

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

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) JAMIE BRUNING-MILES PRESIDENT & CEO	(i) 489,560. (ii) 0.	0.	0.	51,912.	17,563.	559,035.	0.
(2) WESLEY "CHIP" RICH SVP & CO-COO	(i) 276,093. (ii) 0.	0.	0.	34,386.	7,290.	317,769.	0.
(3) MITTIE GRIGSBY SVP & CFO / TREASURER	(i) 252,525. (ii) 0.	0.	0.	33,335.	17,551.	303,411.	0.
(4) TAKIJA GARDNER SVP, GOV'T RELATIONS & EXT AFFAIRS	(i) 238,892. (ii) 0.	0.	0.	29,888.	17,563.	286,343.	0.
(5) CHRIS MCCOMIC VP, PROPERTY DEVELOPMENT	(i) 225,872. (ii) 0.	0.	0.	28,499.	17,563.	271,934.	0.
(6) BRIN CLARK SVP & CO-COO	(i) 246,960. (ii) 0.	0.	0.	0.	17,347.	264,307.	0.
(7) CHAD NICO HIU SVP, STRATEGY, EQUITY, AND IMPACT	(i) 215,642. (ii) 0.	0.	0.	30,493.	17,563.	263,698.	0.
(8) MARCOS SANTIAGO CAO & SVP, MKTG/COMMS (THRU 6/2025)	(i) 219,598. (ii) 0.	0.	0.	4,148.	12,146.	235,892.	0.
(9) RICH HILLEBRECHT VP, TECHNOLOGY	(i) 210,033. (ii) 0.	0.	0.	0.	12,098.	222,131.	0.
(10) INGRID FREED VP, HR & PEOPLE SERVICES	(i) 180,268. (ii) 0.	0.	0.	24,765.	12,163.	217,196.	0.
(11) RACHEL DEL MONTE VP, MEMBERSHIP EXP (THRU 12/2024)	(i) 159,728. (ii) 0.	0.	18,282.	26,374.	12,163.	216,547.	0.
(12) ROSANNA GOMEZ AVP, LEADERSHIP DEV & INT'L RELATION	(i) 176,640. (ii) 0.	0.	0.	22,215.	12,163.	211,018.	0.
(13) MANUEL RODRIGUEZ SENIOR EXECUTIVE DIRECTOR	(i) 168,234. (ii) 0.	0.	0.	21,581.	12,163.	201,978.	0.
(14) KARI LEE AVP OPERATIONS & GDEI	(i) 167,810. (ii) 0.	0.	0.	22,073.	11,674.	201,557.	0.
(15) CHRISTINA PINHEIRO CHIEF PEOPLE OFFICER	(i) 184,067. (ii) 0.	0.	0.	0.	17,347.	201,414.	0.
(16) LAUREN CLAPPERTON AVP, HEALTH INITIATIVES & COMMUNITY	(i) 167,336. (ii) 0.	0.	0.	20,946.	12,153.	200,435.	0.

Schedule J (Form 990) (Rev. 12-2024)

**YOUNG MEN'S CHRISTIAN ASSOCIATION  
94-0997140**

Schedule J (Form 990) (Rev. 12-2024) OF SAN FRANCISCO

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

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

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

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(17) LARA HITCHCOCK AVP, PEOPLE STRATEGY	(i)	164,938.	0.	21,520.	12,163.	198,621.	0.
	(ii)	0.	0.	0.	0.	0.	0.
(18) MARISSA COWAN VP, CHILD & YOUTH DEVELOPMENT	(i)	170,146.	0.	22,971.	1,890.	195,007.	0.
	(ii)	0.	0.	0.	0.	0.	0.
(19) WENDY TANG SR. DIRECTOR, FP&A AND COMPLIANCE	(i)	159,511.	0.	19,223.	12,153.	190,887.	0.
	(ii)	0.	0.	0.	0.	0.	0.
(20) EVELYN DASKALAKIS VP, SOCIAL SERVICES & MENTAL HEALTH	(i)	166,766.	0.	8,085.	12,163.	187,014.	0.
	(ii)	0.	0.	0.	0.	0.	0.
(21) PHILIP MARABANTE DIR OF IT INFRASTRUCTURE & WORKFORCE	(i)	168,946.	0.	0.	12,142.	181,088.	0.
	(ii)	0.	0.	0.	0.	0.	0.
	(i)						
	(ii)						
	(i)						
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**SCHEDULE K  
(Form 990)**  
(Rev. December 2024)  
Department of the Treasury  
Internal Revenue Service

**Supplemental Information on Tax-Exempt Bonds**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.  
Attach to Form 990.

