** PUBLIC DISCLOSURE COPY ** Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Inspection

<u>A F</u>	or the	2023 calendar year, or tax year beginning APR 1, 2023 and ending	MAR 31, 2024	
B c	heck if pplicable	YOUNG MEN S CHRISTIAN ASSOCIATION	D Employer identifi	cation number
X	Addres	S OF GREATER PITTSBURGH		
	Name change	Doing business as	25-09694	
	return Final return/	Number and street (or P.O. box if mail is not delivered to street address) Room/si 651 HOLIDAY DRIVE 5200		r 7-3800
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	30,399,315.
	Amend	FILISBURGH, FA 13220	H(a) Is this a group r	eturn
	Application	F Name and address of principal officer: AMY KIENLE	for subordinates	? Yes X No
	pendin	SAME AS C ABOVE	H(b) Are all subordinates i	ncluded? Yes No
<u> </u>	ax-exe	empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or	527 If "No," attach a	list. See instructions
J١	Vebsit	e: WWW.YMCAOFPITTSBURGH.ORG	H(c) Group exemption	n number
			ear of formation: 1854 i	M State of legal domicile: PA
Pa	art I	Summary		
ě		Briefly describe the organization's mission or most significant activities: PROVIDE(INDIVIDUALS AND FAMILIES TO GROW IN SPIRIT,M		FOR
Activities & Governance		Check this box if the organization discontinued its operations or disposed of m		eate
Ver	l .	Number of voting members of the governing body (Part VI, line 1a)		42
é		Number of independent voting members of the governing body (Fart VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b)		41
∞ ∞		Total number of individuals employed in calendar year 2023 (Part V, line 2a)	·····	1256
ties		Total number of violunteers (estimate if necessary)		7467
ξį		Total unrelated business revenue from Part VIII, column (C), line 12		0.
Ā	l	Net unrelated business taxable income from Form 990-T, Part I, line 11		0.
		Net directed addiness taxable meetic form over 1,1 art 1, into 11	Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)	10,687,260.	6,637,728.
Jue		Program service revenue (Part VIII, line 2g)	19,760,379.	22,544,069.
Revenue	I	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	683,234.	806,494.
æ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	127,908.	141,814.
	l .	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	31,258,781.	30,130,105.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	238,125.	76,886.
	l .	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
10	45 .	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	13,893,416.	14,527,284.
se	16a l	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
Expenses	b	Total fundraising expenses (Part IX, column (D), line 25) 623,506.		
Щ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	14,489,272.	14,823,571.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	28,620,813.	29,427,741.
	19	Revenue less expenses. Subtract line 18 from line 12	2,637,968.	702,364.
or			Beginning of Current Year	End of Year
Net Assets or	20	Total assets (Part X, line 16)	73,461,781.	74,462,334.
ASS	21	Total liabilities (Part X, line 26)	18,622,723.	16,952,403.
Ret	22	Net assets or fund balances. Subtract line 21 from line 20	54,839,058.	57,509,931.
Pa	art II	Signature Block		
Und	er pena	lties of perjury, I declare that I have examined this return, including accompanying schedules and stat	ements, and to the best of m	/ knowledge and belief, it is
true,	correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which prepare	arer has any knowledge.	
		O'control of the control of the cont	Data	
Sig		Signature of officer	Date	
Her	е	AMY H. KIENLE, PRESIDENT AND CEO		
		Type or print name and title	Data Jawa I	DTIN
		Print/Type preparer's name Preparer's signature	Date Check [PTIN
Paid	l l	SARAH R. PIOT SARAH R. PIOT	self-emplo	
-	arer	Firm's name SCHNEIDER DOWNS & CO., INC.	Firm's EIN 2	5-1408703
Use	Only	Firm's address ONE PPG PLACE, SUITE 1700 PITTSBURGH, PA 15222-5416	Phone no. 41	2-261-3644
May	the IF	S discuss this return with the preparer shown above? See instructions		X Yes No
				- 000 (2222)

	Check if Schedule O contains a response or note to any line in this Part III .		X
1	Briefly describe the organization's mission: SEE SCHEDULE O		
2	Did the organization undertake any significant program services during the year wh	nich were not listed on the	
	prior Form 990 or 990-EZ?		Yes X No
3	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducting.	fucts any program services?	Yes X No
3	If "Yes," describe these changes on Schedule O.	nucis, any program services?	[] Tes [21] NO
4	Describe the organization's program service accomplishments for each of its three Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and the second services are required to report the amount of grants and the second services are required to report the amount of grants and the second services are required to report the amount of grants and the second services are required to report the amount of grants and the second services are required to report the amount of grants are required to report the grants are required to report t		
4a	revenue, if any, for each program service reported. (Code:) (Expenses \$18,681,371. including grants of \$ YOUTH DEVELOPMENT - SEE SCHEDULE O	1,500.) (Revenue \$	13,184,625.
4b	(Code:) (Expenses \$ 5,484,808. including grants of \$ HEALTHY LIVING - SEE SCHEDULE O) (Revenue \$	8,888,563.
4c	(Code:) (Expenses \$1, 225, 545. including grants of \$SOCIAL RESPONSIBILITY - SEE SCHEDULE O	75,386.) (Revenue \$	470,881.
4d	Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)
	Total program service expenses 25,391,724.		

Page 3

Form 990 (2023) **Part IV** Che

Par	t IV	Checklist of Required Schedules			
				Yes	No
1	Is the	organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Ye	s," complete Schedule A	1	Х	
2	Is the	organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did th	ne organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public	c office? If "Yes," complete Schedule C, Part I	3		X
4	Secti	on 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during	g the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5		organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
		r amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6		ne organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provid	de advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7		ne organization receive or hold a conservation easement, including easements to preserve open space,			
		nvironment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
		ne organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
		dule D, Part III	8		X
9		ne organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
-		ints not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
		s," complete Schedule D, Part IV	9		X
		ne organization, directly or through a related organization, hold assets in donor-restricted endowments			
		quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
		organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,	-10		
		plicable.			
_	•	ne organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
		, , ,	11a	х	
		//e organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	Ha	21	
D		·	446	Х	
		s reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Λ	
С		ne organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			X
		s reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
d		ne organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			\
		K, line 16? If "Yes," complete Schedule D, Part IX	11d		X
		ne organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		
		ne organization's separate or consolidated financial statements for the tax year include a footnote that addresses		37	
		rganization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
I2a	Did th	ne organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
		dule D, Parts XI and XII	12a	X	
		the organization included in consolidated, independent audited financial statements for the tax year?			
		s," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
		organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
		ne organization maintain an office, employees, or agents outside of the United States?	14a		X
		ne organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	invest	tment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
		ore? If "Yes," complete Schedule F, Parts I and IV	14b		X
		ne organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
		n organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did th	ne organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for	foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
		ne organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	colun	nn (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		Х
18	Did th	ne organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c an	d 8a? If "Yes," complete Schedule G, Part II	18	Х	
19		ne organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	comp	lete Schedule G, Part III	19		Х
		ne organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
		s" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		ne organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	dome	stic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21	Х	

YOUNG MEN'S CHRISTIAN ASSOCIATION

OF GREATER PITTSBURGH

Page 4 Part IV | Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Х 22 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes." complete 23 Х Schedule J 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Х Schedule K. If "No," go to line 25a 24a X **b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c Х d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a Х b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Х 25b 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% Х 26 controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III Х 27 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 current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28a **b** A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If Х 28c "Yes," complete Schedule L, Part IV Х Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation Х contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Х 31 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes." complete 32 Х Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations X sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Х 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? Х If "Yes," complete Schedule R, Part V, line 2 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization Х and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Х Note: All Form 990 filers are required to complete Schedule O 38 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 99 **1a** Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 0 Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

(gambling) winnings to prize winners?

OE GREATER PITTSBURGH

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

			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a			
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	37
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			Х
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		
D	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114. Beneat of Foreign Penk and Financial Accounts (FPAP)			
5 0	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
-	any contributions that were not tax deductible as charitable contributions?	6a		х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	N/	_
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	N/	A
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
_	sponsoring organization have excess business holdings at any time during the year? N/A	8		
9	Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? N/A	9a		
a b	N/7	9a 9b		
10	Section 501(c)(7) organizations. Enter:	30		
a	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders N/A 11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
I2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? N/A	13a		
_	Note: See the instructions for additional information the organization must report on Schedule O.			
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 There the apparent of receives an hand	-		
	Enter the amount of reserves on hand Did the exemplation receive any payments for indeed temping convices during the tay year?	110		Х
	Did the organization receive any payments for indoor tanning services during the tax year? If "Ves " has it filed a Form 720 to report these payments? If "Nes " provide an augmentage on School de O	14a 14b		
15	If "Yes," has it filed a Form 720 to report these payments? <i>If</i> "No," provide an explanation on Schedule O Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	140		
	excess parachute payment(s) during the year?	15		х
	If "Yes," see the instructions and file Form 4720, Schedule N.	10		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		х
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. 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? N/A	17		
	If "Yes," complete Form 6069.			

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			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 42			
	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				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2	Х	
3	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?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	Х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Х	
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Х	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed PA			
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)	availat	ole
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website X Another's website X 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	l financ	cial	
	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			
	JORDAN FRAZIER - 412-951-5662			
	651 HOLIDAY DR., STE 5200, PITTSBURGH, PA 15220			

OF GREATER PITTSBURGH

25-0969497

Page 7

Form 990 (2023) 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.

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

- 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.

(A)	(B)	I	IIIZa) (2)	ірсп	isatt	(D)	(E)	(F)
Name and title	Average	(do	not cl	Pos	ition		one	Reportable	Reportable	Estimated
	hours per	box	, unles	ss per	son is	s both	n an	compensation	compensation	amount of
	week (list any						T	from the	from related organizations	other compensation
	hours for	Individual trustee or director				pe		organization	(W-2/1099-MISC/	from the
	related	tee or	ustee			ensate		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	al trus	nal tr		loyee	com p		1099-NEC)		and related
	below	lividu	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) AMY H. KIENLE	line) 55.00	Ĕ	in In	J0	Ke	e Hi	요			
PRESIDENT AND CEO	33.00	Х		х				231,509.	0.	57,306.
(2) GREGORY SUPIANOSKI	55.00							231,303.	0.	37,300.
CHIEF EXPERIENCE OFFICER	33.00				х			151,158.	0.	50,623.
(3) ANGELA SCHUETTLER, SVP, CFO,	55.00							232/2331		30,0200
CAO (EXITED 09/23)				х				164,104.	0.	17,591.
(4) CAROLYN GRADY-MOOKERJEE, SVP	55.00									
CHIEF DEVELOPMENT OFFICER					Х			156,097.	0.	16,946.
(5) CHRISTIAN WILLITTS	55.00									
VP/FINANCE (EXITED 09/23)						X		102,422.	0.	17,816.
(6) JESSICA LAUSCH	55.00									
VP OF YOUTH DEVELOPMENT						Х		106,245.	0.	12,513.
(7) MICHAEL J. TOMERA	1.00									•
DIRECTOR, CHAIRMAN	1 00	Х		X				0.	0.	0.
(8) MICHELE O'LEARY	1.00								0	0
DIRECTOR, VICE CHAIR	1 00	Х		Х				0.	0.	0.
(9) RICHARD JEWELL	1.00	37		37					0	0
TRUSTEE CHAIR	1.00	Х		Х				0.	0.	0.
(10) KEVIN ACKLIN DIRECTOR	1.00	Х						0.	0.	0.
(11) DAVID BLUEMLING	1.00	Λ						0.	0.	<u>U•</u>
DIRECTOR	1.00	Х						0.	0.	0.
(12) PAUL CALI	1.00							•	•	<u>.</u>
DIRECTOR (ENTERED 07/23)		Х						0.	0.	0.
(13) DAVID CALIGUIRI	1.00									
DIRECTOR		Х						0.	0.	0.
(14) MAURA CERMAK	1.00									
DIRECTOR		Х						0.	0.	0.
(15) ROBERT B. COTTINGTON	1.00									
DIRECTOR		Х						0.	0.	0.
(16) BILL CRAMER	1.00									
DIRECTOR		Х	Щ					0.	0.	0.
(17) PATRICIA DIULUS-MYERS	1.00	_						_	_	_
DIRECTOR		Х						0.	0.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)											
(A)	(B)			(0				(D)	(E)	(F)	
Name and title	Average hours per week	box	Position (do not check more than one box, unless person is both an officer and a director/trustee)		Reportable compensation from	Reportable compensation from related	Estimated amount of other				
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations	
(18) CATHY FITZGERALD	1.00							_	_	_	
DIRECTOR		Х						0.	0.	0.	
(19) BRIAN FRIDAY	1.00										
DIRECTOR		Х						0.	0.	0.	
(20) DOUG GILLESPIE	1.00										
DIRECTOR	1 00	X						0.	0.	0.	
(21) DAVID GROETSCH	1.00								•		
DIRECTOR	1 00	X						0.	0.	0.	
(22) MANOJ JEGASOTHY DIRECTOR	1.00	х						0.	0.	0.	
(23) REBEKAH BYERS KCEHOWSKI	1.00							•	•		
DIRECTOR		Х						0.	0.	0.	
(24) WALTER LEWIS	1.00							-	-		
DIRECTOR (ENTERED 07/23)		Х						0.	0.	0.	
(25) LORETA MATHEO, MD	1.00										
DIRECTOR		Х						0.	0.	0.	
(26) KEVIN C. MEACHAM	1.00										
DIRECTOR		Х						0.	0.	0.	
1b Subtotal								911,535.	0.	172,795.	
c Total from continuation sheets to Part VI	I, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)								911,535.	0.	172,795.	

