# \*\* 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)

OMB No. 1545-0047

▶ Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information.

and ending

Open to Public Inspection

Department of the Treasury Internal Revenue Service

A For the 2018 calendar year, or tax year beginning

<b>3</b> C	heck if pplicab	C Name of organization   Young Americans Center for Financial		D Employer identifi	cation number			
	Addre							
	Name chang			84-1	564926			
	Initial return		Room/suite					
	Final return			303-	321-2265			
	termir ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	3,088,051.			
	Amen return	Deliver, CO 00200		H(a) Is this a group re				
	Applid tion pendi		•	for subordinates				
		same as C above		<b>H(b)</b> Are all subordinates in				
		tempt status: X 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1) or	r 527	· ·	list. (see instructions)			
		te: www.yacenter.org	1	H(c) Group exemptio				
		forganization: X Corporation Trust Association Other	<b>L</b> Year o	of formation: 2000 N	A State of legal domicile: CO			
Pa	rt I	Summary  Briefly describe the organization's mission or most significant activities: To de	100 100	financia1	litoragy of			
Se	1	young people through real-life experience	dorang	hands-on n	rograms			
Activities & Governance	_	Check this box if the organization discontinued its operations or dispose		<del>_</del>				
ver	2 3				16			
ဗ	3	Number of independent voting members of the governing body (Part VI, line 1a)			15			
S S	5	Total number of individuals employed in calendar year 2018 (Part V, line 1a)			46			
iţie	6	Total number of volunteers (estimate if necessary)			6392			
ţ	l .	Total unrelated business revenue from Part VIII, column (C), line 12			0.			
ď		Net unrelated business taxable income from Form 990-T, line 38			0.			
				Prior Year	Current Year			
a	8	Contributions and grants (Part VIII, line 1h)		1,331,639.	1,831,429.			
ň	9	Program service revenue (Part VIII, line 2g)		1,120,911.	1,108,705.			
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		1,218.	1,757.			
۳ ا	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		52,894.	65,647.			
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,506,662.	3,007,538.			
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	45,279.			
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.			
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) $\dots$		1,707,583.	1,804,366.			
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)  Total fundraising expenses (Part IX, column (D), line 25)  358,50		0.	0.			
ž								
۳ ا	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		745,946.	768,812.			
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		2,453,529.	2,618,457.			
_ &		Revenue less expenses. Subtract line 18 from line 12		53,133.	389,081.			
ıs or inces			Ве	ginning of Current Year	End of Year			
Sse Bala	l .	Total assets (Part X, line 16)		2,907,568. 164,370.	3,393,103.			
Net Assets Fund Balan	21	Total liabilities (Part X, line 26)		2,743,198.	3,132,279.			
	ırt II	Net assets or fund balances. Subtract line 21 from line 20		2,743,1300	3,132,2734			
		alties of perjury, I declare that I have examined this return, including accompanying schedules	and stateme	ents, and to the best of m	v knowledge and belief, it is			
		ct, and complete. Declaration of preparer (other than officer) is based on all information of which			, momentuge and some, it is			
Sigr	า	Signature of officer		Date				
Here		Richard Martinez Jr., President & CEO						
		Type or print name and title						
		Print/Type preparer's name Preparer's signature		oate Check	PTIN			
Paid		Maria Montoya Maria Montoya	0	6/26/19 self-employ	<sub>ed</sub> P01363907			
	arer	Firm's name Kundinger, Corder & Engle, P.C.		Firm's EIN				
Use	Only	Firm's address 475 Lincoln Street, Suite 200			2 524 5252			
		Denver, CO 80203		Phone no.30	3-534-5953			
May	the I	RS discuss this return with the preparer shown above? (see instructions)			X Ves No			

Form **990** (2018)

# Form 990 (2018) Part III Statement of Program Service Accomplishments X Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission: Young Americans Center for Financial Education is committed to developing the financial literacy of young people through real-life experiences and hands-on programs purposefully designed to enable them to prosper in our free enterprise system. Did the organization undertake any significant program services during the year which were not listed on the Yes X No prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O. If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. 1,097,731. including grants of \$ 563,726.) ) (Expenses \$ ) (Revenue \$ Young AmeriTowne is a hands-on program that introduces 5th graders from elementary schools throughout Colorado to our free enterprise system. The thirty-seven lesson curriculum taught in the school by the teacher culminates when the students run a life-like town of 17 businesses for a day, bringing their learning to life and experiencing free enterprise first-hand. Participation: 32,651 during 2018. 391,046. including grants of \$ 45,279.) (Revenue \$ 29,270.) ) (Expenses \$ (Code: Young Americans Center for Financial Education also offers a variety of entrepreneurship training programs through our YouthBiz division. Serving Denver-area youth ages 11 to 18 with targeted focus on those from low-income, underserved schools and neighborhoods, youth learn the foundations of business and entrepreneurship enabling them to identify opportunities and to develop products and services that create value. YouthBiz offers two programs, StartUp and Out-of-the-Box. StartUp is an entry level program designed to teach youth the basics of entrepreneurship including need identification, prototype development and business pitch. YouthBiz Out-of-the-Box takes students further into the production and sales cycles with real retail opportunities, such as our YouthBiz Marketplace. In 2018, YouthBiz served 1,465 students. 278,551. including grants of \$ 214,838. ) (Revenue \$ International Towne is a one-of-a-kind program that introduces middle school students to the financial realities of the global marketplace. After weeks of classroom lessons and activities, the students-turned-world-citizens come to International Towne to run the sixteen-country world for a day, experiencing the economic concepts of global trading, currency exchange, importing and exporting, and cultural values. Participation: 11,497 students during 2018. Other program services (Describe in Schedule O.) 218 , 023 . including grants of \$316,518.) ) (Revenue \$ 1,985,351. Total program service expenses ▶

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# Form 990 (2018) Education Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		х	
_	If "Yes," complete Schedule A	2	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Λ	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		x
4	public office? If "Yes," complete Schedule C, Part I  Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	3		
-	during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
J	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			7.7
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		X
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Α.
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			X
•	Schedule D, Part III  Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	8		Α.
9	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	9		
10	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
• •	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			3,7
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	40		X
	Schedule D, Parts XI and XII	12a		Λ
D	Was the organization included in consolidated, independent audited financial statements for the tax year?  If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			<u> </u>
_	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			,,
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	0.4	Х	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	22	

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Form 990 (2018) Education

Part IV | Checklist of Required Schedules (continued)

			l	T
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
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		•	
04-	Schedule J  Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23	Х	
<b>24</b> a	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
<b>2</b> 5a	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		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	200		
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			x
27	complete Schedule L, Part II  Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	26		
27	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			37
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	32		X
33	Schedule N, Part II  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		<del></del>
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	Х	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	Х	77
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	000		
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		. v	
Pai	Note. All Form 990 filers are required to complete Schedule 0 It V Statements Regarding Other IRS Filings and Tax Compliance	38	Х	
. u	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b				
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		v	
	(gambling) winnings to prize winners?	1c	X	$oxed{L}$

Form 990 (2018) Education

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

				Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return	2a 46			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	าร?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				
3a			3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule C		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	-			3,7
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccount)?	4a		X
b	If "Yes," enter the name of the foreign country:	(EDAD)			
<b>5</b> 0	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ad		En		Х
5a	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.		5a 5b		X
b	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
c 6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the		30		
va	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.		ou		
-	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 serv	vices 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				
	to file Form 8282?		7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co	ontract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	act?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo	rm 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7h		
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained	-			
	sponsoring organization have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.				
a			9a		
b 10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12	100			
a b	<b>-</b>	10a 10b			
11	Section 501(c)(12) organizations. Enter:	100			
··	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against				
		11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a		
		12b			
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?		13a		
	<b>Note.</b> 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				
		13b			
	Enter the amount of reserves on hand	13c			77
			14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner		ا ــ ا		v
	excess parachute payment(s) during the year?		15		X
16	If "Yes," see instructions and file Form 4720, Schedule N.	t income?	46		Х
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	income?	16		$\stackrel{\wedge}{\vdash}$
	If "Yes," complete Form 4720, Schedule O.				

