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2019	

	E	™o empt Organi	TICE 201			∪ nco		Tax Ret	uri	n	OMB No	1545-0687
Form ,990-T		(and p	roxy tax	und	der secti	ion 6	033(	e))		<u> </u>		240
	For cale	ndar year 2018 or other t							_ , 20		20	18
Department of the Treasury Internal Revenue Service	► Go to www.irs.gov/Form990T for instructions and the latest information  Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3)							(3)	Open to Pub	lic Inspection for		
A Check box if	Name of organization (											
address changed	]	YOUNG MEN'S		AN A	SSOCIATI	ION C	F			(Employe	ees' trust, see i	nstructions )
B Exempt under section		GREATER ERIE										
X 501( C )O3 )	Print   or	Number, street, and roor	m or suite no I	faPO	box, see instr	uctions			_	25-09		
408(e) 220(e)	Туре								'		ed business ructions)	activity code
408A530(a)		31 WEST 10TH						_	_	•-	·	
529(a)	Į	City or town, state or pr		y, and Z	IP or foreign p	ostal cod	de					
C Book value of all assets at end of year ~	-	ERIE, PA 165		>								··
		up exemption number ck organization type	<del>`                                    </del>				501(c	\	1 1	401(a) tr	nunt 1	Other trust
H Enter the number of							501(0				or first) unr	Other trust
trade or business her		imzation's uniterated trac	162 01 0021116	3363		If on	lv one	complete Par				
		end of the previous s	entence cor	nolete	Parts I and I			-				edende are
trade or business, th		•				.,						
		corporation a subsidia	ry in an affili	ated gr	oup or a pare	ent-sub	sidiary o	controlled grou	Jp?.		. ▶	Yes No
-		identifying number of t										
J The books are in care			` `			Te	elephon	e number 🕨	814	-452-	1432	
Part I Unrelated	Trade (	or Business Incom	ne		(A) I	ncome		(B) Ex	•			C) Net
1a Gross receipts or	sales	<u> </u>	}						學等	12.0	3	Sin Aller of the State of the
<b>b</b> Less returns and allows	nces		c Balance 🕨	1c	_							3.40
2 Cost of goods so	d (Sched	ule A, line 7)		2							( P. 15 18 18 18 18 18 18 18 18 18 18 18 18 18	是特別的
		2 from line 1c		3				3 特殊學				
		ittach Schedule D)		4a			_	1. K. J				
•		Part II, line 17) (attach Fo		4b	r		·	といい 再発管				
		trusts		4c		R	ECE	IVED.	W.	\$04 B		
		r an S corporation (attach state		5	9	<del></del>			S	**************************************		
				7	20	11	JL 2	5 2019	8			
		come (Schedule E) ents from a controlled organizat		8	<del>M</del>	-	- H	0 2013	ळ			<del></del>
		1(c)(7), (9), or (17) organization		9					뜨			
		ncome (Schedule I)		10	ᆫ	$-\omega$	<u> GDE</u>	N, UT				
•	-	dule J)		11							<del></del>	
		ctions, attach schedule)		12				THE WAY	<i>214</i> '3.	T. P. K. A		
13 Total Combine li												
Part II Deduction			•						) (E	xcept fo	r contribi	utions,
deduction	<u>is must</u>	be directly conne	cted with t	<u>he ur</u>	related bu	usines	s inco	me)				
•		directors, and trustees										
		(see instructions)										
		See instructions for limi							• • •	· 20		
22 Less depreciation	acn Form	4562) on Schedule A and els	· · · · · · ·	· · ·		. 222				22b		
		· · · · · · · · · · · · · · · · · · ·									_	
		compensation plans										
		S										
		Schedule I)										
		chedule J)										
		schedule)								1		
29 Total deductions	Add line	s 14 through 28								. 29		
		ole income before ne										
		g loss arising in tax ye									那麼快	。這個是兩個
		e income Subtract line		30 .	<u> </u>	<u></u>		<u></u>		. 32		
For Paperwork Reduct 8X2740 1 000 1 1 0 7 HD G 7 7	ion Act I	Notice, see instructions	; 		0 5 0-			M TD 0500	_		Form	990-T (2018)
110/HD G77	עי 5/3	51/2019 9:33	:52 AM	v 1	8-5.2F		I	MJB-GR28	1			