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

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

Section B. Independent Contractors

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
PARKHURST DINING SERVICES		
285 E WATERFRONT DRIVE, HOMESTEAD, PA 15120	FOOD SERVICES	853,464.
LIMBACH COMPANY, LLC, 797 COMMONWEALTH		
DRIVE, WARRENDALE, PA 15086	MAINTENANCE	509,974.
CENTRAL MAINTENANCE & SERVICE, 61 E.		
CRAFTON AVE, PO BOX 44081, PITTSBURGH, PA	MAINTENANCE	163,118.
US FOODS, INC.		
PO BOX 643190, PITTSBURGH, PA 15264	FOOD SERVICES	132,723.
BARRIER PROTECTION SYSTEMS		
415 LYSLE BLVD, MCKEESPORT, PA 15132	SECURITY	128,979.
2 Total number of independent contractors (including but not limited to those listed	l above) who received more than	
\$100,000 of compensation from the organization 10		

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Cotton At Officers, Birectors, 11		npic	yee			iign	est		,	(E)
(A)	(B)			_ (0				(D)	(E)	(F)
Name and title	Average	/-		Pos			I. A	Reportable	Reportable	Estimated
	hours	(C	neck	all t	tnat	app	iy)	compensation	compensation	amount of
	per week					au		from the	from related organizations	other compensation
	(list any	.o.				ploye		organization	(W-2/1099-MISC)	from the
	hours for	direct				d em		(W-2/1099-MISC)	(***2/1099-181100)	organization
	related	3e or	stee			sate		(** 27 1033 141100)		and related
	organizations	trust	al tru		yee	im pe				organizations
	below	Individual trustee or director	Institutional trustee	ie i	Key employee	Highest compensated employee	er			J
	line)	Indivi	Instit	Officer	Key e	Highe	Former			
(27) COLLEEN MORRIS	1.00									
DIRECTOR (ENTERED 07/23)		х						0.	0.	0.
(28) RAFAEL MUNOZ	1.00									
DIRECTOR	100	х						0.	0.	0.
(29) DOUGLAS S. PEGG	1.00	25							<u> </u>	0.
DIRECTOR (EXITED 06/23)	1.00	х						0.	0.	0.
(30) HOLLY PISANELLI	1.00	- 22	\vdash					0.	0.	0.
DIRECTOR	1.00	Х						0.	0.	0.
(31) MICHAEL POLITE	1.00	Δ						0.	0.	0.
	1.00	Х						0.	0.	0.
DIRECTOR	1 00	Δ						0.	0.	0.
(32) CURTIS RANDLE EL, III	1.00	٠,,							_	0
DIRECTOR	1 00	Х						0.	0.	0.
(33) ELIZABETH RUBENSTEIN	1.00								_	•
DIRECTOR	1 00	Х						0.	0.	0.
(34) RAY STEEB	1.00	ļ								•
DIRECTOR	1 22	Х						0.	0.	0.
(35) MIKE TURZAI	1.00									_
DIRECTOR		Х						0.	0.	0.
(36) BONNIE VAN KIRK	1.00	1							_	_
DIRECTOR		Х						0.	0.	0.
(37) DIAMONTE WALKER	1.00									
DIRECTOR (EXITED 10/23)		Х						0.	0.	0.
(38) WALTER WERE	1.00									
DIRECTOR (ENTERED 06/23)		Х						0.	0.	0.
(39) JOHN BITTNER	1.00									
TRUSTEE		Х						0.	0.	0.
(40) HOWELL BREEDLOVE	1.00									
TRUSTEE		Х						0.	0.	0.
(41) DANIEL GREALISH	1.00									
TRUSTEE		Х						0.	0.	0.
(42) GARY HUNT	1.00									
TRUSTEE (ENTERED 07/23)		Х						0.	0.	0.
(43) MARGARET P. JOY	1.00								-	
TRUSTEE		Х						0.	0.	0.
(44) THOMAS VAN KIRK	1.00									
TRUSTEE		х						0.	0.	0.
(45) DANIEL ONORATO	1.00									
TRUSTEE (ENTERED 07/23)		х						0.	0.	0.
(46) JAMES RUMBAUGH	1.00	<u> </u>						1	•	
TRUSTEE		х						0.	0.	0.
	1						1	1	`	<u></u>
Total to Part VII. Section A. line 1.										
Total to Part VII, Section A, line 1c								<u> </u>		

Average		SK PITTS	BU	IKG	тΗ					25-096	9491
Name and title	Part VII Section A. Officers, Directors, Tru	stees, Key Er	nplo	yee	s, aı	nd H	ligh	est	Compensated Employe	es (continued)	
Week (int any hours for related organizations below line) War Wa		Average	Average					ly)	Reportable	Reportable	Estimated
X		week (list any hours for related organizations below line)							from the organization	from related organizations	compensation from the organization and related
X	(47) THOMAS J. GILLESPIE, JR. TRUSTEE		Х						0.	0.	0.
49) RICHARD WITHERSPOON, DIRECTOR THRU 06/23), TRUSTEE (EFF. 07/23) X 0. 0. 0. 0	(48) HOWARD WILLIAM HANNA, III TRUSTEE	1.00	x						0.	0.	0.
	(49) RICHARD WITHERSPOON, DIRECTOR	1.00									
otal to Part VII, Section A, line 1c	TIRO 00/23/, IROSIEE (EFF. 0//23)								0.	0.	
otal to Part VII, Section A, line 1c											
otal to Part VII, Section A, line 1c											
otal to Part VII, Section A, line 1c											
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otal to Part VII, Section A, line 1c											
	Total to Part VII, Section A, line 1c										

Page 9

Form 990 (2023) OF GREA
Part VIII Statement of Revenue

		Check if Schedule O contains	a response	or note to any line	e in this Part VIII			
				,	(A)	(B)	(C)	(D)
					Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
						function revenue	business revenue	sections 512 - 514
S S	1 a	Federated campaigns	1a	46,429.				
Contributions, Gifts, Grants and Other Similar Amounts								
جَ جَ		Membership dues Fundraising events		131,888.				
ffs,		Related organizations		101,000.				
ية إق				2,812,563.				
Sir		Government grants (contributions)		2,012,303.				
a tio	T	All other contributions, gifts, grants, an		2 616 010				
^듩		similar amounts not included above		3,646,848.				
ont	_	Noncash contributions included in lines 1a-1f	1g \$	111,895.	6 627 720			
O g	n	Total. Add lines 1a-1f		B	6,637,728.			
				Business Code	12 104 605	12104505		
<u>e</u>	2 a	-		900003	13,184,625.	13184625.		
er v	b	HEALTHY LIVING		621500	8,888,563.	8,888,563.		
ı Si	С	SOCIAL RESPONSIBILITY		900003	470,881.	470,881.		
Program Service Revenue	d							
5 F	е							
ڇ	f	All other program service revenue						
	g	Total. Add lines 2a-2f			22,544,069.			
	3	Investment income (including divid	ends, intere	st, and				
		other similar amounts)			678,858.			678,858.
	4	Income from investment of tax-exe	mpt bond p	roceeds				
	5	Royalties						
			(i) Real	(ii) Personal				
	6 a	Gross rents 6a						
	b	Less: rental expenses 6b						
	С	Rental income or (loss) 6c						
	d	Net rental income or (loss)						
	7 a	Gross amount from sales of (i)	Securities	(ii) Other				
		assets other than inventory 7a	111,895.	57,233.				
	b	Less: cost or other basis						
ē		and sales expenses	39,469.	2,023.				
enr	С	Gain or (loss) 7c	72,426.	55,210.				
Revenue		Net gain or (loss)		,	127,636.			127,636.
her F		Gross income from fundraising events			,			,
₽ E	0	including \$ 131,888						
Ŭ		contributions reported on line 1c).	_					
		Part IV, line 18		369,532.				
	h	Less: direct expenses		227,718.				
		Net income or (loss) from fundraisi			141,814.			141,814.
		Gross income from gaming activitie	_		-,			,
	Ja	Part IV, line 19						
	h	Less: direct expenses						
		Net income or (loss) from gaming a						
		Gross sales of inventory, less retur						
	и а	• • • • • • • • • • • • • • • • • • • •	I					
		and allowances						
		Less: cost of goods sold		1				
\longrightarrow	С	Net income or (loss) from sales of i	nventory	Business Code				
SI				Business Code				
Miscellaneous Revenue	11 a							
llan	b							
Se Be	c							
Σ̈́		All other revenue						
		Total. Add lines 11a-11d			20 122 15-	00544055	-	040.000
	12	Total revenue. See instructions			30,130,105.	22544069.	0.	948,308.

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 (B)
Program service
expenses (**D**) Fundraising (C) Management and general expenses (A) Total expenses Do not include amounts reported on lines 6b. expenses 7b, 8b, 9b, and 10b of Part VIII. Grants and other assistance to domestic organizations 75,386. 75,386. and domestic governments. See Part IV, line 21 Grants and other assistance to domestic 1,500. 1,500. individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 689,722. 535,671. 154,051. trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 11,096,475. 10,062,852. 682,253. 351,370. 7 Pension plan accruals and contributions (include 655,885. 526,766. 100,697. 28,422. section 401(k) and 403(b) employer contributions) 1,016,992. 177,717. Other employee benefits 221,398. 26,689. 9 863,804. 746,075. 95,453. 22,276. 10 Payroll taxes 11 Fees for services (nonemployees): Management 42,013. 42,013. Legal 93,391. 93,391. Accounting Lobbying Professional fundraising services. See Part IV, line 17 43,361. 43,361. Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 2,283,758. 389,550. column (A), amount, list line 11g expenses on Sch O.) 2,673,308. 273,119.167,424. 92,004. 13,691. Advertising and promotion 12 115,021. 82,775. 26,820. 5,426. Office expenses 13 204,236. 174,563. 29,673. 14 Information technology Royalties 15 2,883,894. 157,767. 2,726,087. 40. 16 Occupancy 546,022. 460,118. 70,103. 15,801. 17 Travel Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 3,091. 7,003. 3,912. Conferences, conventions, and meetings 19 703,496. 703,496. 20 320,501. Payments to affiliates 320,501. 21 2,423,330. 6,136. 2,429,466. Depreciation, depletion, and amortization 22 773,054. 632,809. 140,245. 23 Other expenses. Itemize expenses not covered 24 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.) 2,309,369. 2,281,096. 3,086. 25,187. PROG.MATERIALS/SUPPLIES EQUIP.RENTAL/REPLACE 667,654. 319,720. 347,934. 534,652. 534,652. DIRECT SUBSIDIES 103,270. 262. d BAD DEBT EXPENSE 103,008. 66,226. $2,39\overline{2}$. 100,741. 32,123. e All other expenses _ 29,427,741. 25,391,724. 3,412,511. 623,506. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