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

	Check if Schedule O contains a response or note to any line in this Part VI						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	1a	,	16					
	If there are material differences in voting rights among members of the governing body, or if the governing								
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.								
b	Enter the number of voting members included in line 1a, above, who are independent	1b	,	15					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	o with a	ny other						
	officer, director, trustee, or key employee?			L	2		Х		
3	Did the organization delegate control over management duties customarily performed by or under th								
	of officers, directors, or trustees, or key employees to a management company or other person?				3		Х		
4	Did the organization make any significant changes to its governing documents since the prior Form 9	90 was	filed?	[	4		Х		
5	Did the organization become aware during the year of a significant diversion of the organization's ass	sets?		[	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 approximately appr	point c	ne or						
	more members of the governing body?								
b	<b>b</b> Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or								
	persons other than the governing body?								
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year								
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 rea	ched at	the						
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O				9		Х		
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenue	Code.)						
				_		Yes	No		
10a	Did the organization have local chapters, branches, or affiliates?			[1	10a	Х			
b	If "Yes," did the organization have written policies and procedures governing the activities of such ch	napters	affiliates,						
	and branches to ensure their operations are consistent with the organization's exempt purposes? $\dots$			1	10b	X			
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing bod	y before	e filing the form	? 1	11a	Х			
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.								
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			[1	12a	Х			
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to confli	cts?	1	12b	Х			
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	es," des	scribe						
	in Schedule O how this was done			[1	12c	<u> </u>			
13	Did the organization have a written whistleblower policy?				13	X			
14	Did the organization have a written document retention and destruction policy?			L	14	Х			
15	Did the process for determining compensation of the following persons include a review and approva	al by inc	lependent						
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
а	The organization's CEO, Executive Director, or top management official			[1	15a	X			
b	Other officers or key employees of the organization			1	15b	_X			
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).								
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger	nent wi	th a						
	taxable entity during the year?			[1	16a		X		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	te its pa	ırticipation						
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	nization	's						
	exempt status with respect to such arrangements?			1	16b				
Sec	tion C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed None								
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, are	id 990-1	(Section 501(c	e)(3)s	only)	availa	able		
	for public inspection. Indicate how you made these available. Check all that apply.								
	Own website Another's website X Upon request Other (explain		,						
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, co	nflict of	interest policy,	and f	inan	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 bo	oks and	records						
	Rebecca Slattery - 303-320-3217								
	3550 East First Avenue, Denver, CO 80206								

84-1564926

Page 7

# Form 990 (2018) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B)	l	111126	(0		прсі	isat	(D)	(E)	(F)
Name and Title	Average	(do		Posi	ition	than	one	Reportable	Reportable	Estimated
	hours per	box,	, unle	ss pe	rson i	is bot or/trus	h an	compensation	compensation	amount of
	week	$\vdash$	JCI AII	uau	ii ecto	ii/ ii us	100)	from	from related	other
	(list any hours for	Individual trustee or director						the organization	organizations (W-2/1099-MISC)	compensation from the
	related	ee or (	stee			Highest compensated employee		(W-2/1099-MISC)	(** 27 1033 141100)	organization
	organizations	trust	ıal tru		yee	ompe		,		and related
	below	vidual	Institutional trustee	ser	Key employee	nest co	Former			organizations
	line)	Indi	Inst	Officer	Key	High	Por			
(1) Richard Martinez Jr.	13.50							00 005	161 500	10 000
President & CEO	26.50	Х		Х				82,205.	161,728.	18,883.
(2) Richard Jennings	2.00	7,7							0	0
Director	2 00	Х						0.	0.	0.
(3) Tamara Doi Beck	2.00	77							0	0
Director	2 00	Х						0.	0.	0.
(4) David Wolf	2.00	х						0.	0	0
Director (5) Non-re-Winter	2.00	Δ						0.	0.	0.
(5) Nancy Wigton	2.00	х						0.	0.	0.
Director (6) Charlie Maguire	2.00	Λ						0.	0.	<u> </u>
	2.00	х						0.	0.	0.
Director (7) Dave Burlage	2.00	Δ						0.	0.	<u> </u>
(/) Dave Burlage Chair	2.00	х		х				0.	0.	0.
(8) Michael Gersack	2.00	22		22				0.	0.	
Director	2.00	х						0.	0.	0.
(9) Bo Peretto	2.00							•		
Director		х						0.	0.	0.
(10) Christopher Picardi	2.00									
Director		х						0.	0.	0.
(11) Alexis Owen	2.00									
Director		Х						0.	0.	0.
(12) Stephanie Bendrick	2.00									
Director		Х						0.	0.	0.
(13) Erin Passan	2.00									
Director		Х						0.	0.	0.
(14) Susie Roh	2.00									_
Director		Х						0.	0.	0.
(15) Heather White	2.00									
Director		Х						0.	0.	0.
(16) Steve Hills	2.00							_	_	_
Director		Х					<u> </u>	0.	0.	0.
(17) Rebecca Slattery	13.20							25 553	E 6 00 6	44 454
VP Finance, Treasurer	26.80			X				37,578.	76,296.	14,171.

Form 990 (2018)

Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, an	d Hi	ighe	st C	Compensated Employe	es (continued)				
(A)	(B)			•	C)			(D)	(E)			(F)	
Name and title	Average	Position (do not check more than one						Reportable	Reportable		Es	timate	ed
	hours per	box	, unle	ss pe	erson	is bot or/trus	h an	compensation	compensati			nount	
	week (list any	$\vdash$	l a		1	1	1	from	from relate			other	
	hours for	lirect				L		the organization	organizatior (W-2/1099-MI			pensa om th	
	related	9e or 0	stee			satec		(W-2/1099-MISC)	(***2/1033-1011	30)		anizat	
	organizations	Individual trustee or director	Institutional trustee		yee	ımpeı		(** = *********************************			_	d relat	
	below	idual	tution	-e	Key employee	est co loyee	Jer				orga	nizati	ons
	line)	Indi	Insti	Officer	Key e	Highest compensated employee	Ъm						
(18) Sue Euser	22.80												
Secretary	17.20			Х	<u> </u>			54,126.	43,3	98.	1	<u>4,8</u>	68.
(19) Jane Sklar	36.00					l		440 -00					
VP Business Partnerships	4.00					X		118,532.	13,1	70.		7,8	44.
		1											
					<u> </u>								
					<u> </u>								
		-											
					<u> </u>	-							
		-											
					<u> </u>	-							
		1											
		-											
	<b> </b>				$\vdash$	$\vdash$				$\longrightarrow$			
		1											
1b Sub-total					<u> </u>			292,441.	294,5	92.	5	5.7	66.
c Total from continuation sheets to Part VI								0.		0.		<del>- , ,</del>	0.
d Total (add lines 1b and 1c)								292,441.	294,5	92.	5	5.7	66.
Total number of individuals (including but n								<u> </u>				- , -	-
compensation from the organization						<b>-</b> ,			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				1
												Yes	No
3 Did the organization list any <b>former</b> officer,	director, or tru	uste	e, ke	ey er	mplo	oyee	, or	highest compensated e	mployee on				
line 1a? If "Yes," complete Schedule J for s	uch individual								. ,		3		Х
4 For any individual listed on line 1a, is the su	ım of reportab									1			
and related organizations greater than \$15	0,000? <i>If</i> "Yes,	" co	mple	ete S	Sch	edule	e J f	for such individual			4	X	
5 Did any person listed on line 1a receive or a	accrue compe	nsat	ion f	from	any	/ unr	elat	ed organization or indiv	idual for services	s			
rendered to the organization? If "Yes," com	plete Schedul	e J t	or s	uch	pers	son .					5		X
Section B. Independent Contractors													
1 Complete this table for your five highest co	mpensated in	dep	ende	ent c	ont	racto	ors t	that received more than	\$100,000 of cor	npens	ation f	rom	
the organization. Report compensation for	the calendar y	ear	endi	ng v	vith	or w	ithir	n the organization's tax	year.				
(A)			~~~	_				(B)			(C		_
Name and business	address	N	INC	<u> </u>			_	Description of s	ervices	$\vdash$	omper	isatio	n
							-						
							$\dashv$			├──			
							1						
2 Total number of independent contractors (i	ncluding but n	ot li	mite	d to	tho	se li	stec	d above) who received m	nore than				
\$100,000 of compensation from the organi	zation 🕨				(	0							

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) (**D)** Revenue excluded Related or Unrelated Total revenue from tax under exempt function husiness revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns **b** Membership dues ..... 248,017. c Fundraising events d Related organizations 1d e Government grants (contributions) f All other contributions, gifts, grants, and ,583,412. similar amounts not included above ..... 17,019. g Noncash contributions included in lines 1a-1f: \$ 1,831,429. h Total. Add lines 1a-1f Business Code 900099 1,085,999.1,085,999. 2a Program fees Program Service Revenue b Program consulting fee 900099 20,000. 20,000. c YouthBiz entrepreneuri 900099 2,706. 2,706. f All other program service revenue 1,108,705. g Total. Add lines 2a-2f ..... Investment income (including dividends, interest, and 1,757. 1,757. other similar amounts) Income from investment of tax-exempt bond proceeds 50,000. 50,000. Royalties ..... (i) Real (ii) Personal 30,467. 6 a Gross rents 18,677. **b** Less: rental expenses ...... 11,790. c Rental income or (loss) 11,790. 11,790. **d** Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (ii) Other assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Revenue including \$ 248,017. of contributions reported on line 1c). See 61,836 Part IV, line 18 a Other 61,836. **b** Less: direct expenses 0. c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 a **b** Less: direct expenses c Net income or (loss) from gaming activities ... 10 a Gross sales of inventory, less returns and allowances \_\_\_\_\_a **b** Less: cost of goods sold **c** Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a Other 900099 3,857. 3,857 b d All other revenue 3,857. e Total. Add lines 11a-11d 3,007,538.1,124,352. Total revenue. See instructions

# 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 respon				
Do	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations		'		,
	and domestic governments. See Part IV, line 21	45,279.	45,279.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	199,480.	38,954.	147,843.	12,683.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,218,196.	945,092.	45,231.	227,873.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	26,588.	18,658.	3,373.	4,557.
9	Other employee benefits	217,983.	163,331.	14,635.	4,557.
10	Payroll taxes	142,119.	100,171.	17,833.	24,115.
11	Fees for services (non-employees):	-	-	-	-
а	Management				
b	Legal				
	Accounting				
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
q	Other. (If line 11g amount exceeds 10% of line 25,				_
3	column (A) amount, list line 11g expenses on Sch O.)	168,912.	134,129.	34,783.	
12	Advertising and promotion	32,235.	18,729.	-	13,506.
13	Office expenses	330,494.	322,887.	2,854.	4,753.
14	Information technology	-	-	-	
15	Royalties				
16	Occupancy	44,083.	42,406.	1,677.	
17	Travel	61,400.	57,399.	398.	3,603.
18	Payments of travel or entertainment expenses	-	-		-
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	1,143.	1,143.		
21	Payments to affiliates	,			
22	Depreciation, depletion, and amortization	75,928.	74,374.	1,554.	
23	Insurance	12,862.	12,862.	-	
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses in line 24e. If line				
	24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	Other operating expense	24,811.	9,937.	4,417.	10,457.
b	Fundraising expense	16,944.			16,944.
c		-			<u> </u>
d					
	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	2,618,457.	1,985,351.	274,598.	358,508.
26	<b>Joint costs.</b> Complete this line only if the organization	-	-	-	<u> </u>
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
	<u> </u>				C 000 (0040)

Form 990 (2018)
Part X Balance Sheet

Par	rt X	Balance Sheet					
		Check if Schedule O contains a response or note	to an	y line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			1,560,182.	1	1,908,258.
	2	Savings and temporary cash investments			1,046,402.	2	1,064,214.
	3	Pledges and grants receivable, net			28,110.	3	232,367.
	4	Accounts receivable, net			28,497.	4	53,462.
	5	Loans and other receivables from current and for					
		trustees, key employees, and highest compensation	ted en	nployees. Complete			
		Part II of Schedule L				5	
	6	Loans and other receivables from other disqualifi					
		section 4958(f)(1)), persons described in section					
		employers and sponsoring organizations of section	on 501	I(c)(9) voluntary			
ts		employees' beneficiary organizations (see instr).	Compl	lete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net			7		
Ä	8	Inventories for sale or use			14,763.	8	9,091.
	9				26,790.	9	12,421.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	575,373.			
	b		10b	487,459.	170,541.	10c	87,914.
	11	Investments - publicly traded securities			11		
	12	Investments - other securities. See Part IV, line 1			12		
	13	Investments - program-related. See Part IV, line 1			13		
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11	32,283.	15	25,376.		
	16	Total assets. Add lines 1 through 15 (must equa	2,907,568.	16	3,393,103.		
	17	Accounts payable and accrued expenses			31,822.	17	51,105.
	18	Grants payable		18			
	19	Deferred revenue			77,690.	19	160,052.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete P	art IV	of Schedule D		21	
es	22	Loans and other payables to current and former	officer	s, directors, trustees,			
Œ		key employees, highest compensated employees					
Liabilities		Complete Part II of Schedule L				22	
_	23	Secured mortgages and notes payable to unrelate		<b>—</b>		23	
	24	Unsecured notes and loans payable to unrelated	third	parties		24	
	25	Other liabilities (including federal income tax, pay					
		parties, and other liabilities not included on lines	17-24)	. Complete Part X of	E4 0E0		40.667
		Schedule D			54,858.	25	49,667.
	26	Total liabilities. Add lines 17 through 25			164,370.	26	260,824.
		Organizations that follow SFAS 117 (ASC 958)		k here 🕨 🔼 and			
Ses		complete lines 27 through 29, and lines 33 and			0 041 010		2 205 460
anc	27	Unrestricted net assets			2,041,912.	27	2,205,469.
Fund Balances	28	Temporarily restricted net assets			701,286.	28	926,810.
nd	29					29	
		Organizations that do not follow SFAS 117 (AS	SC 958	B), check here ▶ ☐			
s or		and complete lines 30 through 34.					
set	30	Capital stock or trust principal, or current funds				30	
As	31	Paid-in or capital surplus, or land, building, or equ				31	
Net Assets or	32	Retained earnings, endowment, accumulated inc			2 7/2 100	32	2 122 270
_	33	Total net assets or fund balances			2,743,198.	33	3,132,279.
	34	Total liabilities and net assets/fund balances			2,907,568.	34	3,393,103.