## YOUNG MEN'S CHRISTIAN ASSOCIATION OF 25-0965621

	990-T (2018)		Page Z
Par		T	
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see		
	ınstructions)	33	
34	Amounts paid for disallowed fringes	34	21,365.
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see		
	ınstructions)	35	
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum		_
	of lines 33 and 34	36	21,365.
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	37	1,000.
38	Unrelated business taxable income Subtract line 37 from line 36 If line 37 is greater than line 36,		
30	enter the smaller of zero or line 36	38	20,365.
Don		30	20,0001
	t IV Tax Computation	T 00	4,277.
39	Organizations Taxable as Corporations Multiply line 38 by 21% (0 21)	39	4,211.
40	Trusts Taxable at Trust Rates See instructions for tax computation Income tax on		
	the amount on line 38 from Tax rate schedule or Schedule D (Form 1041)	40	
41	Proxy tax See instructions	41	
42	Alternative minimum tax (trusts only)	42	
43	Tax on Noncompliant Facility Income See instructions	43	
44	Total Add lines 41, 42, and 43 to line 39 or 40, whichever applies	44	4,277.
Par	t V Tax and Payments		
	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116) 45a		
	Other credits (see instructions)	1	
	General business credit Attach Form 3800 (see instructions)	1	
	Credit for prior year minimum tax (attach Form 8801 or 8827)	1	
a	Tell and the Additional Assistance in the second of the se	45e	
	Total credits. Add lines 45a through 45d		4,277.
46	Subtract line 45e from line 44		1/2//.
47	Other taxes Check if from Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule).		4,277.
48	Total tax Add lines 46 and 47 (see instructions)		4,211.
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2	49	
	Payments A 2017 overpayment credited to 2018	<u> </u>	
b	2018 estimated tax payments		
С	Tax deposited with Form 8868	.]	
	Foreign organizations Tax paid or withheld at source (see instructions)		
	Backup withholding (see instructions)	]	
f	Credit for small employer health insurance premiums (attach Form 8941) 50f	]	
	Other credits, adjustments, and payments Form 2439	7	
9	Form 4136 Other Total ▶ 50g		
51	Total payments. Add lines 50a through 50g	51	5,500.
		52	
52	Estimated tax penalty (see instructions) Check if Form 2220 is attached		
53	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	53	1,223.
54	Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	54	1,223.
55	Enter the amount of line 54 you want Credited to 2019 estimated tax ▶1,223. Refunded ▶		<del> </del>
Par	t VI Statements Regarding Certain Activities and Other Information (see instruction	•	T
56	At any time during the 2018 calendar year, did the organization have an interest in or a signature of		Yes No
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization m	ay have to file	
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the	foreign country	
	here		
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a fore	eian trust?	
	If "Yes," see instructions for other forms the organization may have to file		
58	Enter the amount of tax-exempt interest received or accrued during the tax year ▶ \$		
	Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the	best of my knowledge	and belief, it is
Sigi	true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge		
	// //6 + CV / / / / / / / / / / / / / / / / / /	ay the IRS discuss	
Her		ith the preparer s.	es No
		PTIN	to   NO
Paid	Print/Type preparer's name  Preparer's fine to the freparer's fine to the freparer's fine to the freparer's fine to the fire party for the fire pa	ck if   Door	117522
	VINCENT MALOTCHINGKI		47533
•	Firm's name PDRD, TDF	's EIN ► 44-016	0∠6U
	Firm's address ► 2402 W. 8TH STREET, ERIE, PA 16505	neno 814.454.	
ISA	· <del></del> -	Form 9	90-T (2018)

Farm **990-T** (2018)