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

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Name of the organization: **YOUNG MEN'S CHRISTIAN ASSOCIATION OF SAN FRANCISCO**  
Employer identification number: **94-0997140**

Part I Bond Issues	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pooled financing	
							Yes	No	Yes	No	Yes	No
<b>SEE PART VI FOR COLUMNS (A) AND (F) CONTINUATIONS</b>												
CALIFORNIA A INFRASTRUCTURE AND ECONO	63-0304653	NONE	02/15/18	19715588.	REFUND BONDS ORIGINALLY ISSUED		X			X		X
B												
C												
D												

Part II Proceeds	Description	A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Amount of bonds retired			3,289,545.					
2	Amount of bonds legally defeased								
3	Total proceeds of issue			19,715,588.					
4	Gross proceeds in reserve funds								
5	Capitalized interest from proceeds								
6	Proceeds in refunding escrows			272,396.					
7	Issuance costs from proceeds								
8	Credit enhancement from proceeds								
9	Working capital expenditures from proceeds								
10	Capital expenditures from proceeds								
11	Other spent proceeds			19,443,192.					
12	Other unspent proceeds								
13	Year of substantial completion								

14	Were the bonds issued as part of a refunding issue of tax-exempt bonds (or, if issued prior to 2018, a current refunding issue)?	Yes	No	Yes	No	Yes	No
		X					
15	Were the bonds issued as part of a refunding issue of taxable bonds (or, if issued prior to 2018, an advance refunding issue)?		X				
16	Has the final allocation of proceeds been made?	X					
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X					

For Paperwork Reduction Act Notice, see the Instructions for Form 990. **Schedule K (Form 990) (Rev. 12-2024)**

**YOUNG MEN'S CHRISTIAN ASSOCIATION  
OF SAN FRANCISCO**

94-0997140

**Part III Private Business Use**

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
<b>1</b> Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds? .....		<input checked="" type="checkbox"/>						
<b>2</b> Are there any lease arrangements that may result in private business use of bond-financed property? .....		<input checked="" type="checkbox"/>						
<b>3a</b> Are there any management or service contracts that may result in private business use of bond-financed property? .....		<input checked="" type="checkbox"/>						
<b>b</b> If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property? .....								
<b>c</b> Are there any research agreements that may result in private business use of bond-financed property? .....		<input checked="" type="checkbox"/>						
<b>d</b> If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property? .....								
<b>4</b> Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government .....	.00	%				%		%
<b>5</b> Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government .....	.00	%				%		%
<b>6</b> Total of lines 4 and 5 .....	.00	%				%		%
<b>7</b> Does the bond issue meet the private security or payment test? .....		<input checked="" type="checkbox"/>						
<b>8a</b> Has there been a sale or disposition of any of the bond-financed property to a non-governmental person other than a 501(c)(3) organization since the bonds were issued? .....		<input checked="" type="checkbox"/>						
<b>b</b> If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of .....						%		%
<b>c</b> If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2? .....								
<b>9</b> Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2? .....	<input checked="" type="checkbox"/>							

**Part IV Arbitrage**

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

**YOUNG MEN'S CHRISTIAN ASSOCIATION  
OF SAN FRANCISCO**

94-0997140

**Part IV Arbitrage (continued)**

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
<b>4a</b> Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue? .....		X						
<b>b</b> Name of provider .....								
<b>c</b> Term of hedge .....								
<b>d</b> Was the hedge superintegrated? .....								
<b>e</b> Was the hedge terminated? .....								
<b>5a</b> Were gross proceeds invested in a guaranteed investment contract (GIC)? .....		X						
<b>b</b> Name of provider .....								
<b>c</b> Term of GIC .....								
<b>d</b> Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? .....								
<b>6</b> Were any gross proceeds invested beyond an available temporary period? .....		X						
<b>7</b> Has the organization established written procedures to monitor the requirements of section 148? .....	X							

**Part V Procedures To Undertake Corrective Action**

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation isn't available under applicable regulations? .....	X							

**Part VI Supplemental Information.** Provide additional information for responses to questions on Schedule K. See instructions.