# Young Americans Center for Financial

84-1564926 Page **12** Education Form 990 (2018)

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1 2	Total revenue (must equal Part VIII, column (A), line 12) Total expenses (must equal Part IX, column (A), line 25)	1 2	3,00		
3	Revenue less expenses. Subtract line 2 from line 1	3		9,0	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,74	3,1	98.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	3,13	2,2	79.
Pa	rt XII Financial Statements and Reporting	•			
	Check if Schedule O contains a response or note to any line in this Part XII				X
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			Yes	No
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both:  Separate basis  Consolidated basis  Both consolidated and separate basis	d on a			
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e 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	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	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 Si	ngle Audit			l
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2018)

## **SCHEDULE A**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Total

Name of the organization

# **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.

Young Americans Center for Financial

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Education 84-1564926 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 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.) 8 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 university: 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.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. 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. 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 III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f 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 ì your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

Schedule A (Form 990 or 990-EZ) 2018 Education 84-1564926 Page 2

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

Pa	(Complete only if you checke						
	fails to qualify under the tests	s listed below, plea	se complete Part	III.)			
Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	1021572.	1898280.	1623282.	1331639.	1831429.	7706202.
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	1021572.	1898280.	1623282.	1331639.	1831429.	7706202.
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)						756,708.
6	Public support. Subtract line 5 from line 4.						6949494.
Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4	1021572.	1898280.	1623282.	1331639.	1831429.	7706202.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	1,299.	1,102.	51,241.	51,218.	82,224.	187,084.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on	310.	28.	2,943.	2,894.		6,175.
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	<b>Total support.</b> Add lines 7 through 10						7899461.
12	Gross receipts from related activities,	, etc. (see instruction	ons)			12 5	,103,132.
13	First five years. If the Form 990 is for	r the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
_	organization, check this box and stor		<u></u>				<u></u> ▶□
	ction C. Computation of Publ						
	Public support percentage for 2018 (					14	87.97 %
15	Public support percentage from 2017	7 Schedule A, Part	II, line 14			15	88.52 %
16a	33 1/3% support test - 2018. If the	-					
	stop here. The organization qualifies						
b	33 1/3% support test - 2017. If the						
	and stop here. The organization qual						
17a	10% -facts-and-circumstances tes	t - 2018. If the org	anization did not o	check a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac			=	=	~	
	meets the "facts-and-circumstances"	test. The organiza	tion qualifies as a	publicly supported	d organization		▶□
b	10% -facts-and-circumstances tes	-					
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	organization meets the "facts-and-circ	cumstances" test.	The organization of	qualifies as a publi	cly supported orga	anization	▶Ш

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ......

Schedule A (Form 990 or 990-EZ) 2018

# 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.)

Galledar year (or fiscal year segnining in)    Galledar year (or fiscal	Section	n A. Public Support	now, please com	piete Part II.)				
1 Giffs, grants, contributions, and membership feet received. (Do not include any "unusual grants.") 2 Gross eneights from admissions, merchandles acid or services per formed, or facilities turnished in any activity that is related to the organization's trave-empt purpose 3. Gross neceipts from activities that are not an unrelated trade or business under section 513. 4 Tax revenues levide for the organization'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. 7 a Amounts included on lines 1, 2, and 3 received from disqualified persons. 5 A mounts included on lines 1, 2, and 3 received from disqualified persons. 6 Total. Add lines 1 through 5. 7 a Amounts included on lines 1, 2, and 3 received from disqualified persons. 8 D invest ten ideal of the travel of the services of			(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
membership fees received. (Do not include any trustal grants?)  2. Gross receipts from admissions, memchandiss old or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 3. Gross receipts from admissions performed, or facilities furnished to the organization's tax-exempt purpose 3. Gross receipts from admissions that are not an unrelated trade or business under section 513.  4. Tax revenues levied for the organization or services or solidites furnished by a governmental unit to the organization without charge  5. The value of services or solidites furnished by a governmental unit to the organization without charge  6. Total. Add lines 1 through 5		· ` ` · · · · · · · · · · · · · · · · ·	\-,··	(-, 25.5	(-, 25.5	(=, ==::	(=,	(-)
include any *unusual grants*)  Gross receipts from admissions, merchandies sold or services per formed, or facilities furnished in any activity that is related to the organization's trave-empt purpose  3. Gross receipts from activities that are not an unrelated trade or business under section 513  4. Tax revenues levied for the organization's trave-empt purpose  5. The value of services or facilities furnished by a governmental unit to the organization's benefit and offither paid to or expended on its behalf  5. The value of services or facilities furnished by a governmental unit to the organization's whorld charge  6. Total. Add lines 1 through 5.  7. A mounts included on lines 1, 2, and 3 received from disqualified persons by a furnished by a governmental unit to the organization without charge.  6. Total. Add lines 1 through 5.  7. A mounts included on lines 1, 2, and 3 received from disqualified persons by a furnished by a governmental control of the services of services or facilities with the services of services or facilities with the services of services or facilities for the services of services or facilities for the services or facilities for services for services or facilities for services for services or facilities for services for servic		, ,						
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# Part IV | Supporting Organizations

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

# Section A. All Supporting Organizations

- 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.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) 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 12a or 12b in Part I, answer (b) and (c) 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 (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **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 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 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 in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 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 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		
_		
За		
3b		
3с		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
an		
9с		
10a		
10h		
10b 90 or 99	V E 7	2018

00110	Addit 77 (1 01111 000 01 000 LL) L0 10		<u> </u>	<u> 190 <b>0</b></u>
Pa	rt IV Supporting Organizations <sub>(continued)</sub>			
			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 in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
<u>c</u>	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
_	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	_		
	supervised, or controlled the supporting organization.	2		
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	_		
800	the supported organization(s). tion D. All Type III Supporting Organizations	1	ш	
360	tion b. 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		162	NO
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
_	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions	).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see ins	tructions	s)	
2	Activities Test. Answer (a) and (b) below.		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 in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b	$oxed{oxed}$	
3	Parent of Supported Organizations. Answer (a) and (b) 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? Provide details in Part VI.	3a	Ш	
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes " describe in Part VI the role played by the organization in this regard	3h	1 /	i

# Young Americans Center for Financial

Schedule A (Form 990 or 990-EZ) 2018 Education

84-1564926 Page 6

Pa	Type III Non-Functionally Integrated 509(a)(3) Supportin	g Org	anizations	3
1	Check here if the organization satisfied the Integral Part Test as a qualifyin	g trust c	on Nov. 20, 1970 (explain in	Part VI.) See instructions. A
	other Type III non-functionally integrated supporting organizations must co	mplete	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		
Sect	ion 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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	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 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	ly integr	ated Type III supporting org	anization (see
	instructions).			