Form 990 (2023)
Part X Balance Sheet

Pal	rt X	Balance Sneet					
		Check if Schedule O contains a response or note	to any	line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			13,550.	1	13,550.
	2	Savings and temporary cash investments			6,258,144.	2	5,507,382.
	3	Pledges and grants receivable, net			290,922.	3	248,331.
	4	Accounts receivable, net			449,682.	4	410,088.
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, substa	antial c	ontributor, or 35%			
		controlled entity or family member of any of these	e perso	ons		5	
	6	Loans and other receivables from other disqualifi	ed per	sons (as defined			
		under section 4958(f)(1)), and persons described	in sect	tion 4958(c)(3)(B)		6	
ţ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
ĕ	9	Prepaid expenses and deferred charges			303,172.	9	359,992.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	78,580,781.			
	b			34,114,404.	44,952,987.	10c	
	11	Investments - publicly traded securities			12,898,623.	11	16,949,617.
	12	Investments - other securities. See Part IV, line 1		T T	3,315,000.	12	3,820,257.
	13	Investments - program-related. See Part IV, line 1	404 005	13	1.50		
	14	Intangible assets	181,805.	14	162,766.		
	15	Other assets. See Part IV, line 11			4,797,896.	15	2,523,974.
	16	Total assets. Add lines 1 through 15 (must equa		73,461,781.	16	74,462,334.	
	17	Accounts payable and accrued expenses	1,620,717.	17	1,618,405.		
	18	Grants payable	2 122 012	18	2 521 610		
	19	Deferred revenue			2,133,812.	19	2,521,610.
	20	Tax-exempt bond liabilities			13,906,741.	20	12,657,026.
	21	Escrow or custodial account liability. Complete F				21	
ies	22	Loans and other payables to any current or former					
Liabilities		trustee, key employee, creator or founder, substa		i i		22	
Lia	23	controlled entity or family member of any of these Secured mortgages and notes payable to unrelate			820,485.	23	155,362.
	24	Unsecured notes and loans payable to unrelated			020, 403	24	133,302.
	25	Other liabilities (including federal income tax, pay				24	
	23	parties, and other liabilities not included on lines					
		of Schodulo D	-	•	140,968.	25	0.
	26				18,622,723.	26	16,952,403.
		Organizations that follow FASB ASC 958, chec					
es		and complete lines 27, 28, 32, and 33.					
auc	27				36,501,918.	27	37,205,138.
Bali	28	Net assets with donor restrictions	18,337,140.	28	20,304,793.		
2		Organizations that do not follow FASB ASC 95					
Ē		and complete lines 29 through 33.					
ğ	29	Capital stock or trust principal, or current funds				29	
set	30	Paid-in or capital surplus, or land, building, or equ				30	
As	31	Retained earnings, endowment, accumulated inc		T T		31	
Net Assets or Fund Balances	32	Total net assets or fund balances			54,839,058.	32	57,509,931.
	33				73,461,781.	33	74,462,334.
				<u> </u>			Form 990 (2023)

Pa	rt 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	30,		_	
2	2 Total expenses (must equal Part IX, column (A), line 25)					
3	Revenue less expenses. Subtract line 2 from line 1	3				64.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	54,			
5	Net unrealized gains (losses) on investments	5	<u> </u>	96	8,5	<u>09.</u>
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				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	57,	50	9,9	<u>31.</u>
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					X
			_		Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_			
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.					
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:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		L	2b	X	<u> </u>
	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:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?		L	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.				
За	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?		L	За	X	<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required					
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b	X	
			F	orm	990	(2023)

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

YOUNG MEN'S CHRISTIAN ASSOCIATION **Employer identification number** Name of the organization OF GREATER PITTSBURGH 25-0969497 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes above (see instructions))

OF GREATER PITTSBURGH

25-0969497 Page 2

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.)

Sec	Section A. Public Support								
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total		
1	Gifts, grants, contributions, and								
	membership fees received. (Do not								
	include any "unusual grants.")	8517086.	10436930.	10966674.	10687260.	6637728.	<u>47245678.</u>		
2	Tax revenues levied for the organ-								
	ization's benefit and either paid to								
	or expended on its behalf								
3	The value of services or facilities								
	furnished by a governmental unit to								
	the organization without charge								
4	Total. Add lines 1 through 3	8517086.	10436930.	10966674.	10687260.	6637728.	47245678.		
5	The portion of total contributions								
	by each person (other than a								
	governmental unit or publicly								
	supported organization) included								
	on line 1 that exceeds 2% of the								
	amount shown on line 11,								
	column (f)						560,346.		
6	Public support. Subtract line 5 from line 4.						46685332.		
Sec	tion B. Total Support								
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total		
7	Amounts from line 4	8517086.	10436930.	10966674.	10687260.	6637728.	47245678.		
8	Gross income from interest,								
	dividends, payments received on								
	securities loans, rents, royalties,								
	and income from similar sources	428,490.	378,382.	428,023.	565,476.	678,858.	2479229.		
9	Net income from unrelated business								
	activities, whether or not the								
	business is regularly carried on	110,049.		124,535.	127,908.	141,814.	504,306.		
10	Other income. Do not include gain								
	or loss from the sale of capital								
	assets (Explain in Part VI.)		528,409.				528,409.		
11	Total support. Add lines 7 through 10						50757622.		
12	Gross receipts from related activities,	etc. (see instruction	ons)			12 96	<u>,343,653.</u>		
13	First 5 years. If the Form 990 is for th	ne organization's fir	rst, second, third,	fourth, or fifth tax y	ear as a section 50	01(c)(3)			
	organization, check this box and stop								
	tion C. Computation of Publi					1			
	Public support percentage for 2023 (li					14	91.98 %		
	Public support percentage from 2022					15	92.62 %		
16a	33 1/3% support test - 2023. If the o								
	stop here. The organization qualifies	. ,	Ü						
b	33 1/3% support test - 2022. If the c								
	and stop here. The organization qual								
17a	10% -facts-and-circumstances test								
	and if the organization meets the facts				•	_			
	meets the facts-and-circumstances te					7 15 4F in			
b	10% -facts-and-circumstances test	-					10% or		
	more, and if the organization meets the								
40	organization meets the facts-and-circu								
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 160, 1/a, or 17b	, cneck this box ar	ia see instructions	<u> </u>		

Schedule A (Form 990) 2023

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.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
•	3 received from disqualified persons						
k	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						
,	Add lines 7a and 7b						<u> </u>
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 6	(a) 2010	(5) 2020	(6) 2021	(u) Loll	(0) 2020	(1) 10141
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties, and income from similar sources						
ŀ	Unrelated business taxable income						
•	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
,	Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included on line 10b,						
	whether or not the business is regularly carried on						
12	Other income. Do not include gain						
	or loss from the sale of capital						
12	assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.)						
	First 5 years. If the Form 990 is for the	L organization's fi	ret eccond third t	fourth or fifth tax i	l year as a section 5	(01(c)(3) organization	
'7				· · · · · · · · · · · · · · · · · · ·			
Sec	ction C. Computation of Publi	c Support Per	centage		• • • • • • • • • • • • • • • • • • • •		·····
	Public support percentage for 2023 (I			column (f))		15	%
	Public support percentage from 2022					16	93.36 %
	ction D. Computation of Inves		-			1 10 1	J 3 • 3 0 70
	Investment income percentage for 20			20 13 column (fl)		17	20
						18	1.43 %
18	Investment income percentage from a 33 1/3% support tests - 2023. If the			on line 14, and line			
198							/ IS HOL
	more than 33 1/3%, check this box ar						L
ľ	33 1/3% support tests - 2022. If the						
00	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization	n ala not check a !	box on line 14, 19a	a, or 190, cneck th	iis dox and see ins	tructions	

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

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

		Yes	No
	1		
	2		
	3a		
	٥L		
	3b		
	3с		
	4a		
	4b		
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25-0969497 Page 5

Par	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one of	r		
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officer	s,		
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supporte 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.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
_	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described 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? If "Yes," describe in Part VI the role the organization's			
Sec	supported organizations played in this regard. Stion E. Type III Functionally Integrated Supporting Organizations	3		
		iono)		
1 a	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. <i>Complete</i> line 3 below.			
c	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (s	ee instruction	(e)	
2	Activities Test. Answer lines 2a and 2b below.	cc msnachon	Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described 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? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b	71 0 7			
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b	1	1

YOUNG MEN'S CHRISTIAN ASSOCIATION

25-0969497 Page 6 OF GREATER PITTSBURGH Schedule A (Form 990) 2023

Pai	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Orgar	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust on	Nov. 20, 1970 (explain in l	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mus	st complete	e Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
_1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
_4	Add lines 1 through 3.	4		
_5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount			(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 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	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
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	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	ally integrat	ed Type III supporting orga	nization (see
	instructions).			

Schedule A (Form 990) 2023

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) **Current Year** Section D - Distributions 1 1 Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to perform activity that directly furthers exempt purposes of supported 2 organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations 3 4 Amounts paid to acquire exempt-use assets 5 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) 5 6 6 Other distributions (describe in Part VI). See instructions. 7 7 Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the organization is responsive 8 (provide details in Part VI). See instructions. 8 9 Distributable amount for 2023 from Section C, line 6 Line 8 amount divided by line 9 amount 10 10 (i) (ii) Distributable Underdistributions Section E - Distribution Allocations (see instructions) **Excess Distributions** Amount for 2023 Pre-2023 Distributable amount for 2023 from Section C, line 6 2 Underdistributions, if any, for years prior to 2023 (reasonable cause required - explain in Part VI). See instructions. 3 Excess distributions carryover, if any, to 2023 a From 2018 **b** From 2019 **c** From 2020 **d** From 2021 e From 2022 f Total of lines 3a through 3e g Applied to underdistributions of prior years h Applied to 2023 distributable amount i Carryover from 2018 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. 4 Distributions for 2023 from Section D, line 7: **a** Applied to underdistributions of prior years **b** Applied to 2023 distributable amount c Remainder. Subtract lines 4a and 4b from line 4. 5 Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions 6 Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2024. Add lines 3i and 4c. 8 Breakdown of line 7: a Excess from 2019 **b** Excess from 2020 c Excess from 2021 d Excess from 2022 e Excess from 2023

Schedule A (Form 990) 2023

YOUNG MEN'S CHRISTIAN ASSOCIATION

25-096<u>9497 Page 8</u> OF GREATER PITTSBURGH Schedule A (Form 990) 2023 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. Part VI (See instructions.)

332028 12-21-23 Schedule A (Form 990) 2023

Schedule B

(Form 990)

Schedule of Contributors

OMB No. 1545-0047

2023

Department of the Treasury Internal Revenue Service

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

Name of the organization
YOUNG MEN'S CHRISTIAN ASSOCIATION
OF GREATER PITTSBURGH

25-0969497

Employer identification number

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 99	0-PF	501(c)(3) exempt private foundation						
		4947(a)(1) nonexempt charitable trust treated as a private foundation						
		501(c)(3) taxable private foundation						
		covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.						
General	Rule							
	-	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.						
Special	Rules							
X	sections 509(a)(1) a contributor, during	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under 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 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; line 1. Complete Parts I and II.						
	contributor, during literary, or educatio	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, nal purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering instead of the contributor name and address), II, and III.						
	year, contributions is checked, enter he purpose. Don't com	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., plete any of the parts unless the General Rule applies to this organization because it received nonexclusively etc., contributions totaling \$5,000 or more during the year \$						
answer '	'No" on Part IV, line	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must 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 requirements of Schedule B (Form 990).						

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2023)

Name of organization
YOUNG MEN'S CHRISTIAN ASSOCIATION
OF GREATER PITTSBURGH

Employer identification number

25-0969497

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1		\$\$	Person X Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
2		\$350,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
3		\$\$	Person X Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
4		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
<u>5</u>		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
6		\$\$	Person X Payroll

Name of organization
YOUNG MEN'S CHRISTIAN ASSOCIATION
OF GREATER PITTSBURGH
25-0969497

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

Page 4 Schedule B (Form 990) (2023) Name of organization **Employer identification number** YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER PITTSBURGH 25-0969497 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 (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I

(e) Transfer of gift

Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE C

(Form 990)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under Section 501(c) and Section 527

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

Open to Public

Inspection

Department of the Treasury Internal Revenue Service

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

If the organization answered "Yes" 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. **Employer identification number** YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER PITTSBURGH 25-0969497 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 Volunteer hours for political campaign activities 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? No 4a Was a correction made? Yes Nο b If "Yes," describe in Part IV. Complete if the organization is exempt under section 501(c), except section 501(c)(3). Part I-C 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 Did the filing organization file Form 1120-POL for this year? Enter the names, addresses, and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (d) Amount paid from (a) Name (b) Address (c) EIN (e) Amount of political contributions received and filing organization's promptly and directly funds. If none, enter -0-. delivered to a separate political organization. If none, enter -0-.