Form 990-T (2018)						Page 3	
Schedule A - Cost of Go	ods Sold. E	nter metho	of inventory valuation	) <b>&gt;</b>			
1 Inventory at beginning of y	ear . 1		_ 6 Invento	ry at end of ye	ar	. 6	
2 Purchases	2		7 Cost	of goods so	old Subtract line		
3 Cost of labor			6 from	line 5 Er	nter here and in		
4a Additional section 263A co	osts		Part I, I	ne 2		.   7	
(attach schedule)	4a					with respect to Yes No	
<b>b</b> Other costs (attach schedu						or resale) apply	
5 Total Add lines 1 through							
Schedule C - Rent Income	(From Real F	roperty a	nd Personal Proper	ty Leased \	With Real Prope	erty)	
(see instructions)	•		_		-		
Description of property	· <del>-</del>						
(1)							
(2)							
(3)	· <u> </u>	_	<u> </u>				
(4)	<u> </u>			•			
	2. Rent rece	ved or accru	ed				
(a) From personal property (if the	percentage of rent	(b) F	rom real and personal prope	rty (if the	3(a) Deductions	directly connected with the income	
for personal property is more th	an 10% but not	percent	age of rent for personal prop	erty exceeds		2(a) and 2(b) (attach schedule)	
more than 50%)		50% 0	If the rent is based on profit	or income)			
(1)						<del></del>	
(2)							
(3)						,	
(4)		<del> </del>	-				
Total		Total					
(c) Total income Add totals of co	olumns 2(a) and 2	(b) Enter			(b) Total deduct Enter here and o		
here and on page 1, Part I, line 6					Part I, line 6, colu		
Schedule E - Unrelated De			e instructions)				
			2 Gross income from or	3		onnected with or allocable to	
1 Description of deb	t-financed property	,	allocable to debt-financed	(a) Straig	debt-finar ht line depreciation	(b) Other deductions	
			property		nt line depreciation ach schedule)	(attach schedule)	
(1)		· · · · · · · · · · · · · · · · · · ·					
(2)							
(3)	· · · · · · · · · · · · · · · · · · ·	_					
(4)							
4 Amount of average	5 Average adju	sted basis	0.00	1		0. 411	
acquisition debt on or allocable to debt-financed	of or alloca		6 Column 4 divided	7 Gross income reportable (column 6 x total of colum			
property (attach schedule)	debt-financed (attach sch		by column 5	(colum	n 2 x column 6)	3(a) and 3(b))	
(1)				%			
(2)		-		%			
(3)			·	%		· <del>-</del>	
(4)			· · · · · · · · · · · · · · · · · · ·	%			
<del></del>			<del>1</del>		re and on page 1,	Enter here and on page 1,	
					ne 7, column (A)	Part I, line 7, column (B)	
Totals							
Total dividends recoved deduct		olumo 0					