Schedule A (Form 990 or 990-EZ) 2018

Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations (continued)	
Secti	ion D - Distributions		,	Current Year
1	Amounts paid to supported organizations to accomplish exe			
2	Amounts paid to perform activity that directly furthers exem			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpos	es of supported organization	ns	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in <b>Part VI</b> ). See instructions.			
7	<b>Total annual distributions.</b> Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which t	he organization is responsive	е	
	(provide details in <b>Part VI</b> ). See instructions.			
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount	T	Т	
Secti	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reason-			
	able cause required- explain in <b>Part VI</b> ). See instructions.			
3	Excess distributions carryover, if any, to 2018			
а	From 2013			
b	From 2014			
С	From 2015			
	From 2016			
	From 2017			
f	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2018 distributable amount			
<u>i</u>	Carryover from 2013 not applied (see instructions)			
<u>j</u>	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from Section D,			
	line 7: \$			
	Applied to underdistributions of prior years			
	Applied to 2018 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
6	than zero, explain in <b>Part VI.</b> See instructions.			
6	Remaining underdistributions for 2018. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
7	Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j and 4c.			
8	Breakdown of line 7:			
	Excess from 2014			
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			
	Excess from 2018			

Schedule A (Form 990 or 990-EZ) 2018

# Young Americans Center for Financial

Schedule A (Form 990 or 990-EZ) 2018 Education 84-1564926 Page 8 Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service **Schedule of Contributors** 

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No. 1545-0047

2018

Name of the organization

Young Americans Center for Financial Education

Employer identification number

84-1564926

Organization type (check one):							
Filers of	:	Section:					
Form 99	0 or 990-EZ	X 501(c)( 3 ) (enter number) organization					
		4947(a)(1) nonexempt charitable trust <b>not</b> 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					
	-	s covered by the <b>General Rule</b> or a <b>Special Rule</b> . 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 any one contributo	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 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from r, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; line 1. Complete Parts I and II.					
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.						
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \ \rightarrow \sqrt{\						
		at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to					

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

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization
Young Americans Center for Financial
Education

Employer identification number

84-1564926

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.					
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution				
1		Person X Payroll Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution				
2		Person X Payroll  Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution				
3		Person X Payroll Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution				
4	Nume, dudi ess, und Zir + 4	Person X Payroll Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution				
5		Person X Payroll Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution				
6		Person X Payroll Noncash (Complete Part II for noncash contributions.)				

Name of organization
Young Americans Center for Financial
Education

Employer identification number

84-1564926

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.					
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution				
7		Person X Payroll Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution				
8		Person X Payroll Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution				
9		Person X Payroll Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution				
10	Nume, dudiess, und Zir + 4	Person X Payroll Noncash X (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution				
11		Person X Payroll Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution				
12		Person X Payroll Noncash (Complete Part II for noncash contributions.)				

Name of organization
Young Americans Center for Financial
Education

Employer identification number
84-1564926

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
13		\$\$	Person X Payroll  Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
110.	Hame, address, and Zir + 4	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)		

Name of organization
Young Americans Center for Financial
Education

Employer identification number

84-1564926

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	additional space is needed.	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
10	Printed Program Passports		
		\$5,000.	12/27/18
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

Name of organization Employer identification number Young Americans Center for Financial Education 84-1564926

Part III	Exclusively religious, charitable, etc., contribut	ions to organizations described in	n section 501(c)(7), (8), or (10) that total more than \$1,000 for the year
	from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, or	ithrough <b>(e) and</b> the following line er	entry. For organizations
	Use duplicate copies of Part III if additional	space is needed.	7 1000 to the year (Effet distinct office.)
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
raiti			
		_	
		-	
Ī		(e) Transfer of gi	jift
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
(a) No.			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
1 4111			
		(e) Transfer of git	jift
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from			
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of git	jift
		.=	
-	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
	-		
(a) No. from	(L) D	/ ) 11	(4) 5
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of git	ift
	Transferente name address so	ad <b>7</b> ID + 4	Polationship of transferor to transferor
-	Transferee's name, address, a	1U ZIT + 4	Relationship of transferor to transferee

# **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

Young Americans Center for Financial Education

Employer identification number 84-1564926

Pai			is or Accounts.Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	e o.  (a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	, ,	. ,
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v		ised funds
	are the organization's property, subject to the organization's	_	
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor o		•
	impermissible private benefit?		Yes No
Pai	t II Conservation Easements. Complete if the org		
1	Purpose(s) of conservation easements held by the organizati	on (check all that apply).	
	Preservation of land for public use (e.g., recreation or e	ducation) Preservation of a his	storically important land area
	Protection of natural habitat	Preservation of a ce	rtified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the forn	n of a conservation easement on the last
	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 in (a)	2c
d	Number of conservation easements included in (c) acquired a	•	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by the	ne organization during the tax
	year ▶		
4	Number of states where property subject to conservation eas		•
5	Does the organization have a written policy regarding the per		
	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing co	nservation easements during the year
	<u> </u>		
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conserv	ation easements during the year
	<b>-</b> \$		
8	Does each conservation easement reported on line 2(d) above	•	
_	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation		
	include, if applicable, the text of the footnote to the organizat	cion's financial statements that describe	s the organization's accounting for
Dai	conservation easements.  t III   Organizations Maintaining Collections or	f Art Historical Treasures or (	Other Similar Assets
Га	Complete if the organization answered "Yes" on Form	-	other offilial Assets.
10	If the organization elected, as permitted under SFAS 116 (AS		ement and balance sheet works of art
Id	historical treasures, or other similar assets held for public exh	•	•
	the text of the footnote to its financial statements that descri		ance or public service, provide, in Part XIII,
h			nt and halance shoot works of art, historical
D	If the organization elected, as permitted under SFAS 116 (AS		
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of p	ublic service, provide the following amounts
	relating to these items:		<b>b</b> ¢
	(i) Revenue included on Form 990, Part VIII, line 1		
2		naurae, or other similar appets for finance	
2	If the organization received or held works of art, historical treation following amounts required to be reported under SEAS 1.		ıaı yaırı, provide
_	the following amounts required to be reported under SFAS 1	· · · · · · · · · · · · · · · · · · ·	<b>L</b> ¢
a h	Revenue included on Form 990, Part VIII, line 1  Assets included in Form 990, Part X		
D	Assets included in Form 330, Fall A		Ψ Ψ