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

YOUNG MEN'S CHRISTIAN ASSOCIATION

Schedule C (Form 990) 2023

OF GREATER PITTSBURGH

25-0969497 Page 2

	rt II-A	Complete if the org	janization	is exen	npt under section	501(c)(3) and file	ed Form 5768 (ele	ction under	
A	section 501(h)). Check X 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).								
ь ,									
<u>Б</u>	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	
1 a	Total lobbying expenditures to influence public opinion (grassroots lobbying)						0.		
	b Total lobbying expenditures to influence a legislative body (direct lobbying)					0.			
		obying expenditures (add li					0.		
		kempt purpose expenditure					29,427,741.		
		empt purpose expenditure					29,427,741.		
		g nontaxable amount. Ente					1,000,000.		
		ount on line 1e, column (a) o			bying nontaxable am		, ,		
		· \$500,000,	,, (2), (3)		the amount on line 1e.				
		00,000 but not over \$1,000	0.000		00 plus 15% of the exce	ess over \$500,000.			
		000,000 but not over \$1,5			00 plus 10% of the exce				
		500,000 but not over \$17,			00 plus 5% of the exces				
		7,000,000,		\$1,000,0					
		ots nontaxable amount (en	nter 25% of I			,	250,000.		
_		t line 1g from line 1a. If zer					0.		
	i Subtract line 1f from line 1c. If zero or less, enter -0-				0.				
i		s an amount other than ze	•		ine 1i, did the organiza	tion file Form 4720	-		
•		g section 4911 tax for this			_			Yes No	
	·	(Some organizations t	hat made a	section 50	eraging Period Under O1(h) election do not h ate instructions for lin	nave to complete all o	of the five columns be	low.	
			Lobby	ing Exper	nditures During 4-Yea	r Averaging Period	•		
		Calendar year al year beginning in)	(a) 2	020	(b) 2021	(c) 2022	(d) 2023	(e) Total	
_2a	ı Lobbyin	g nontaxable amount	1,000	,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.	
b	•	g ceiling amount f line 2a, column(e))						6,000,000.	
	: Total lob	obying expenditures							
		ots nontaxable amount	250	,000.	250,000.	250,000.	250,000.	1,000,000.	
		ots ceiling amount f line 2d, column (e))						1,500,000.	
f	Grassro	ots lobbying expenditures							

Schedule C (Form 990) 2023

25-0969497 Page 3

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			(b)	
f the lobbying activity.	Yes	No	Amount	
During the year, did the filing organization attempt to influence foreign, national, state, or				
local legislation, including any attempt to influence public opinion on a legislative matter				
or referendum, through the use of:				
a Volunteers?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?i Other activities?				
j Total. Add lines 1c through 1i				
2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?				
b If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Part III-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)(5), or sec	etion	
501(c)(6).				
			Yes	
1 Were substantially all (90% or more) dues received nondeductible by members?				
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
 Did the appropriation against a page, as on left to find and the District. O. 10. 10. 10. 10. 	o prior voor?			
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the	- FOA(-)/F	3		
Part III-B Complete if the organization is exempt under section 501(c)(4), section	n 501(c)(5), or sec		
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered '	n 501(c)(5), or sec		
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	n 501(c)(5 'No" OR (b), or sec b) Part		
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Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeded set he organization agree to carryover to the reasonable estimate of nondeductible lobbying and polynomiatures next year? 5 Taxable amount of lobbying and political expenditures. See instructions Cart IV Supplemental Information rovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group structions); and Part II-B, line 1. Also, complete this part for any additional information. ART IV	on 501(c)(5 'No" OR (2a 2b 2c 3 4 5 4 5 4 1	nd 2 (see	
Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeded set he organization agree to carryover to the reasonable estimate of nondeductible lobbying and polymer expenditures next year? 5 Taxable amount of lobbying and political expenditures. See instructions Part IV Supplemental Information rovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group structions); and Part II-B, line 1. Also, complete this part for any additional information. PART IV THE ASSOCIATION'S PAST LOBBYING EFFORTS WERE CENTERED ND LOCAL GOVERNMENT GRANT FUNDING FOR CRITICALLY UNDER TOTAL SUPPLIES OF CRITICALLY UNDER Supplemental Information FUNDING FOR CRITICALLY UNDER THE ASSOCIATION'S PAST LOBBYING EFFORTS WERE CENTERED	on 501(c)(5 'No" OR (2a 2b 2c 3 4 5 4 5 4 1	nd 2 (see	
Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeded set the organization agree to carryover to the reasonable estimate of nondeductible lobbying and poetant lives next year? 5 Taxable amount of lobbying and political expenditures. See instructions Part IV Supplemental Information rovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group structions); and Part II-B, line 1. Also, complete this part for any additional information. ART IV HE ASSOCIATION'S PAST LOBBYING EFFORTS WERE CENTERED	on 501(c)(5 'No" OR (2a 2b 2c 3 4 5 A, lines 1 a	nd 2 (see	

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

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

OMB No. 1545-0047 Inspection

Name of the organization

YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER PITTSBURGH

Employer identification number 25-0969497

Pai	organizations waintaining bonor Advised organization answered "Yes" on Form 990, Part IV, line		iiiiiai i ullus (or Accounts. Complete if the
		(a) Donor advised	d funds	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in v	writing that the assets hel	d in donor advise	d funds
	are the organization's property, subject to the organization's	exclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor ad	dvisors in writing that gra	nt funds can be u	sed only
	for charitable purposes and not for the benefit of the donor or	r donor advisor, or for any	other purpose co	onferring
_	impermissible private benefit?			
Pa	rt II Conservation Easements. Complete if the org	ganization answered "Yes	" on Form 990, P	art IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).		
	Preservation of land for public use (for example, recreat	tion or education)		a historically important land area
	Protection of natural habitat		Preservation of a	a certified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualifi	ied conservation contribu	ition in the form o	
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2a
b	Total acreage restricted by conservation easements			2b
С	Number of conservation easements on a certified historic stru	ucture included on line 2a		2c
d	Number of conservation easements included on line 2c acqui	red after July 25, 2006, a	nd not	
	on a historic structure listed in the National Register			2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or te	erminated by the o	organization during the tax
	year			
4	Number of states where property subject to conservation eas	ement is located		
5	Does the organization have a written policy regarding the peri	iodic monitoring, inspecti	on, handling of	
	violations, and enforcement of the conservation easements it	holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, I	handling of violations, and	d enforcing conse	rvation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enf	orcing conservation	on easements during the year
8	Does each conservation easement reported on line 2d above	•		
	and section 170(h)(4)(B)(ii)?			
9	In Part XIII, describe how the organization reports conservation		•	
	balance sheet, and include, if applicable, the text of the footn	ote to the organization's	financial statemer	nts that describes the
Dai	organization's accounting for conservation easements. 't III Organizations Maintaining Collections of	Art Historical Tros	ocurac or Oth	or Similar Assats
Га	Complete if the organization answered "Yes" on Form		isures, or Oth	lei Siiiliai Assets.
12	If the organization elected, as permitted under FASB ASC 958		nue statement an	d halance sheet works
	of art, historical treasures, or other similar assets held for pub	•		
	service, provide in Part XIII the text of the footnote to its finan			•
h	If the organization elected, as permitted under FASB ASC 958			
	art, historical treasures, or other similar assets held for public			
	provide the following amounts relating to these items.	extribition, education, or	TOOCATOT! IT! TATE!	rance of public service,
	(i) Revenue included on Form 990, Part VIII, line 1			\$
2	If the organization received or held works of art, historical trea			
_	the following amounts required to be reported under FASB AS	•	•	gain, provide
9	Revenue included on Form 990, Part VIII, line 1	~		\$
	Assets included in Form 990, Part V			\$

Par	t III Organizations Maintaining C	ollections of Art	t, Historical Tre	asures, or Oth	er Sim	ilar Ass	ets (conti	nued)		
3	Using the organization's acquisition, accession	on, and other records	s, check any of the f	ollowing that make	significa	ant use of i	ts	Í		
	collection items (check all that apply).		•	· ·	· ·					
а	Public exhibition	d	Loan or excl	hange program						
b										
С										
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.									
5										
	to be sold to raise funds rather than to be ma						Yes		No	
Par	t IV Escrow and Custodial Arrang						/, line 9, or			
	reported an amount on Form 990, Par		J			,	, ,			
1a	Is the organization an agent, trustee, custodia	an, or other intermed	liary for contribution	s or other assets n	ot includ	ed				
	on Form 990, Part X?	•	•				Yes		No	
b	If "Yes," explain the arrangement in Part XIII a	and complete the fol	lowing table:							
	, 1	·	J				Amour	nt		
С	Beginning balance				1	lc				
	Additions during the year					ld				
е	Distributions during the year					le				
f	Ending balance					lf				
2a	Did the organization include an amount on Fo						Yes		No	
	If "Yes," explain the arrangement in Part XIII.]	
Par										
		(a) Current year	(b) Prior year	(c) Two years back		ree years ba	ıck (e) Fou	r years	back	
1a	Beginning of year balance	6,631,840.	7,572,304.	8,010,525		9,163,56	1. 10	,659,	370.	
b	Contributions	0.	5,274.			3,11	0.	7,	785.	
С	Net investment earnings, gains, and losses	1,071,844.					0.	-822,210		
d	Grants or scholarships		•	•						
	Other expenditures for facilities									
	and programs	346,428.	549,626.	556,613		3,001,10	6.	681,	384.	
f	Administrative expenses		•	•						
g	End of year balance	7,357,256.	6,631,840.	7,572,304		8,010,52	5. 9	,163,	561.	
2	Provide the estimated percentage of the curre		e (line 1g. column (a)							
а	Board designated or quasi-endowment	.0000	%	,						
b	Permanent endowment 100	%	— -							
С		<u></u> -								
	The percentages on lines 2a, 2b, and 2c shou	ıld equal 100%.								
За	Are there endowment funds not in the posses	•	tion that are held an	d administered for	the					
	organization by:	3						Yes	No	
	(i) Unrelated organizations?						3a(i)		Х	
									Х	
b	If "Yes" on line 3a(ii), are the related organization									
4	Describe in Part XIII the intended uses of the									
Par	t VI Land, Buildings, and Equipm									
	Complete if the organization answered	d "Yes" on Form 990	, Part IV, line 11a. S	ee Form 990, Part	X, line 10) .				
	Description of property	(a) Cost or o	ther (b) Cost	or other (c)	Accumu	ulated	(d) Boo	k value		
	,	basis (investn			depreciat	tion	` ,			
1a	Land		1,91	2,177.			1,91	2,1	77.	
	Buildings				,064	,891.	37,88			
С	Leasehold improvements			0,335.		,113.		8,2		
d	Equipment					,112.	1,39			
	Other	I				,288.	3,25			
	. Add lines 1a through 1e. (Column (d) must ed		•				44,46	6,3	77.	