Page 4

organization included in the controlling organization's gross noome on a column 5 in the column 6 in the colum			Exen	npt Controlled	d Organizati	ons					
2)   3)   4)   5   5   6   6   6   7   7   6   7   6   7   7	j		(E)			•	cried included in the		olling	6 Deductions directly connected with incom in column 5	
3) 4) 4) 5) 6) 6) 6) 6) 7 Taxable income  (class) (see instructions)  (column 10  Add columns 5 and 10  Ender there and on page 1  Part I, line 8, column (2)  (class)  (class)	1)						_				
Interview   Total of personal page   Part   Interview   Total of specified payments made   Total of column 6 that is included in the contending connected with poone in column 10											
To a selection of the column of the column (A)  Selection of the column (A)  To a selection of income  The column (A)  Selection of income  The column (A)  Selection of income  The column (A)  To a selection of income  The column (A)  To a selection of income  The column (A)  To a selection of income  The column (A)											
7 Taxable Income (loss) (see instructions) payments made p								<del>.</del>			
7 Taxable Income (tuss) (see instructions)   Supplements make   Supple	Ionexempt Controlled Organiz	zations				<del></del>	<b>.</b>				
ortals  ortals  cichedule G – Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)  1 Description of income  2 Amount of income  2 Amount of income  2 Amount of income  3 Deductions  4 Set-asides (attach schedule)  5 Total deductions and set-asides (col 3)  5 Description of income  (attach schedule)  6 Tenter here and on page 1, Part 1, line 8, column (8)  5 Total deductions and set-asides (col 3)  5 Deductions  4 Set-asides (attach schedule)  5 Total deductions and set-asides (col 3)  5 Description of exploited Exempt Activity Income, Other Than Advertising Income (see instructions)  1 Description of exploited activity  2 Cross attributable to column 5 business income  3 Description of exploited activity  4 Anti-name (see instructions)  5 Cross income  5 Cross income  6 Readership  contact advertising income  1 Name of periodical activity  1 Name of periodical activity  2 Cross advertising ocitic advertising coits  2 Cross advertising ocitic advertising coits  3 Direct advertising ocitic advertising ocitic advertising coits  2 Cross income  3 Description of the production	7 Taxable Income	****			•	inc	uded in the co	ntrolling		nected with income in	
Add columns 5 and 10 Enter here and on page 1, Part 1, line 9, column (a)  Schedule G – Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)  1 Description of income  2 Amount of income  3 Deductions directly connected (altach schedule)  2) 3) 4)  Enter here and on page 1, Part 1, line 9, column (b)  Enter here and on page 1, Part 1, line 9, column (c)  1 Description of exploited activity Income, Other Than Advertising Income (see instructions)  1 Description of exploited activity Income, Other Than Advertising Income (see instructions)  1 Description of exploited activity Income, Other Than Advertising Income (see instructions)  1 Description of exploited activity Income, Other Than Advertising Income (see instructions)  2 Gross or advertising income (see instructions)  1 Description of exploited activity Income, Other Than Advertising Income (see instructions)  2 Gross or advertising income (see instructions)  3 Expenses or the school of the production of the page 1, part 1, line 10, col (h) Inie 10, col (h)		_ <del></del>						-	_		
Add columns 5 and 10 Enter here and on page 1, Part I, line 8, column (8)  In Description of income  2 Amount of income  2 Amount of income  2 Amount of income  3 Enter here and on page 1, Part I, line 8, column (A)  4 Set-saides  3 Total deductions and set-saides (col 3 plus col 4)  1)  Enter here and on page 1, Part I, line 9, column (A)  Enter here and on page 1, Part I, line 9, column (A)  Enter here and on page 1, Part I, line 9, column (A)  Enter here and on page 1, Part I, line 9, column (A)  Enter here and on page 1, Part I, line 9, column (A)  Enter here and on page 1, Part I, line 9, column (A)  Enter here and on page 1, Part I, line 9, column (A)  Enter here and on page 1, Part I, line 9, column (A)  Enter here and on page 1, Part I, line 9, column (B)  Enter here and on page 1, Par						ļ		_			
Add columns 5 and 11 Enter here and on page 1, Part I, line 8, column (8)    Chedule G-Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)   Description of income   2 Amount of income   3 Deductions of (attach schedule)   5 Total districtions and set-assides (col 3 plus col 4)   Otals											
otals    Chedule G-Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)   Description of income   2 Amount of income   3 Deductions of (attach schedule)   4 Set-asides (cot 3 plus cot 4)   10   10   10   10   10   10   10   1	1)					ļ	<del></del>			<del> </del>	
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2) 3) 4)  Enter here and on page 1, Part 1, line 10, col (A)  Part I Income From Periodicals Reported on a Consolidated Basis  2 Gross advertising income  2 Gross advertising costs  3 Direct advertising costs  1 Name of periodical  2 Gross advertising costs  3 Direct advertising costs  3 Direct advertising costs  3 Direct advertising costs  4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7  1)  1)  2)  3)	1 Description of exploited activity	unrelated business income from trade or	directl connected productio unrelate	y or bus	inrelated tradé siness (column us column 3) lain, compute	from is n	activity that ot unrelated	attributa	able to	(column 6 minus column 5, but not more than	
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Enter here and on page 1, Part I, line 10, col (A) line 10, col (B) line 1				<del>- -</del>		-	·			<del>                                     </del>	
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Enter here and on page 1, Part I, line 10, col (A) line 10, col (B) line 1		<del>   </del>				<u> </u>				<del>                                     </del>	
Part I Income From Periodicals Reported on a Consolidated Basis  1 Name of periodical  2 Gross advertising income  3 Direct advertising costs  4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7  1)  1)  2)  3)  4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7  4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7  4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7  4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7  5 Circulation income  6 Readership costs  7 Excess readership costs of minus column 5, b not more than column 4)	otals	page 1, Part I, line 10, col (A)	page 1, Page 10, co	art I,				# (1)		on page 1,	
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3)			-		C S						
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				N. I.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					The True Land	
		·					·				
										Form 990-T (201	

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis )

1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5 Circulation income	6 Readership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4)
1) 2)						
3)						
4) Cotals from Part I ▶			tamenta.		Y MAGAI	
otals, Part II (lines 1-5) ▶	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)				Enter here and on page 1, Part II, line 27

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1 Name	, 2 Title	3 Percent of time devoted to business	4 Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total Enter here and on page 1, Part II, line 14	· · · · · · · · · · · · · · · · · · ·	: ▶	

Form 990-T (2018)