# Young Americans Center for Financial

Schedule D (Form 990) 2018

Education

84-1564926 Page **2** 

Par	t III Organizations Maintaining Coll	lections of A	rt, Hist	orical Tr	easures, c	or Other	Similar As	sets(continued)
3	Using the organization's acquisition, accession,	and other record	ls, check	any of the	following tha	t are a sigr	nificant use of	its collection items
	(check all that apply):							
а	Public exhibition	d		oan or exc	hange progra	ams		
b	Scholarly research	е		Other				
С	Preservation for future generations							
4	Provide a description of the organization's collection	ctions and explain	n how th	ey further t	he organizati	on's exem	ot purpose in	Part XIII.
5	During the year, did the organization solicit or re							
	to be sold to raise funds rather than to be maint							Yes No
Par	t IV Escrow and Custodial Arrange							
	reported an amount on Form 990, Part X	, line 21.						
1a	Is the organization an agent, trustee, custodian	or other intermed	diary for	contribution	ns or other as	sets not in	cluded	
	on Form 990, Part X?							Yes No
b	If "Yes," explain the arrangement in Part XIII and							
								Amount
С	Beginning balance						1c	
	Additions during the year						1d	
	Distributions during the year						1e	
f	Ending balance						1f	
2a	Did the organization include an amount on Form						?	Yes No
b	If "Yes," explain the arrangement in Part XIII. Ch	eck here if the ex	kplanatio	n has been	provided on	Part XIII .		
Par	t V Endowment Funds. Complete if the	e organization an	swered	"Yes" on Fo	orm 990, Part	IV, line 10		
	(a	a) Current year	<b>(b)</b> P	rior year	(c) Two year	s back (d	) Three years ba	ack (e) Four years back
1a	Beginning of year balance	•		•			-	
b	Contributions							
С	Net investment earnings, gains, and losses							
d	Grants or scholarships							
е	Other expenditures for facilities							
	and programs							
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of the current	t vear end balanc	e (line 1	a. column (a	a)) held as:			
а	Board designated or quasi-endowment	,	%	, ,	"			
b	Permanent endowment	%	<b>—</b> i					
С	Temporarily restricted endowment ▶	<u>~</u> "						
	The percentages on lines 2a, 2b, and 2c should	-						
За	Are there endowment funds not in the possession		ation tha	t are held a	ınd administe	red for the	organization	
	by:	3					J	Yes No
	(i) unrelated organizations							3a(i)
	(ii) related organizations							
b	If "Yes" on line 3a(ii), are the related organization							
4	Describe in Part XIII the intended uses of the org	· · · · · · · · · · · · · · · · · · ·						
Par	t VI Land, Buildings, and Equipmen							
	Complete if the organization answered "\		), Part IV	, line 11a. S	See Form 990	), Part X, lir	ne 10.	
	Description of property	(a) Cost or o			or other		umulated	(d) Book value
	a south war at brakery	basis (investn			(other)		eciation	(,
1a	Land	,			. ,	•		
	Buildings							
	Leasehold improvements			14	9,942.	14	19,942.	0.
	Equipment				5,431.		37,517.	87,914.
	Other				,		•	,
	Add lines 1a through 1e (Column (d) must equa		X colum	n (R) line 1	100)			87,914.

Schedule D (Form 990) 2018

	Young Americ	cans Center	for Financi		4 1564006	
Schedule D (Form 990) 2018	Education			8	4-1564926 Pag	ge 🤅
Part VII Investments - C						
	nization answered "Yes"					
(a) Description of security or catego		(b) Book value	(c) Method of V	aluation: Cost or e	end-of-year market value	
(1) Financial derivatives						
(2) Closely-held equity interests						
(3) Other						
(A)						
(B)						
(C)						
(D)						
(E)						
(F) (G)						
(H)						
Total. (Col. (b) must equal Form 990,	Part X col (R) line 12 )					
Part VIII Investments - P						
	nization answered "Yes" o	on Form 990 Part IV lir	ne 11c See Form 990	Part X line 13		
(a) Description of in		(b) Book value			end-of-year market value	
(1)		. ,	<del>  ``</del>		,	
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
Total. (Col. (b) must equal Form 990,	Part X, col. (B) line 13.)					
Part IX Other Assets.						
Complete if the organ	nization answered "Yes" o		ne 11d. See Form 990,	Part X, line 15.		
	(a) [	Description			(b) Book value	
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)	000 0 1 1 (0) "	451				
Total. (Column (b) must equal For Part X Other Liabilities		9 15.)			<u> </u>	
		on Form 000 Dort IV li	20 110 or 11f Cao Farn	n 000 Dort V line	OE.	
(a) Das	nization answered "Yes" of cription of liability	on Form 990, Part IV, III	(b) Book value	11 990, Part X, line	25.	
	oription or liability		(b) Book value			
(1) Federal income taxes (2) Capital lease	obligation		16,196.			
(2) Capital lease			25,376.			
(4) Due to Young		ucation	23,310			
(5) Foundation	Dailb Hat	20401011	8,095.			
(6)			3,055.			
(7)						
(8)						

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ightharpoons2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

49,667.

Pa	rt XI Reconciliation of Revenue per Audited Financi		/ith Revenue per F	Returr	<b>).</b>
	Complete if the organization answered "Yes" on Form 990, Pa	rt IV, line 12a.			
1	Total revenue, gains, and other support per audited financial stateme	nts		1	4,220,287.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	ı	ı		
а	<b>5</b>		1 010 740	-	
b	***************************************		1,212,749.	4	
C	1 7 0			-	
d				-	1 212 7/0
e	• • • • • • • • • • • • • • • • • • • •			2e	1,212,749. 3,007,538.
3	Subtract line 2e from line 1			3	3,007,330
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1.40	I		
a b				-	
				4c	0.
5	Add lines <b>4a</b> and <b>4b</b> Total revenue. Add lines <b>3</b> and <b>4c.</b> ( <i>This must equal Form 990, Part I,</i>			5	3,007,538
	rt XII Reconciliation of Expenses per Audited Finance				
	Complete if the organization answered "Yes" on Form 990, Pa				
1	Total expenses and losses per audited financial statements			1	3,831,206.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	1,212,749.		
b					
С					
d					
е	Add lines 2a through 2d			2e	1,212,749.
3	Subtract line 2e from line 1			3	2,618,457.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		1		
а	, , , , , , , , , , , , , , , , , , , ,				
b	Other (Describe in Part XIII.)	4b			•
	Add lines 4a and 4b			4c	0.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part	, line 18.)		5	2,618,457.
	rt XIII Supplemental Information.	La and A. Dart IV. Bas	- Alexand Obs. David V. Base	4: D-:4	V 15 0- D+ VI
	ride the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1			4; Part	X, line 2; Part XI,
ines	s 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to pro	ovide any additional i	mormation.		
Scl	hedule D, Part XII and XIII				
The	e excluded amounts relate to in-kind	d rent for	the use of f	aci	lities and
pai	rking space where programs are cond	ıcted (\$1,1	.57,269) and	in-	kind
ad	vertising (\$55,480) which are prima:	rily progra	m costs. Whe	en tl	hese
amo	ounts are included, the administrat:	ive/fundrai	sing expense	ra	tio is
apı	proximately 17%.				

# **SCHEDULE G**

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Name of the organization

# **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.

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

Young Americans Center for Financial

OMB No. 1545-0047

2018

Open to Public Inspection

Employer identification number

84-1564926 Education 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. Mail solicitations Solicitation of non-government grants b Internet and email solicitations Solicitation of government grants Phone solicitations ☐ Special fundraising events In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or Yes No key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? 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.

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

Young Americans Center for Financial Schedule G (Form 990 or 990-EZ) 2018 Education 84-1564926 Page 2 Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 **(b)** Event #2 (c) Other events (d) Total events None Entrepreneur Wray (add col. (a) through Event Valentine's col. (c)) (event type) (event type) (total number) 294,073. 15,780. 309,853. 1 Gross receipts 236,984 11,033. 248,017. 2 Less: Contributions 57,089. 4,747. 61,836. 3 Gross income (line 1 minus line 2) ..... 4,500 4,500. 4 Cash prizes 5 Noncash prizes Direct Expenses 11,344. 11,344. 6 Rent/facility costs 30,195. 4,747. 34,942. 7 Food and beverages ..... 8 Entertainment 9 Other direct expenses 11,050. 11,050. 61,836. 10 Direct expense summary. Add lines 4 through 9 in column (d) 11 Net income summary. Subtract line 10 from line 3, column (d) Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add (a) Bingo (c) Other gaming Revenue bingo/progressive bingo col. (a) through col. (c)) Gross revenue ..... 2 Cash prizes Direct Expenses 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses ..... Yes Yes Yes 6 Volunteer labor 7 Direct expense summary. Add lines 2 through 5 in column (d)

8 Net gaming income summary. Subtract line 7 from line 1, column (d)

a Is the organization licensed to conduct gaming activities in each of these states?