OF GREATER PITTSBURGH

a) Description of security or category (including name of security)	(b) Book value	1b. See Form 990, Part X, line 12.(c) Method of valuation: Cost or er	nd-of-vear market value
Financial derivatives	(2, 2001, 10100	(2)	o. your market value
Classic hald and the interests			
Other			
(A) SPLIT INTEREST AGREEMENTS	3,698,000.	END-OF-YEAR MARKET	r VALUE
(B) DERIVATIVE INSTRUMENTS AT	3,030,0001		VIII 0 I
(C) FMV	122,257.	END-OF-YEAR MARKET	UALITE
(D)	122/23/1		VIII 0 I
(E)			
(F)			
(G)			
(H)			
(1) (al. (Col. (b) must equal Form 990, Part X, line 12, col. (B))	3,820,257.		
art VIII Investments - Program Related.	3702072374		
Complete if the organization answered "Yes" of	on Form 990. Part IV. line 1	1c. See Form 990. Part X. line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or er	nd-of-vear market value
(1)	(-)	(-,	
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
tal. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets			
Complete if the organization answered "Yes" of	on Form 990. Part IV. line 1	1d. See Form 990. Part X. line 15.	
-	Description	, ,	(b) Book value
(1)	·		'
\''			
(2)			
(2)			
(3)			
(3) (4)			
(3) (4) (5)			
(3) (4) (5) (6)			
(3) (4) (5) (6) (7)			
(3) (4) (5) (6) (7) (8)			
(3) (4) (5) (6) (7) (8) (9) tal. (Column (b) must equal Form 990, Part X, line 15, col.	(B))		
(3) (4) (5) (6) (7) (8) (9) tal. (Column (b) must equal Form 990, Part X, line 15, col. art X Other Liabilities			6
(3) (4) (5) (6) (7) (8) (9) tal. (Column (b) must equal Form 990, Part X, line 15, col. Part X Other Liabilities Complete if the organization answered "Yes" of			
(3) (4) (5) (6) (7) (8) (9) Ital. (Column (b) must equal Form 990, Part X, line 15, col. Part X Other Liabilities Complete if the organization answered "Yes" of (a) Description of liability			5. (b) Book value
(3) (4) (5) (6) (7) (8) (9) tal. (Column (b) must equal Form 990, Part X, line 15, col. art X Other Liabilities Complete if the organization answered "Yes" of (a) Description of liability (1) Federal income taxes			
(3) (4) (5) (6) (7) (8) (9) ttal. (Column (b) must equal Form 990, Part X, line 15, col. Part X Other Liabilities Complete if the organization answered "Yes" of (a) Description of liability (1) Federal income taxes (2)			
(3) (4) (5) (6) (7) (8) (9) tal. (Column (b) must equal Form 990, Part X, line 15, col. Part X Other Liabilities Complete if the organization answered "Yes" of (a) Description of liability (1) Federal income taxes (2) (3)			
(3) (4) (5) (6) (7) (8) (9) tal. (Column (b) must equal Form 990, Part X, line 15, col. eart X Other Liabilities Complete if the organization answered "Yes" of (a) Description of liability (1) Federal income taxes (2) (3) (4)			
(3) (4) (5) (6) (7) (8) (9) tal. (Column (b) must equal Form 990, Part X, line 15, col. eart X Other Liabilities Complete if the organization answered "Yes" of (a) Description of liability (1) Federal income taxes (2) (3) (4) (5)			
(3) (4) (5) (6) (7) (8) (9) Ital. (Column (b) must equal Form 990, Part X, line 15, col. Part X Other Liabilities Complete if the organization answered "Yes" of (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6)			
(3) (4) (5) (6) (7) (8) (9) Ital. (Column (b) must equal Form 990, Part X, line 15, col. Part X Other Liabilities Complete if the organization answered "Yes" of (a) Description of liability (1) Federal income taxes (2) (3) (4) (5)			
(3) (4) (5) (6) (7) (8) (9) Ptal. (Column (b) must equal Form 990, Part X, line 15, col. Part X Other Liabilities Complete if the organization answered "Yes" of (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8)			
(3) (4) (5) (6) (7) (8) (9) tal. (Column (b) must equal Form 990, Part X, line 15, col. art X Other Liabilities Complete if the organization answered "Yes" of (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7)			

25-0969497 Page 4

Pai	rt XI Reconciliation of Revenue per Audited Financi	al Statements With	n Revenue per Re	turn	<u> </u>
	Complete if the organization answered "Yes" on Form 990, P	art IV, line 12a.			
1	Total revenue, gains, and other support per audited financial statement	ents		1	31,748,319.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	1,968,509.		
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	227,718.		
е				2e	2,196,227.
3	Subtract line 2e from line 1			3	29,552,092.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	43,361.		
b	Other (Describe in Part XIII.)	4b	534,652.		
С	Add lines 4a and 4b			4c	578,013.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I	line 12.)	<u></u>	5	30,130,105.
Pa	rt XII Reconciliation of Expenses per Audited Financ		th Expenses per F	Retur	n
	Complete if the organization answered "Yes" on Form 990, P				
1	Total expenses and losses per audited financial statements				
2				1	29,077,446.
	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1		1	29,077,446.
а		2a		1	29,077,446.
a b	Donated services and use of facilities			1	29,077,446.
	Donated services and use of facilities	2b		1	29,077,446.
	Donated services and use of facilities Prior year adjustments Other losses	2b 2c	227,718.	1	
b c d	Donated services and use of facilities Prior year adjustments Other losses	2b 2c 2d	227,718.	1 2e	227,718.
b c d	Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2b 2c 2d	227,718.		
b c d	Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	2b 2c 2d	227,718.	2e	227,718.
b c d e	Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	2b 2c 2d	227,718.	2e	227,718.
b c d e 3	Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2b 2c 2d	227,718.	2e	227,718. 28,849,728.
b c d e 3 4	Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2b 2c 2d 4a 4b	227,718. 43,361. 534,652.	2e	227,718.

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:

ENDOWMENT FUNDS REPRESENT THE PRINCIPAL AMOUNT AND ACCUMULATED EARNINGS OF GIFTS AND BEQUESTS ACCEPTED WITH THE STIPULATION THAT THE PRINCIPAL BE MAINTAINED INTACT IN PERPETUITY UNTIL THE OCCURRENCE OF A SPECIFIED EVENT, OR FOR A SPECIFIED PERIOD, WITH ONLY THE INCOME TO BE UTILIZED. THE BOARD OF TRUSTEES CURRENTLY EVALUATES EACH ENDOWMENT AGREEMENT AND DETERMINES THE SPENDING POLICY FOR THE YEAR.

THE ASSOCIATION IS GOVERNED BY THE COMMONWEALTH OF PENNSYLVANIA'S ACT 141 ("ACT 141"). IN ACCORDANCE WITH ACT 141, THE ASSOCIATION HAS ADOPTED A WRITTEN INVESTMENT GUIDELINE, OF WHICH A SECTION SPECIFICALLY RELATES TO

THE ENDOWMENT.

Part XIII Supplemental Information (continued)
Part XIII Supplemental Information (continued)
PART X, LINE 2:
THE ASSOCIATION QUALIFIES AS A TAX-EXEMPT ORGANIZATION UNDER SECTION
501(C)(3) OF THE U.S. INTERNAL REVENUE CODE. ACCORDINGLY, NO PROVISION FOR
FEDERAL AND STATE INCOME TAX IS REQUIRED.
THE ASSOCIATION ACCOUNTS FOR UNCERTAINTY IN INCOME TAXES USING A
RECOGNITION THRESHOLD OF MORE-LIKELY-THAN-NOT TO BE SUSTAINED UPON
EXAMINATION BY THE APPROPRIATE TAXING AUTHORITY. MEASUREMENT OF THE TAX
UNCERTAINTY OCCURS IF THE RECOGNITION THRESHOLD IS MET. MANAGEMENT
DETERMINED THAT THERE WERE NO TAX UNCERTAINTIES THAT MET THE RECOGNITION
THRESHOLD IN 2024 AND 2023.
PART XI, LINE 2D - OTHER ADJUSTMENTS:
SPECIAL EVENTS EXPENSES 227,718
PART XI, LINE 4B - OTHER ADJUSTMENTS:
DIRECT SUBSIDIES 534,652
PART XII, LINE 2D - OTHER ADJUSTMENTS:
SPECIAL EVENT EXPENSES 227,718
PART XII, LINE 4B - OTHER ADJUSTMENTS:
DIRECT SUBSIDIES 534,652

SCHEDULE G (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

 $\ensuremath{\text{Go}}$ to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization YOUNG MEN'S CHRISTIAN ASSOCIATION Employer identification number OF GREATER PITTSBURGH 25-0969497 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. а Mail solicitations е Solicitation of non-government grants Internet and email solicitations b f Solicitation of government grants Phone solicitations Special fundraising events С g d In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col. (i) Yes No Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

YOUNG MEN'S CHRISTIAN ASSOCIATION

Schedule G (Form 990) 2023

OF GREATER PITTSBURGH

25-0969497 Page 2

Pa	rt I	Fundraising Events. Complete if the of fundraising event contributions and groups and groups.						
		or furidialsing event contributions and gre	(a) Event #1		(b) Event #2		Other events	
			1	FOI	` '	, ,		(d) Total events
			TROT	FES	STIVAL		3	(add col. (a) through col. (c))
Ð			(event type)		(event type)	(t	otal number)	Coi. (C)
Revenue	1	Gross receipts	198,500.		182,725.		120,195.	501,420.
	2	Less: Contributions	48,700.		58,030.		25,158.	131,888.
	3	Gross income (line 1 minus line 2)	149,800.		124,695.		95,037.	369,532.
		Cash prizes						
Se	5	Noncash prizes						
pens	6	Rent/facility costs			929.		12,807.	13,736.
Direct Expenses	7	Food and beverages	2,145.		20,951.			23,096.
D	8	Entertainment			94,038.			94,038.
	9	Other direct expenses			94,038. 29,306.		54,053.	94,038. 96,848.
	10	Direct expense summary. Add lines 4 through	9 in column (d)					227,718.
Pa	11 rt 1				D-+ N/ 15 40			141,814.
Га	111	Gaming. Complete if the organization a \$15,000 on Form 990-EZ, line 6a.	answered "Yes" on Form	1 990,	Part IV, line 19, or i	reporte	a more than	
		\$ 10,000 cm cm coo LE, into ca.	() 5:	(b) Pull tabs/instant		2.1	(d) Total gaming (add
nue			(a) Bingo		o/progressive bingo	(c)	Other gaming	col. (a) through col. (c))
Revenue								
_	1	Gross revenue						
ses	2	Cash prizes						
Expen	3	Noncash prizes						
Direct Expenses	4	Rent/facility costs						
	5	Other direct expenses						
	6	Volunteer labor	Yes % No		Yes % No		Yes % No	
	_							
	′	Direct expense summary. Add lines 2 through	1 5 in column (a)					
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)					
9	Ent	ter the state(s) in which the organization condu	cts gaming activities:					
		the organization licensed to conduct gaming ac	_	states	5?			Yes No
b	If "	No," explain:						
	Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No b If "Yes," explain:							Yes No
								-

YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER PITTSBURGH

Schedule G (Form 990) 2023 Does the organization conduct gaming activities with nonmembers? 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes 13 Indicate the percentage of gaming activity conducted in: a The organization's facility 13a **b** An outside facility 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 **b** If "Yes," enter the amount of gaming revenue received by the organization of gaming revenue retained by the third party \$ c If "Yes," enter name and address of the third party: Name Address 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? 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 \$ 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.

332083 09-13-23 Schedule G (Form 990) 2023

YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER PITTSBURGH

Schedule G	(Form 990) OF GREATER	PITTSBURGH	25-0969497	Page 4
Part IV	Supplemental Information (continued)			
	promonan manan (continuea)			

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

Attach to Form 990.

Go to www.irs.gov/Form990 for the latest information.
YOUNG MEN'S CHRISTIAN ASSOCIATION

2023

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

OF GREATE	R PITTSBU	RGH					25-0969497
Part I General Information on Grants a	nd Assistance						
1 Does the organization maintain records		-			-		
criteria used to award the grants or assis	stance?						No
2 Describe in Part IV the organization's pro	ocedures for monit	oring the use of grant	funds in the United	l States.			
Part II Grants and Other Assistance to recipient that received more than	-				ganization answered "\	es" on Form 990, Part	IV, line 21, for any
(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
YWCA OF GREATER PITTSBURGH							
305 WOOD ST							
PITTSBURGH, PA 15222	25-0965639	501(C)(3)	75,386.	0.	N/A	N/A	HOPE FOR ALL PROJECT
			-				
	<u> </u>		1				1
2 Enter total number of section 501(c)(3) a	-		ie line 1 table				<u> </u>
3 Enter total number of other organization	s iistea in the line 1	ı ladle					

Schedule I (Form 990) 2023 OF GREATER PITT	SBURGH				25-0969497	Page
Part III Grants and Other Assistance to Domestic Individuals. Part III can be duplicated if additional space is needed.	Complete if the	organization answe	ered "Yes" on Form 9	990, Part IV, line 22.		
(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 assi	istance
SCHOLARSHIPS UP TO \$2,000 FOR ELIGIBLE STUDENTS						
PURSUING DEGREES IN SOCIAL SERVICES	1	1,500.	0.	N/A	N/A	
					MORE THAN 5,000 FOOD ITEMS	S
					WERE PROVIDED FREE OF COST	T TO
					PEOPLE OF ALL AGES RESIDIN	NG IN
DISTRIBUTION OF FOOD IN HOMEWOOD AREA	0	0.	5,000.	N/A	HOMEWOOD AND SURROUNDING	
Part IV Supplemental Information. Provide the information req	uired in Part I, lin	e 2; Part III, column	(b); and any other ac	l dditional information.		
PART I, LINE 2:						
ORGANIZATIONS RECEIVING ASSISTANCE	FROM THE	YMCA ARE	MONITORED	TO ENSURE		
THEY MEET THE CRITERIA ASSOCIATED W	VITH THE	RESPECTIVE	E AWARD.			
(F) DESCRIPTION OF NON-CASH ASSISTA	ANCE: MOR	E THAN 5,0	000 FOOD IT	EMS WERE		
PROVIDED FREE OF COST TO PEOPLE OF						
SURROUNDING NEIGHBORHOODS.						