**SCHEDULE K, PART I, BOND ISSUES:**

(A) ISSUER NAME: CALIFORNIA INFRASTRUCTURE AND ECONOMIC DEVELOPMENT BANK

(F) DESCRIPTION OF PURPOSE:

REFUND BONDS ORIGINALLY ISSUED ON 8/16/2010 AND 12/7/2012; SWAP TERMINATION

SCHEDULE K, PART IV, ARBITRAGE, LINE 2C:

(A) ISSUER NAME: CALIFORNIA INFRASTRUCTURE AND ECONOMIC DEVELOPMENT BANK

DATE THE REBATE COMPUTATION WAS PERFORMED: 04/04/2025

**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2024**

Open to Public Inspection

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

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Department of the Treasury  
Internal Revenue Service

Name of the organization **YOUNG MEN'S CHRISTIAN ASSOCIATION  
OF SAN FRANCISCO** Employer identification number **94-0997140**

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	17	476,869.	FAIR MARKET VALUE
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ( )				
26 Other ( )				
27 Other ( )				
28 Other ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29** **0**

30a During the year, did the organization receive by contribution any property reported on Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? **X**

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? **X**

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? **X**

b If "Yes," describe in Part II.

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

	Yes	No
30a		X
31	X	
32a		X
33		

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

Schedule M (Form 990) 2024

YOUNG MEN'S CHRISTIAN ASSOCIATION

Schedule M (Form 990) 2024

OF SAN FRANCISCO

94-0997140

Page 2

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

SCHEDULE M, PART I, COLUMN (B):

THE ORGANIZATION IS REPORTING THE NUMBER OF CONTRIBUTIONS RECEIVED  
(DEFINED AS EACH SEPARATE CONTRIBUTION RATHER THAN EACH SEPARATE SHARE)  
IN SCHEDULE M, PART I, COLUMN (B).

Lined area for supplemental information.

**SCHEDULE O  
(Form 990)**

(Rev. December 2024)

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

Complete to provide information for responses to specific questions on  
Form 990 or 990-EZ or to provide any additional information.  
Attach to Form 990 or Form 990-EZ.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**Open to Public  
Inspection**

Name of the organization	<b>YOUNG MEN'S CHRISTIAN ASSOCIATION OF SAN FRANCISCO</b>	Employer identification number	<b>94-0997140</b>
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**FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:**  
**DEVELOPMENT, ECONOMIC OPPORTUNITY, AND COMMUNITY WELL-BEING. WE ARE  
 COMMITTED TO EMPOWERING INDIVIDUALS OF ALL AGES AND WALKS OF LIFE TO  
 REACH THEIR FULL POTENTIAL THROUGH PATHWAYS TO SOCIAL MOBILITY AND  
 HOLISTIC HEALTH, FOSTERING A SOCIETY WHERE EVERYONE CAN THRIVE.**

**FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:**  
**THAT ECONOMIC BARRIERS DO NOT PREVENT INDIVIDUALS FROM ACCESSING LIFE  
 SKILL AND CAREER-BUILDING PROGRAMS, IMPROVING QUALITY OF LIFE, AND  
 PERSONAL DEVELOPMENT OPPORTUNITIES AND THAT DRIVE LONG-TERM FINANCIAL  
 AND SOCIETAL MOBILITY FOR ALL.**

**FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:**  
**LIFE FOR ALL AGES AND ABILITIES FOCUSED ON IMPROVING INDIVIDUAL AND  
 COMMUNITY WELL-BEING. THROUGH THE GENEROSITY OF YMCA DONORS, FINANCIAL  
 ASSISTANCE ENSURES ACCESSIBILITY FOR ALL IN THE COMMUNITY. NO ONE IS  
 TURNED AWAY FOR AN INABILITY TO PAY.**

**FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:**  
**SKILLS, AND CAREER READINESS FOR LASTING SUCCESS. RECOGNIZING THAT  
 DEVELOPMENT ENCOMPASSES ALL AGES AND LIFE STAGES, WE ALSO OFFER  
 PROGRAMS AND SERVICES FOR ADULTS AND SENIORS, INCLUDING SENIOR  
 PROGRAMMING, BRAIN HEALTH INITIATIVES, AND DIABETES PREVENTION. THESE  
 PROGRAMS CONTRIBUTE TO COMBATING SOCIAL ISOLATION AND BUILDING VIBRANT,  
 CONNECTED COMMUNITIES, STRENGTHENING INTERGENERATIONAL BONDS. BY  
 EXPANDING OPPORTUNITIES FOR ALL AGES AND LIFE STAGES, WE REINFORCE  
 SOCIAL CONNECTION, LIFELONG GROWTH, AND HOLISTIC EDUCATION TOWARDS  
 POSITIVE COMMUNITY BRIDGE BUILDING AND UNITY.**

**FORM 990, PART VI, SECTION B, LINE 11B:**  
**THE FORM 990 IS COMPLETED BY AN INDEPENDENT TAX ACCOUNTANT IN CONJUNCTION  
 WITH THE ORGANIZATION'S ACCOUNTING AND FINANCE DEPARTMENT; ADJUSTMENTS ARE  
 MADE, AS NECESSARY. THE FORM 990 IS THEN PROVIDED TO THE AUDIT COMMITTEE  
 OF THE BOARD OF DIRECTORS AND REVIEWED FORMALLY AT AN AUDIT COMMITTEE  
 MEETING. FOLLOWING THIS REVIEW, A COMPLETE COPY OF THE FORM 990 IS  
 PROVIDED TO THE BOARD OF DIRECTORS OF REVIEW PRIOR TO FILING WITH THE  
 INTERNAL REVENUE SERVICE.**

**FORM 990, PART VI, SECTION B, LINE 12C:**  
**THE ORGANIZATION HAS A WRITTEN CONFLICT OF INTEREST POLICY WHICH COVERS ALL  
 MEMBERS OF THE BOARD OF DIRECTORS, OFFICERS, AND KEY EMPLOYEES. THE POLICY  
 REQUIRES ALL DIRECTORS, OFFICERS, AND KEY EMPLOYEES TO ANNUALLY REVIEW AND  
 ADHERE TO THE POLICY, AND TO COMPLETE AND SIGN A CONFIDENTIAL CONFLICT OF  
 INTERESTS STATEMENT AND RETURN IT TO THE PRESIDENT'S OFFICE OR TO THE  
 CHAIRPERSON OF THE BOARD; THE PRESIDENT AND CHAIRPERSON ANNUALLY MAKE A  
 REPORT TO THE EXECUTIVE COMMITTEE BASED ON THE DISCLOSURE FORMS SUBMITTED.  
 UNDER THE POLICY, DIRECTORS, OFFICERS, AND KEY EMPLOYEES ARE REQUIRED TO  
 DISCLOSE (IN WRITING) TO THE BOARD OF DIRECTORS SITUATIONS WHICH MAY GIVE  
 RISE TO POTENTIAL CONFLICTS OF INTEREST; INCLUDED IN SUCH DISCLOSURE ARE  
 SIGNIFICANT FACTS AND CIRCUMSTANCES OF THE POTENTIAL CONFLICT AND ANY OTHER  
 INFORMATION WHICH COULD ASSIST THE BOARD IN MAKING A DETERMINATION ON  
 WHETHER A CONFLICT OF INTEREST EXISTS. AFTER DISCLOSURE OF A POTENTIAL OF**

Name of the organization <b>YOUNG MEN'S CHRISTIAN ASSOCIATION OF SAN FRANCISCO</b>	Employer identification number <b>94-0997140</b>
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INTEREST OR ANY OTHER CONDITION THAT MAY BECOME A CONFLICT IN THE FUTURE AND ALL MATERIAL FACTS, THE BOARD OF DIRECTORS SHALL DETERMINE WHETHER A CONFLICT OF INTEREST EXISTS. THE INTERESTED PERSON IS ALLOWED TO MAKE A PRESENTATION AT THE BOARD OF DIRECTORS OR COMMITTEE MEETING, BUT AFTER THE PRESENTATION, S/HE SHALL LEAVE THE MEETING DURING THE DISCUSSION OF, AND VOTE ON, THE TRANSACTION OR ARRANGEMENT INVOLVING THE POSSIBLE OF CONFLICT OF INTEREST.