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

**9** Enter the state(s) in which the organization conducts gaming activities:

Schedule G	(Form	990 or	990-EZ	2018
Concadic a	,. •	0000.		

**b** If "No," explain:

**b** If "Yes," explain:

# Young Americans Center for Financial

<u>Sch</u>	edule G (Form 990 or 990-EZ) 2018 Education 8	<u>4 – 1 :</u>	064	9 <u>4</u> 6	Page 3
11	Does the organization conduct gaming activities with nonmembers?		\	es/	No No
	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?			es	☐ No
12	Indicate the percentage of gaming activity conducted in:				
		- 1	13a		0/4
	The organization's facility	·····- F	13b		<u>%</u>
	An outside facility		IOD		70
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records	•			
	Name ▶				
	Address				
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		<u> </u>	es/	☐ No
b	o If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amoun	t			
	of gaming revenue retained by the third party >\$				
c	If "Yes," enter name and address of the third party:				
	Name				
	Address >				
16	Gaming manager information:				
	Name				
	Gaming manager compensation ▶ \$				
	Description of services provided				
	☐ Director/officer ☐ Employee ☐ Independent contractor				
17	Mandatory distributions:				
	Is the organization required under state law to make charitable distributions from the gaming proceeds to				
_	retain the state gaming license?			es/	☐ No
h	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in				
	organization's own exempt activities during the tax year > \$	LI IC			
Da	irt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and	nd Dort	III lin	00.0	0h 10h
ıa		iu Fari	111, 1111	es 9,	90, 100,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.				

# Young Americans Center for Financial 84-1564926 Page 4 Schedule G (Form 990 or 990-EZ) Education Part IV Supplemental Information (continued) Education

# 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 Americans Center for Financial

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Education	n						84-1564926
Part I General Information on Grants	and Assistance						
1 Does the organization maintain records							
criteria used to award the grants or ass							X Yes No
2 Describe in Part IV the organization's p							
Part II Grants and Other Assistance to	=				anization answered "	Yes" on Form 990, Part	: IV, line 21, for any
recipient that received more than		·			(f) Method of		
Name and address of organization or government	( <b>b)</b> EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
Young Americans Bank							
3550 E. 1st Ave.							YouthBiz loan guarantee
Denver CO 80206	84-1056229		45,279.	0.			payout
2011/01, 00 00200	01 1030223		13,273.	, , , , , , , , , , , , , , , , , , ,			payous
			1				
			1				
2 Enter total number of section 501(c)(3)	and government or	ganizations listed in t	he line 1 table			·····	<b>&gt;</b> 0.
3 Enter total number of other organization	ns listed in the line	1 table					<b>▶</b> 1.

approves the reimbursement to the Bank on a case by case basis.

Schedule I (Form 990) (2018)

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.  Part III can be duplicated if additional space is needed.								
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance			
Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.								
Part I, Line 2:								
At times, participants of YouthBiz, a program of Young Americans Center for								
Financial Education (the Center), may obtain loans from Young Americans								
Bank (the Bank) in conjunction with program activities. The Bank is a								
related entity; see Schedule R. The Bank may request reimbursement from the								
Center for YouthBiz participant loans that have become deliquent and have								
been written off by the Bank. The Center reviews these requests and								

### SCHEDULE J (Form 990)

**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.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

**Questions Regarding Compensation** 

Department of the Treasury

Internal Revenue Service

Part I

Young Americans Center for Financial Education

Employer identification number 84-1564926

No Yes 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 Personal services (such as maid, chauffeur, chef) Discretionary spending account 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 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? 3 Indicate which, if any, of the following the filing 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 Compensation survey or study Independent compensation consultant X Approval by the board or compensation committee Form 990 of other organizations 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: X a Receive a severance payment or change-of-control payment? X b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b X c Participate in, or receive payment from, an equity-based compensation arrangement? 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. 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: Х a The organization? 5a  $\overline{\mathbf{x}}$ **b** Any related organization? If "Yes" on line 5a or 5b, describe in Part III. 6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: Х a The organization? 6a X **b** Any related organization? 6b If "Yes" on line 6a or 6b, describe in Part III. 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 X 8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III Х If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

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

Schedule J (Form 990) 2018

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.

84-1564926

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

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation in column (B)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	benefits	(B)(i)-(D)	reported as deferred on prior Form 990
(1) Richard Martinez Jr.	(i)	67,231.	14,974.	0.	1,559.	4,805.	88,569.	0.
President & CEO	(ii)	132,268.	29,460.	0.	3,067.	9,452.	174,247.	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)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							<u> </u>

Schedule J (Form 990) 2018	Education	84-1564926	Page <b>3</b>
Part III Supplemental Informat	on		
	n, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b	, 7, and 8, and for Part II. Also complete this part for any additional informa	ation.

## SCHEDULE O

Internal Revenue Service

(Form 990 or 990-EZ) Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ. ► Go to www.irs.gov/Form990 for the latest information. Open to Public Inspection

OMB No. 1545-0047

Name of the organization

Young Americans Center for Financial Education

**Employer identification number** 84-1564926

Form 990, Part I, Line 1, Description of Organization Mission:

Young Americans Center for Financial Education is committed to developing the financial literacy of young people through real-life experiences and hands-on programs purposefully designed to enable them to prosper in the free enterprise system. Since 1989, more than 728,910 youth have benefited from these nonprofit programs that build life skills, work skills, and financial self-sufficiency.

Form 990, Part III, Line 4d, Other Program Services: YouthBiz Marketplace provides a forum where youth can sell their unique handmade products or services to the public twice a year, in winter and YouthBiz Stars, a celebration of young entrepreneurs, is a Colorado business competition for 6-21 year-old entrepreneurs. Americans Center for Financial Education launched Spark Change, a school-based service learning program, in 22 schools in 2018. In addition, the organization also conducted a variety of community outreach programming including Money Matters classes, tours and presentations. Rural Young Americans Center for Financial Education, LLC in Wray, Colorado offers Rural Young AmeriTowne to schools in eastern Colorado and across the borders of Kansas and Nebraska. In 2018, 1,383 students participated in Rural AmeriTowne. In addition, Young Americans Center for Financial Education runs weekly day camps throughout the summer. Themes for the camps include personal finance and banking, free enterprise, global economics and entrepreneurship.

Summer camp participation was 1,383 youth in 2018.

Revenue \$ 316,518.

Name of the organization Young Americans Center for Financial **Employer identification number** Education 84-1564926 Expenses \$ 218,023.

including grants of \$ 0.

Form 990, Part VI, Section B, line 11b:

The Center engages an accounting firm to prepare the 990. Management works closely with the firm during the preparation and provides various schedules. A draft is provided to management, who conducts a review and verifies that the information in the return is consistent with organizational records. After management's review is completed, the draft 990 is provided to the Board of Directors for review. The Board of Directors reviews it and any questions identified are resolved. Once the Board is satisfied with the draft return, a member of the Board provides a summary of the return and highlights any relevant or significant items. The Board then has the ability to raise any additional questions. Once the Board is satisfied, the draft 990 is then approved and provided in final form to management, signed and submitted to the Internal Revenue Service.