Part IV Supplemental Information

PART IV

THE CRITERIA FOR DETERMINING ELIGIBILITY FOR A SCHOLARSHIP IS:

- 1. THE INDIVIDUAL HAS DECLARED A DESIRE TO BECOME A CANDIDATE FOR THE

 YMCA PROFESSION OR A RELATED PERSON-SERVICE CAREER, OR CONTRIBUTE

 HIS/HER ENERGIES AS A LAY LEADER IN THE YMCA.
- 2. THE CANDIDATE HAS DEMONSTRATED LEADERSHIP POTENTIAL THROUGH

 PARTICIPATION FOR A REASONABLE PERIOD OF TIME IN PROGRAMS, COMMITTEES,

 BOARDS, COUNCILS, OR HAS BEEN SATISFACTORILY EMPLOYED ON A FULL-TIME,

 PART-TIME OR VOLUNTEER BASIS ON A YMCA STAFF.
- 3. THE CANDIDATE FOR CONSIDERATION IS RECOMMENDED BY A YMCA DIRECTOR BASED UPON PERSONAL OBSERVATIONS AND EXPERIENCE WITH THE INDIVIDUAL.
- 4. THE CANDIDATE SHOULD PRESENT A SATISFACTORY SCHOLARSHIP STANDING

 (ACCEPTANCE BY A COLLEGE WILL BE CONSIDERED SATISFACTORY EVIDENCE OF

 SCHOLARSHIP ACHIEVEMENT). FRESHMAN AND SOPHOMORES MUST MAINTAIN A

 CUMULATIVE AVERAGE OF 2.0 AND JUNIORS AND SENIORS MUST MAINTAIN A

 CUMULATIVE AVERAGE OF 2.5.
- 5. THERE IS A DECLARED FINANCIAL NEED. CANDIDATES MUST SUBMIT A

 STATEMENT OF NEED AND LIST ALL EXPENSES AND ALL SOURCES OF PLANNED

 INCOME AND UPDATE AS ACTUAL GRANTS ARE RECEIVED.
- 6. CANDIDATES MUST HAVE MADE FORMAL APPLICATION TO A COLLEGE OF HIS/HER CHOICE PRIOR TO THE APPLICATION FOR A SCHOLARSHIP.
- 7. SCHOLARSHIP AWARDS WILL BE AWARDED FOR UNDERGRADUATE STUDIES ONLY.
 OTHERS MAY BE CONSIDERED ON AN EXCEPTION BASIS ONLY.

SCHEDULE I, PART III: THE HOMEWOOD YMCA OPERATES A FOOD BANK AND

EMERGENCY FOOD PROGRAMS. STAFFED ALMOST ENTIRELY BY COMMUNITY

VOLUNTEERS, YMCA FOOD PROGRAMS ARE VITAL TO DISTRESSED COMMUNITIES.

MORE THAN 5,000 FOOD ITEMS WERE PROVIDED FREE OF COST TO PEOPLE OF ALL

YOUNG MEN'S CHRISTIAN ASSOCIATION

25-0969497 Page 2 Schedule I (Form 990) OF GREATER PITTSBURGH Part IV | Supplemental Information AGES RESIDING IN THESE AND SURROUNDING NEIGHBORHOODS. THE ORGANIZATION CURRENTLY DOES NOT HAVE A FINANCIAL ACCOUNTING SYSTEM IN PLACE TO CAPTURE THE VALUE OF THE DISTRIBUTED FOOD PRODUCT. FOR PURPOSES OF THIS DISCLOSURE WE ASSIGNED \$1 FOR EACH FOOD ITEM DISTRIBUTED.

SCHEDULE J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER PITTSBURGH

Employer identification number 25-0969497

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the 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.			
	X Compensation committee X Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		Х
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
_	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	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:	_		v
	The organization?	5a		X
b	Any related organization? If "Yes" on line 5a or 5b, describe in Part III.	5b		
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
6	contingent on the net earnings of:			
•		6a		х
	The organization? Any related organization?	6b		X
J	If "Yes" on line 6a or 6b, describe in Part III.	35		
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
•	not described on lines 5 and 6? If "Yes," describe in Part III	7		х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	–		
5	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		x
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
•	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2023

Schedule J (Form 990) 2023

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.

		(B) Breakdown of W	/-2 and/or 1099-MISO compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation (ii) Bonus & (iii) Other reportable compensation compensation (iii) Other reportable compensation (iii) Bonus & (iii) Other reportable compensation (iii			reported as deferred on prior Form 990			
(1) AMY H. KIENLE	(i)	230,472.	0.	1,037.	23,408.	33,898.	288,815.	0.
PRESIDENT AND CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) GREGORY SUPIANOSKI	(i)	150,672.	0.	486.	17,600.	33,023.	201,781.	0.
CHIEF EXPERIENCE OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) ANGELA SCHUETTLER, SVP, CFO,	(i)	162,871.	0.	1,233.	17,591.	0.	181,695.	0.
CAO (EXITED 09/23)	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) CAROLYN GRADY-MOOKERJEE, SVP	(i)	154,051.	0.	2,046.	16,946.	0.	173,043.	0.
CHIEF DEVELOPMENT OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
-	(ii)							
	(i)							
	(ii)							
	(i)							
-	(ii)							
	(i)							
	(ii)							

YOUNG MEN'S CHRISTIAN ASSOCIATION

SCHEDULE K (Form 990) 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. Go to www.irs.gov/Form990 for instructions and the latest information.

2023
Open to Public Inspection

Name of the organization

YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER PITTSBURGH

Employer identification number 25-0969497

OF GREATER PITTSBURGH							<u> </u>	969	<u>49/</u>		
Part I Bond Issues SEE PART VI FOR COLU	JMN (A) COI	TINUAT	IONS								
(a) Issuer name (b) Issuer EIN (c) CUSIP #	# (d) Date issue	ed (e) Iss	ue price	(f) Description	on of purpose	(g) De	feased	(h) On		(i) Po	
								of is	suer	finan	cing
						Yes	No	Yes	No	Yes	No
ALLEGHENY COUNTY											
A INDUSTRIAL DEVELOPMENT A 25-1269117 0000000	00 10/31/1	2 2020		SEE PART			X		X		X
ALLEGHENY COUNTY				REFUNDIN							
B INDUSTRIAL DEVELOPMENT A 25-1269117 0000000	00 10/31/1	7 6,441	.,401.0	OF PRIOR	BONDS		X		X		X
С											
D											
Part II Proceeds			_				_				
		A		В	С				D		
1 Amount of bonds retired	<u> 11,4</u>	34,213.	2,5	550,162.							
2 Amount of bonds legally defeased			<u> </u>								
3 Total proceeds of issue	20,2	00,000.	6,4	141,401.							
4 Gross proceeds in reserve funds											
5 Capitalized interest from proceeds											
6 Proceeds in refunding escrows											
7 Issuance costs from proceeds	1	<u>15,560.</u>									
8 Credit enhancement from proceeds											
9 Working capital expenditures from proceeds											
10 Capital expenditures from proceeds		47,522.									
11 Other spent proceeds	<u> 11,4</u>	<u>36,918.</u>	6,4	141,401.							
12 Other unspent proceeds											
13 Year of substantial completion		2015		2017							
	Yes	No	Yes	No	Yes	No		Yes		No	
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)?	X			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	X								
16 Has the final allocation of proceeds been made?	X		X								
17 Does the organization maintain adequate books and records to support the	_										
final allocation of proceeds?	Х		X								

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

Schedule K (Form 990) 2023

YOUNG MEN'S CHRISTIAN ASSOCIATION

OF GREATER PITTSBURGH			25-	-0969497				Page
e								
		Ą		В		Ç		<u> </u>
rtner in a partnership, or a member of an LLC,	Yes	No	Yes	No	Yes	No	Yes	No
nced by tax-exempt bonds?		X		X				
ements that may result in private business use of								
		X		X				
t or service contracts that may result in private								
nced property?		X		X				
e organization routinely engage bond counsel or other	ıtside							
nagement or service contracts relating to the financed p	operty?							
reements that may result in private business use of								
		X		X				
e organization routinely engage bond counsel or other								
any research agreements relating to the financed prope	ty?							
nanced property used in a private business use by entit	' 	•				•		
)(3) organization or a state or local government		.00 %		.00 %		%		
nanced property used in a private business use as a		100 /0		70		,,		
business activity carried on by your organization,								
organization, or a state or local government		.00 %		.00 %		%		
		.00 %		.00 %		%		
the and at a consistency and a constant of the		X		X		70		Т
the private security or payment test?		^		 ^ 		+		
isposition of any of the bond-financed property to a no		x		x				
r than a 501(c)(3) organization since the bonds were iss	ed?	Ι Δ				1		
e percentage of bond-financed property sold or								
		%		%		%		
remedial action taken pursuant to Regulations								
45-2?								
plished written procedures to ensure that all								
issue are remediated in accordance with the								
ations sections 1.141-12 and 1.145-2?		X		X				
		A		В		Ç		<u> </u>
3038-T, Arbitrage Rebate, Yield Reduction and	Yes	No	Yes	No	Yes	No	Yes	No
e Rebate?		X		X				
llowing apply?								
		Х		X				
			Х					
		Х		Х				
		•		'		•		
a								
e rate issue?	x		x			 		
e Rebate?	X	х		х	Yes		Yes	

25-0969497

Part IV Arbitrage (continued)								
		4		В	(С	Γ	D
4a Has the organization or the governmental issuer entered into a qualified	Yes	No	Yes	No	Yes	No	Yes	No
hedge with respect to the bond issue?	X			X				
b Name of provider	PNC BANK							
c Term of hedge	20.0	000000						
d Was the hedge superintegrated?		X						
e Was the hedge terminated?		X						
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х		Х				
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		Х		Х				
7 Has the organization established written procedures to monitor the								
requirements of section 148?		X		X			ī	
Part V Procedures To Undertake Corrective Action	•			•		•		
		4	I	В	(С	Γ	D
Has the organization established written procedures to ensure that violations	Yes	No	Yes	No	Yes	No	Yes	No
of federal tax requirements are timely identified and corrected through the								
voluntary closing agreement program if self-remediation isn't available under							ı	
applicable regulations?	X		X				ı	
Part VI Supplemental Information. Provide additional information for responses to questions	s on Schedule	K. See instru	ictions.					
SCHEDULE K, PART I, BOND ISSUES:								
(A) ISSUER NAME:								
ALLEGHENY COUNTY INDUSTRIAL DEVELOPMENT AUTHORITY	, SERII	ES A,B						
(A) ISSUER NAME:								
ALLEGHENY COUNTY INDUSTRIAL DEVELOPMENT AUTHORITY	, SERII	ES B						
						,	,	,
SCHEDULE K, PART I, LINE A(F):								
REFINANCE MOON INDUSTRIAL DEVELOPMENT AUTHORITY E	BONDS.	\$11,43	6,918 V	VAS				
USED AS REFUNDING AND \$8,647,522 WAS USED FOR CAR	PITAL PI	ROJECTS	•			,	,	,
SCHEDULE K, PART I, LINE B(F):								
RENOVATION AND EXPANSION OF THE SAMPSON FAMILY YM	1CA					,	,	,
SCHEDULE K, PART I, LINE C(F):						,	,	,
TAXABLE NOTE CONVERTED TO A TAX-EXEMPT NOTE.						,	,	,
						,	,	,
		_		_				

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER PITTSBURGH

Employer identification number 25-0969497

Pai	t 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 de noncash contribu		•	3
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	4	111.895.	FAIR MARKET	VAI	UE	
10	Securities - Closely held stock		_					
11	Securities - Partnership, LLC, or							
••	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
.0								
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18								
19	Collectibles Food inventory							
20	Food inventory Drugs and medical supplies							
21								
22	Taxidermy							
	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ()							
26	Other ()							
27	Other ()							
28	Other ()	a del a carrollo color a						
29	Number of Forms 8283 received by the organiz						0	
	for which the organization completed Form 828	3, Part V, L	onee Acknowleag	ement 29		$\overline{}$		<u></u>
00-	During the control of			and a Company of the company	l- 00 dl1 h		Yes	No
30a	During the year, did the organization receive by							
	must hold for at least 3 years from the date of t					00		v
	exempt purposes for the entire holding period?					30a		<u> </u>
	If "Yes," describe the arrangement in Part II.	- Para Marakana		- f			v	
31	Does the organization have a gift acceptance p	•	•	•	ions?	31	X	
32a	Does the organization hire or use third parties of	r related or	ganizations to soli	cit, process, or sell noncash		_		37
	contributions?					32a		<u> </u>
	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in co	olumn (c) foi	a type of property	for which column (a) is chec	ked,			
	describe in Part II.							