FORM 990, PART VI, SECTION B, LINE 15:

THE YMCA OF SAN FRANCISCO'S CHIEF HUMAN RESOURCES OFFICER/CPO ORGANIZES THE YMCA OF SAN FRANCISCO'S EXECUTIVE COMPENSATION ANALYSIS. THE CHIEF HUMAN RESOURCES OFFICER/CPO PROVIDES RELEVANT MARKET SALARY ANALYSIS AND COMPARISONS FOR THE CEO, OTHER OFFICERS, KEY EMPLOYEES, AND OTHER HIGHLY COMPENSATED EMPLOYEES TO THE EXECUTIVE COMPENSATION COMMITTEE OF THE BOARD OF DIRECTORS FOR REVIEW AND APPROVAL; THE EXECUTIVE COMPENSATION COMMITTEE LAST MET ON JUNE 11, 2025. THE ANALYSIS INCLUDES: (I) NATIONAL COMPENSATION GUIDELINES PROVIDED BY THE YMCA OF THE USA; (II) LOCAL MARKET INFORMATION; (III) LOCAL NOT-FOR-PROFIT INFORMATION; (IV) INDEPENDENT EXECUTIVE COMPENSATION CONSULTANTS WHO DO A FULL MARKET ANALYSIS FOR FOR-PROFIT AND NON-PROFIT EXECUTIVE COMPENSATION, AND (V) NATIONAL, REGIONAL, AND LOCAL YMCA AND OTHER NON-PROFIT EXECUTIVE BENCHMARKING. AFTER THE EXECUTIVE COMPENSATION COMMITTEE REVIEWS ALL RELEVANT SALARY ANALYSIS, THE COMMITTEE CHAIR GIVES THEIR RECOMMENDATIONS TO THE BOARD OF DIRECTORS, WHO APPROVES THE CEO'S COMPENSATION, INCENTIVE, AND BENEFITS.

THE EXECUTIVE COMPENSATION COMMITTEE ALSO REVIEWS AND APPROVES THE COMPENSATION OF OTHER OFFICERS, KEY EMPLOYEES, AND HIGHEST COMPENSATED EMPLOYEES UTILIZING: (I) NATIONAL COMPENSATION GUIDELINES PROVIDED BY THE YMCA OF THE USA; (II) LOCAL MARKET INFORMATION; (III) LOCAL NOT-FOR-PROFIT INFORMATION; (IV) INDEPENDENT EXECUTIVE COMPENSATION CONSULTANTS WHO DO A FULL MARKET ANALYSIS FOR FOR-PROFIT AND NON-PROFIT EXECUTIVE COMPENSATION, AND (V) NATIONAL, REGIONAL, AND LOCAL YMCA AND OTHER NON-PROFIT EXECUTIVE BENCHMARKING.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

CHANGE IN VALUE OF ASSETS HELD IN CHARITABLE TRUSTS	-12,198.
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**YOUNG MEN'S CHRISTIAN ASSOCIATION  
OF SAN FRANCISCO**

**Part V Transactions With Related Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

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

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

	Yes	No
<b>a</b> Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity .....	X	
<b>b</b> Gift, grant, or capital contribution to related organization(s) .....	X	
<b>c</b> Gift, grant, or capital contribution from related organization(s) .....	X	
<b>d</b> Loans or loan guarantees to or for related organization(s) .....	X	
<b>e</b> Loans or loan guarantees by related organization(s) .....	X	
<b>f</b> Dividends from related organization(s) .....		X
<b>g</b> Sale of assets to related organization(s) .....		X
<b>h</b> Purchase of assets from related organization(s) .....		X
<b>i</b> Exchange of assets with related organization(s) .....		X
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) .....		X
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) .....		X
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) .....		X
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) .....		X
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) .....		X
<b>o</b> Sharing of paid employees with related organization(s) .....		X
<b>p</b> Reimbursement paid to related organization(s) for expenses .....		X
<b>q</b> Reimbursement paid by related organization(s) for expenses .....		X
<b>r</b> Other transfer of cash or property to related organization(s) .....		X
<b>s</b> Other transfer of cash or property from related organization(s) .....		X

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

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