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

Schedule M (Form 990) 2023

YOUNG MEN'S CHRISTIAN ASSOCIATION

25-0969497 Schedule M (Form 990) 2023 OF GREATER PITTSBURGH Page 2 **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 Part II this part for any additional information. SCHEDULE M, PART I, COLUMN (B): COLUMN (B) REPRESENTS THE TOTAL NUMBER OF CONTRIBUTORS FOR THE YEAR ENDED MARCH 31, 2024.

Schedule M (Form 990) 2023

SCHEDULE O (Form 990)

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 for the latest information.

Open to Public

OMB No. 1545-0047

Inspection

Name of the organization

YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER PITTSBURGH

Employer identification number 25-0969497

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION'S MISSION THE YMCA OF GREATER PITTSBURGH IS COMMITTED TO ENSURING THAT OUR PROGRAMS ARE OPEN TO EVERYONE REGARDLESS OF THEIR ABILITY TO PAY. SERVICES PROVIDED BY THE YMCA OF GREATER PITTSBURGH ADDRESS NEEDS AS DIVERSE AS THE COMMUNITIES WHERE WE ARE LOCATED. OUR PROGRAM DELIVERY IS FOCUSED ON CREATING HOPE FOR CHILDREN, ENGAGING FAMILIES ESTABLISHING BALANCED HEALTH FOR ALL AND HELPING STRENGTHEN COMMUNITIES THROUGH OUTREACH SUPPORT SERVICES. IN ADDITION TO PROGRAMS IN CHILD CARE, SUMMER CAMPS, AND HEALTH AND WELLNESS, THE YMCA ALSO DELIVERS AN ARRAY OF SOCIAL SERVICE PROGRAMS DESIGNED TO ADDRESS THE SPECIFIC NEEDS OF THE COMMUNITIES IN WHICH THE YMCA SERVES. THESE PROGRAMS INCLUDE SERVICES SUCH AS FOOD PANTRIES, FAMILY SUPPORT SERVICES, JOB AND COMPUTER TRAINING, TEEN ENRICHMENT PROGRAMS, DRUG AND ALCOHOL COUNSELING, SPECIAL NEEDS CAMPS, SERVICE LEARNING PROJECTS, SINGLE RESIDENT HOUSING, LITERACY INITIATIVES, AND SENIOR PROGRAMS. BY RESPONDING TO NEEDS AND COLLABORATING WITH LOCAL GROUPS, THE YMCA CONTINUES TO BE A PLACE TO WHICH INDIVIDUALS FEEL CONFIDENT TURNING FOR HELP.

FORM 990, PART III, LINE 4A

YOUTH DEVELOPMENT: THE Y BELIEVES THAT ALL CHILDREN AND TEENS HAVE POTENTIAL. THANKS TO THE YMCA, MORE YOUNG PEOPLE ARE TAKING A GREATER INTEREST IN LEARNING AND MAKING SMART LIFE CHOICES BY PARTICIPATING IN:

- BEFORE AND AFTER SCHOOL ENRICHMENT (BASE) PROGRAMS PROVIDE A SAFE A

PLACE TO LEARN FOUNDATION SKILLS, DEVELOP HEALTHY, TRUSTING

Schedule O (Form 990) 2023 YOUNG MEN'S CHRISTIAN ASSOCIATION Name of the organization **Employer identification number** 25-0969497 OF GREATER PITTSBURGH RELATIONSHIPS AND BUILD SELF-RELIANCE. DURING THE 2023/2024 SCHOOL YEAR, THE Y SERVED 4,668 YOUTH IN 24 SITES ACROSS ALLEGHENY COUNTY. - THE LIGHTHOUSE PROJECT, A YEAR-ROUND PROGRAM, LEVERAGES STUDENT INTEREST IN VISUAL ARTS, MEDIA AND MUSIC PRODUCTION. LIGHTHOUSE ENGAGED 171 YOUTH AND YOUNG ADULTS IN ART-MAKING EXPERIENCES THROUGH CLUB-BASED PROGRAMS, COURSES, APPRENTICESHIPS, STUDIO SESSIONS, PERFORMANCES AND EXHIBITIONS THROUGHOUT THE SCHOOL YEAR. - Y CREATOR SPACE SERVED 91 PARTICIPANTS DURING THE SCHOOL YEAR AND THEN PROVIDED STEAM ENRICHMENT TO 147 SUMMER CAMPERS IN OUR HOMEWOOD AND PENN HILLS DAY CAMPS. - EARLY CHILD CARE PROVIDES A NURTURING ENVIRONMENT THAT IS BOTH SAFE AND ENCOURAGING, CHALLENGING AND ENGAGING CHILDREN IN DEVELOPMENTALLY APPROPRIATE ACTIVITIES. DURING THE FISCAL YEAR, 118 INFANTS, TODDLERS AND PRESCHOOLERS RECEIVED QUALITY EARLY LEARNING PROGRAMMING AT THE YMCA'S THREE EARLY CHILD DEVELOPMENT CENTERS AND THE Y TOTS PROGRAMS.

- SUMMER DAY CAMP GIVE KIDS A MEANINGFUL EXPERIENCE AND A HEALTHIER ALTERNATIVE TO UNSUPERVISED DAYS AND SCREEN-BASED ENTERTAINMENT. THIS

YEAR THE Y HELD 14 SUMMER DAY CAMP SITES SERVING 1,800 CAMPERS.

- OVERNIGHT CAMP AT CAMP KON-O-KWEE SPENCER AND THE DEER VALLEY YMCA FAMILY CAMP ALLOW CHILDREN AND THEIR FAMILIES TO LEARN THE LESSONS OF TEAMWORK, INDEPENDENCE, GOAL SETTING, MAKING NEW FRIENDSHIPS AND EXPERIENCING NEW THINGS THAT ARE FORMATIVE MOMENTS IN THE LIVES OF EVERYONE. THE CAMPS HAD 4,269 RESIDENT/OVERNIGHT CAMPERS (I.E. YOUTH

<u>Schedule O (Form 990) 2023</u> Page **2**

Name of the organization YOUNG MEN'S CHRISTIAN ASSOCIATION Employer identification number OF GREATER PITTSBURGH 25-0969497

AND CONFERENCE RETREAT PARTICIPANTS).

- CAMP AIM PROVIDED 129 CHILDREN AND YOUNG ADULTS WITH PHYSICAL,

 COGNITIVE, EMOTIONAL, SOCIAL, AND COMMUNICATION CHALLENGES WITH

 OPPORTUNITIES TO ACHIEVE, SUPPORT TO BECOME INDEPENDENT, AND

 ENCOURAGEMENT TO BECOME MOTIVATED (AIM). THIS UNIQUE SIX-WEEK SUMMER

 PROGRAM COMBINES LIFE SKILLS, SOCIAL AND RECREATIONAL ACTIVITIES WITH

 AQUATICS, PHYSICAL EDUCATION, HOME ECONOMICS, MUSIC, AND ART.
- CAMP SPENCER SUPERSTARS IS AN OVERNIGHT CAMP FOR ADULTS WITH SPECIAL

 NEEDS AGES 18 AND OLDER. LOCATED AT YMCA CAMP KON-O-KWEE SPENCER, OUR

 CAMP GIVES PARTICIPANTS A FULL CAMP EXPERIENCE WHILE HELPING THEM LEARN

 ABOUT AND DEVELOP IMPORTANT VALUES, SOCIAL SKILLS, AND LIFE. CAMP

 SPENCER SUPERSTARS HAD 196 PARTICIPANTS.
- BOTH YMCA CAMPS, KON-O-KWEE SPENCER AND DEER VALLEY PROVIDE OUTDOOR

 EDUCATION PROGRAMMING. CAMP STAFF, SCHOOL ADMINISTRATORS AND TEACHERS

 WORK TOGETHER TO PROVIDE PROGRAMMING, ACTIVITIES AND EXPERIENCES FOR

 PARTICIPATING STUDENTS THROUGH OUTDOOR EDUCATION. 5,916 STUDENTS

 PARTICIPATED IN OUTDOOR CLASSROOMS LEARNING ABOUT THE ENVIRONMENT.
- YMCA SWIMMING AND SPORTS PROGRAMS ARE THE STARTING POINT FOR MANY

 YOUTH TO LEARN ABOUT BECOMING AND STAYING ACTIVE AS WELL AS DEVELOPING

 HEALTHY HABITS THEY WILL CARRY THROUGHOUT THEIR LIVES. THERE WERE 2,078

 Y SWIM TEAM PARTICIPANTS AND OVER 2,400 YOUTH PARTICIPATED IN OTHER Y

 YOUTH SPORTS PROGRAMS SUCH AS BASKETBALL TEAMS, PICKLEBALL, AND MORE.

Name of the organization YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER PITTSBURGH

Employer identification number 25-0969497

HEALTHY LIVING: THE YMCA PROVIDES RESOURCES FOR FAMILIES TO LIVE THEIR

SAFEST AND HEALTHIEST LIVES. THE Y ASSISTS FAMILIES IN BATTLING CHRONIC

DISEASES AND OBESITY, ELIMINATING RISK OF DROWNING AND CREATING A

HEALTHY LIFE STYLE. A SAMPLING OF THESE PROGRAMS INCLUDE:

- THE YMCA BRINGS SENIORS/ACTIVE ADULTS TOGETHER FOR CAMARADERIE,

 FELLOWSHIP, FITNESS AND FUN. Y SENIOR COORDINATORS PROVIDED FITNESS

 INSTRUCTION TO 6,566 SENIOR MEMBERS. MEMBERS ALSO ATTENDED SPECIAL

 SENIOR OPEN HOUSES RECEIVING HEALTH AND WELLNESS SCREENINGS, FINANCIAL

 ASSISTANCE AND INFORMATION SPECIFIC TO THEIR DEMOGRAPHIC.
- EXERCISE CAN LEAD TO A HEALTHY SPIRIT, MIND, AND BODY. THE Y OFFERS

 A VARIETY OF FITNESS CLASSES THAT COMBINE THE BENEFITS OF BUILDING

 STRENGTH, FLEXIBILITY AND MOBILITY WITH THE MOTIVATION AND POSITIVE

 ATMOSPHERE OF GROUP EXERCISE CLASSES.
- PARENT CHILD PROGRAMS (Y-ADVENTURE GUIDES, Y-PRINCESS, Y-GUIDES,
 Y-QUESTORS, Y-TRAILBLAZERS) FOCUS ON STRENGTHENING THE PARENT-CHILD
 RELATIONSHIP THROUGH ONE-ON-ONE ACTIVITIES. IT IS THROUGH THESE SHARED
 EXPERIENCES THAT PARENTS AND THEIR CHILDREN GROW CLOSER AND FORM
 MEMORIES THAT LAST A LIFETIME. 2,887 ADULTS PARTICIPATED IN THESE
 PROGRAMS WITH THEIR 3,309 CHILDREN AT OUR THREE LOCATIONS IN THE NORTH
 HILLS, SOUTH HILLS, AND EAST OF PITTSBURGH.
- THROUGH SWIM LESSONS, SAFETY AROUND WATER, AND LIFEGUARD

 CERTIFICATION PROGRAMS, THE Y HAS A PROFOUND IMPACT ON OUR COMMUNITY.

 AQUATICS PROGRAMS, CONDUCTED UNDER THE SUPERVISION OF CERTIFIED

 LIFEGUARDS AND TRAINED INSTRUCTORS, PROVIDED SWIM LESSONS TO 8,117

Schedule O (Form 990) 2023 YOUNG MEN'S CHRISTIAN ASSOCIATION Name of the organization **Employer identification number** 25-0969497 OF GREATER PITTSBURGH CHILDREN AND PROVIDED LIFEGUARD CERTIFICATIONS, IN CONJUNCTION WITH THE RED CROSS, TO 358 PARTICIPANTS.

FORM 990, PART III, LINE 4C

SOCIAL RESPONSIBILITY: THE YMCA IS COMMITTED TO ADDRESSING CRITICAL SOCIAL ISSUES AND HELPING ALL PEOPLE LEARN, GROW AND THRIVE.

COMMUNITIES ARE STRONGER WHEN EVERYONE HAS THE OPPORTUNITY TO SUCCEED.

THE Y ENSURES NO ONE IS LEFT BEHIND BY PROVIDING:

- EMPLOYMENT SERVICES: PROVIDES INDIVIDUALS WITH ASSISTANCE ON EMPLOYMENT SEARCHES, JOB READINESS SKILLS, RESUME BUILDING, AND APPLYING FOR EMPLOYMENT-RELATED BENEFITS. THE HOMEWOOD CAREER AND WORKFORCE DEVELOPMENT CENTER SERVED 1,334 JOB SEEKERS. THE CENTER ALSO HOSTS A CAREERLINK COUNSELOR WHO PROVIDES ONGOING CASE MANAGEMENT TO JOB SEEKERS.
- HOPE FOR ALL LEVERAGES RESOURCES, RELATIONSHIPS AND REFERRAL NETWORKS TO PROVIDE STRUGGLING FAMILIES, IN TARGETED NEIGHBORHOODS, WITH ACCESS TO BENEFITS. OVER 300 VULNERABLE FAMILIES RECEIVED DIRECT AND/OR REFERRAL SERVICE ACROSS MULTI-SERVICE SYSTEMS.
- THE YMCA PROVIDED FREE TAX RETURN PREPARATION FOR 764 HOUSEHOLDS RESULTING IN OVER \$1,199,000 IN REFUNDS.
- THE YMCA HAS PROVIDED SINGLE RESIDENT OCCUPANCY (SRO) HOUSING SINCE ITS INCEPTION OVER 169 YEARS AGO. UNDERSTANDING THAT NO ONE IS ABLE TO LEARN, GROW AND THRIVE UNTIL THEY HAVE THEIR BASIC NEEDS MET, THE Y PROVIDES SHELTER TO 45 MEN WITHIN A SUPPORTIVE COMMUNITY.

Schedule O (Form 990) 2023 Page **2**

Name of the organization YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER PITTSBURGH

Employer identification number 25-0969497

- EVERYONE IS WELCOME AT THE Y. WE PROVIDE MEMBERSHIP AND PROGRAM

SERVICES TO EVERYONE DESIRING TO PARTICIPATE REGARDLESS OF RACE,

RELIGION, GENDER, MARITAL STATUS, NATIONAL ORIGIN, DISABILITY OR

INCOME. THE YMCA OF GREATER PITTSBURGH PROVIDES FINANCIAL ASSISTANCE

FOR CHILDREN, TEENS, ADULTS AND FAMILIES WHO CANNOT AFFORD THE FULL

COST OF A Y MEMBERSHIP AND PROGRAMS. THE Y DISTRIBUTED \$261,479 IN

MEMBERSHIP AND PROGRAM SUBSIDIES TO 1,744 FAMILIES/INDIVIDUALS.

- FOOD INSECURITY IS A MUCH BIGGER PROBLEM IN OUR COMMUNITY THAN MANY

REALIZE. THE YMCA OPERATES TWO FOOD PANTRIES, SERVING INDIVIDUALS WITH

LOW TO MODERATE-INCOMES IN THE HOMEWOOD AND HAZELWOOD NEIGHBORHOODS.

THIS ENSURES THAT FAMILIES IN NEED RECEIVE HEALTHY AND NUTRITIOUS FOOD

AND HAVE THE OPPORTUNITY TO SOCIALIZE WITH OTHER PEOPLE IN THEIR

COMMUNITY. THROUGH OUR FOOD PANTRY PROGRAMS, MORE THAN 178,173 POUNDS

OF FOOD HAS BEEN DISTRIBUTED.

FORM 990, PART VI, SECTION A, LINE 1A:

THE EXECUTIVE COMMITTEE HAS POWERS TO ACT FOR THE BOARD OF DIRECTORS IN THE INTERIM BETWEEN BOARD MEETINGS.

FORM 990, PART VI, SECTION A, LINE 2:

FAMILY RELATIONSHIPS: BONNIE VAN KIRK AND THOMAS VAN KIRK.

FORM 990, PART VI, SECTION A, LINE 6:

THERE IS A GENERAL ASSEMBLY OF THE ASSOCIATION, WHICH IS COMPRISED OF NOT

LESS THAN 200 NOR MORE THAN 400 MEMBERS OF THE ASSOCIATION. THE EXACT

NUMBER OF SUCH MEMBERS IS DETERMINED BY THE BOARD OF DIRECTORS OF THE

Schedule O (Form 990) 2023 Page 2

Name of the organization YOUNG MEN'S CHRISTIAN ASSOCIATION Employer identification number OF GREATER PITTSBURGH 25-0969497

ASSOCIATION.

FORM 990, PART VI, SECTION A, LINE 7A:

THE BOARD OF DIRECTORS OF THE ASSOCIATION IS ELECTED BY THE GENERAL

ASSEMBLY BY MAJORITY VOTE OF THE MEMBERS PRESENT. IN ADDITION, THERE IS ONE

MEMBER ON THE BOARD OF DIRECTORS FROM EACH BRANCH. MEMBERS FROM EACH BRANCH

ARE APPOINTED BY THE BOARD OF MANAGEMENT OF EACH BRANCH FROM AMONG ITS

MEMBERSHIP. EACH APPOINTED MEMBER FROM EACH BRANCH SHALL HAVE A VOICE AND

VOTE WITH THE BOARD OF DIRECTORS.

THE GENERAL ASSEMBLY SHALL BE RESPONSIBLE FOR LEGISLATING ON GENERAL POLICIES OF THE ASSOCIATION, REVIEWING THE WORK AND AFFAIRS OF THE ASSOCIATION AND AMENDING THE CONSTITUTION OF THE ASSOCIATION.

FORM 990, PART VI, SECTION A, LINE 7B:

THE BOARD OF TRUSTEES (SEPARATE FROM THE BOARD OF DIRECTORS) HAVE CERTAIN

RESERVED POWERS RELATED TO PROPERTY AND INVESTMENT MATTERS. THE BOARD OF

TRUSTEES IS SELF PERPETUATING AND INCLUDES THE ASSOCIATION PRESIDENT AND

BOARD OF DIRECTORS CHAIR.

FORM 990, PART VI, SECTION B, LINE 11B:

A DRAFT OF THE FORM 990 AND SUPPORTING SCHEDULES IS REVIEWED BY MANAGEMENT WITH THE FINANCE COMMITTEE. SUBSEQUENT TO ANY CHANGES ASSOCIATED WITH THAT REVIEW, THE FINAL DRAFT OF THE FORM 990 AND SUPPORTING SCHEDULES IS POSTED TO AN INFORMATION BOARD PORTAL ACCESSIBLE BY THE FULL BOARD FOR THEIR APPROVAL PRIOR TO FILING.

Schedule O (Form 990) 2023 Page **2**

Name of the organization YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER PITTSBURGH

Employer identification number 25-0969497

ALL OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES ARE REQUIRED TO SUBMIT

EXECUTED CONFLICT OF INTEREST STATEMENTS ANNUALLY. IN SITUATIONS WHERE A

TRANSACTION IS CONTEMPLATED WITH ANY OF THESE PARTIES, THE AWARD OF THAT

TRANSACTION IS SUBJECT TO COMPETITIVE BIDDING APPROVED BY THE APPROPRIATE

BOARD COMMITTEE FOR CAPITAL PROJECTS OR FINANCING AND BY MANAGEMENT

REGARDING NORMAL OPERATING EXPENSES.

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

COMPARABILITY DATA REGARDING THE CEO'S AND OTHER SENIOR VICE PRESIDENTS'

COMPENSATION PACKAGES IS REVIEWED AND APPROVED BY AN INDEPENDENT

COMPENSATION COMMITTEE WHO MAKES RECOMMENDATIONS TO THE BOARD OF DIRECTORS

WHICH IS APPROVED AT AN EXECUTIVE SESSION OF THE BOARD OF DIRECTORS.

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

THE ASSOCIATION MAKES ALL OF ITS PUBLIC DOCUMENTS AVAILABLE UPON REQUEST.

ANYONE INTERESTED IN REVIEWING THESE DOCUMENTS NEEDS TO MAKE A WRITTEN

REQUEST TO THE ASSOCIATION'S CORPORATE OFFICES. COPIES OF THE REQUESTED

PUBLIC DOCUMENTS WILL BE MAILED.

FORM 990, PART VII, HONORARY BOARD

MR. LOUIS J. BRISKMAN IS A HONORARY BOARD MEMBER. HE DOES NOT HAVE VOTING RIGHTS.

FORM 990, PART XII, QUESTION 2, OVERSIGHT OF FINANCIAL STATEMENT AUDIT:

THE ORGANIZATION'S FINANCIAL STATEMENTS ARE AUDITED BY AN INDEPENDENT

ACCOUNTING FIRM. IN ADDITION, THE ORGANIZATION HAS A COMMITTEE THAT

ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT OF ITS FINANCIAL

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Attach to Form 990.

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

Open to Public Inspection

(f)

entity

OMB No. 1545-0047

YOUNG MEN'S CHRISTIAN ASSOCIATION Name of the organization **Employer identification number** OF GREATER PITTSBURGH 25-0969497 Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (a) (d) (b) (c) (e) Name, address, and EIN (if applicable) Primary activity Legal domicile (state or Total income End-of-year assets Direct controlling of disregarded entity foreign country)

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity		g) 512(b)(13) rolled tity?
				501(c)(3))		Yes	No

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

Page 2

OF GREATER PITTSBURGH

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile	Direct controlling	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total	Share of	1	ortionate	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General	Percentage ownership
of related organization		(state or foreign	entity	excluded from tax under	income	end-of-year assets	allocations?		20 of Schedule	partner	ownership
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes N	0
	l	l .					l				

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

(a) Name, address, and EIN of related organization	(b) Primary activity	Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	ent	tion b)(13) rolled tity?
DOYLE F/B/O CHARITIES								103	110
P.O. BOX 4899									
ATLANTA, GA 30302-9957	PHILANTHROPY	GA	N/A	TRUST			70.00%		Х
YOUNG M C ASSN DE PARK TRUST - 25-6088591									
1735 MARKET STREET									
PHILADELPHIA, PA 19103	PHILANTHROPY	PA	N/A	TRUST			100%		X

Yes No

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

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

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

b	Giπ, grant, or capital contribution to related organization(s)				מו		Δ_			
С	Gift, grant, or capital contribution from related organization(s)				1c		X			
	oans or loan guarantees to or for related organization(s)									
	Loans or loan guarantees by related organization(s)									
f	Dividends from related organization(s)				1f		X			
g	Sale of assets to related organization(s)				1g		Х			
h	Purchase of assets from related organization(s)									
i	Exchange of assets with related organization(s)									
j	j Lease of facilities, equipment, or other assets to related organization(s)									
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		<u>X</u>			
	Performance of services or membership or fundraising solicitations for related organization(s)									
m	m Performance of services or membership or fundraising solicitations by related organization(s)									
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s	s)			1n		<u>X</u>			
0	Sharing of paid employees with related organization(s)				10		<u>X</u>			
р	Reimbursement paid to related organization(s) for expenses				1p		<u>X</u>			
	Reimbursement paid by related organization(s) for expenses				1q		<u>X</u>			
r	Other transfer of cash or property to related organization(s)				1r		$\frac{x}{x}$			
s Other transfer of cash or property from related organization(s)										
2	If the answer to any of the above is "Yes," see the instructions for information on who n	must complete th	is line, including covered relation	onships and transaction thresholds.						
	(a) Name of related organization	(b)	(c)	(d)						
						ning amount involved				
		type (a-s)								
1)										
2)										
3)										
4)										
5)										
6)				•	D (E	005)	2000			
32163	3 09-28-23			Schedule	K (Form	990) 2	2023			

Schedule R (Form 990) 2023

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

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec 501(c)(3) orgs.?	(g) Share of end-of-year assets	Dispretion allocat	opor- ate tions?	General manage partner	(k) Percentage ownership
			,	100 110		100	110		
									000) 0000