Form 990, Part VI, Section B, Line 12c:

The Center's conflict of interest policy requires that the Board and key employees disclose any conflicts annually. The annual disclosure forms are obtained and reviewed by the Secretary of the Board who makes a summary of any disclosed conflicts. Annually, the Board reviews and approves any relevant conflicts. The organization is small enough and the Board and key employees are well versed in the conflict rules, that an annual review/disclosure has been deemed sufficient. Annually, each employee of the organization receives a copy of the policy and also submits a conflict of interest disclosure form. The organization's executive management has a heightened awareness and ability to identify conflicts and ensure that the policy is complied with (e.g., looks for possible conflicts with new

Name of the organization Young Americans Center for Financial Education

Employer identification number 84-1564926

vendors). Additionally, the Secretary of the Board has been assigned responsibility for ensuring that all of the forms are obtained and reports to the CEO when that has been accomplished, and provides a summary of conflicts, if any.

Form 990, Part VI, Section B, Line 15:

15a. The Executive Committee is responsible for reviewing and recommending changes related to the CEO/President's compensation. Annually, the Executive Committee completes a review (which is provided to the full Board) and recommends compensation adjustments to the full Board. The full Board discusses and approves the review and recommendation. All activities are documented in the Executive Committee minutes. The salary adjustment is not made in the payroll system until the Board's approval has been obtained. In determining the appropriate compensation range, adequate comparability data is obtained from the Employer's Council. Periodically, the ranges for all of the positions in the organization undergo an external review for appropriateness. The management team/key employees are the same for Young Americans Education Foundation, Young Americans Center for Financial Education and Young Americans Bank (which is an FDIC insured bank for individuals under the age of 22 whose purpose is to educate children on banking products). Due to the significant regulatory side of the banking business, the CEO of Young Americans must have a background in both banking and non-profit management. As such, the appropriate range for the CEO/President is a blend of CEO salaries for banks and non-profits. Executive Committee reviewed all of the salary ranges (including the CEO's) for appropriateness during the annual review conducted in December.

Name of the organization Young Americans Center for Financial Education

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recommendations for the vice presidents (including the Treasurer/VP of Finance and the Secretary/VP of Bank). Again, adequate comparability data is obtained from the Employer's Council. The last compensation rate review was completed in 2017. The table is provided to the CEO/President and approved by the Executive Committee. The CEO/President conducts the annual review of the Vice Presidents and makes salary recommendations consistent with the salary tables, which are approved by the Executive Committee.

Form 990, Part VI, Section C, Line 19:

The organization's governing documents, conflict of interest policy, and financial statements are made available to the public upon request. Each year, a packet is prepared which includes the relevant information and is distributed when requested.

Form 990, Part XII, line 2c

The process has not changed from the prior year.

Form 990, Part VI, Section A, Lines 1a and 1b,

The difference in the number of voting and independent board members

relates to the President/CEO. Per the 990 instructions, members who

receive compensation from the organization or from related

organizations are not considered independent. Because the

President/CEO is a salaried position, by definition he is not

considered independent.

Form 990, Part III, Statement of Program Service Accomplishments

Three of the programs, Young AmeriTowne, International Towne, and Rural

Name of the organization Young Americans Center for Financial Education	Employer identification number 84-1564926
Young AmeriTowne, require a large amount of space to operation	ate. Young
Americans Education Foundation (the Foundation), a related	d entity, owns
the three buildings that the Center uses to run the progra	ams. The
buildings are located in Denver, Lakewood and Wray, Colora	ado. The
Foundation provides the spaces at no cost to the Center.	In addition,
the Center receives donated space from third parties to op	perate the On
the Road program. As such, the Center has recognized in-k	ind rent in
the 2018 audited financial statements totaling \$1,131,919	for the free
use of facilities. However, this in-kind revenue and expe	ense is
excluded on the tax return.	
Form 990, Part VII, Section A	
The Treasurer and the Secretary of the Board are considered	ed officers of
the Organization according to the bylaws; however, they have	ave no voting
rights and are therefore excluded from the count of voting	g members of
the governing body on Form 990, Part I, Line 3.	

#### SCHEDULE R (Form 990)

Part I

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.

Young Americans Center for Financial

Employer identification number 84-1564926

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Young Americans Center for Education

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	<b>(f)</b> Direct controlling entity
Rural Young Americans Center for Financial	Financial education in				
Education - 84-1564926, 3550 E. 1st Ave., Denver, CO 80206	rural areas	Colorado	152,017.	220,411.	N/A
	_				
	1				
	-				
-	-				

Part II 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>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	contr	g) 512(b)(13) rolled ity?
				501(c)(3))		Yes	No
Young Americans Education Foundation -	private operating						
74-2513428, 3550 E. 1st Ave., Denver, CO	foundation, landlord, and						
80206	funder	Colorado	501(c)(3)	PF	N/A		X
	-						

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

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.

organization states at a parameter from the first state of the first s																
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)		(i)	(j)	(k)					
Name, address, and EIN of related organization	Primary activity	Legal domicile	Direct controlling entity	Predominant income	Predominant income	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Predominant income	Predominant income	Predominant income S	Share of total	Share of	Disprop	ortionate	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Genera	or Percentage
or related organization		(state or foreign	entity	excluded from tax under	income	end-of-year assets		tions?	20 of Schedule	partne	ownership					
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes N	0					
				<u> </u>			I		I.							

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>(b)</b> Primary activity	(c) Legal domicile (state or foreign	(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	Sec 512(i contr ent	ti) tion b)(13) rolled ity?
		country)		or tracty		400010		Yes	No
Young Americans Bank - 84-1056229									1
3550 E. 1st Ave.									1
Denver, CO 80206	Bank	CO	YAEF	C CORP	0.	0.	.00%		X

Schedule R (Form 990) 2018

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

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	e or more	related organizations listed	in Parts II-IV?			X					
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity											
	<b>b</b> Gift, grant, or capital contribution to related organization(s)											
С	c Gift, grant, or capital contribution from related organization(s)											
d	Loans or loan guarantees to or for related organization(s)				1d	Х						
е	Loans or loan guarantees by related organization(s)				1e		Х					
f	Dividends from related organization(s)				1f		Х					
g	Sale of assets to related organization(s)				1g		Х					
h	Purchase of assets from related organization(s)				1h		Х					
i	Exchange of assets with related organization(s)				1i		Х					
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		Х					
•												
k Lease of facilities, equipment, or other assets from related organization(s)												
- 1	Performance of services or membership or fundraising solicitations for related organization(s)	s)			11		Х					
m	Performance of services or membership or fundraising solicitations by related organization(s)				1m		Х					
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	Х						
	Sharing of paid employees with related organization(s)				10	Х						
р	Reimbursement paid to related organization(s) for expenses				1p	Х						
	Reimbursement paid by related organization(s) for expenses				1q		Х					
r	Other transfer of cash or property to related organization(s)				1r		Х					
	Other transfer of cash or property from related organization(s)				1s		Х					
2												
	(a) (k Name of related organization Transa	b)	(c)	(d)								
			Amount involved	Method of determining amount inv	olved							
	type	e (a-s)										
<u>(1)</u>												
(0)												
(2)												
(3)												
(0)												
(4)												
<u>.,</u>												
(5)												
(6)												
83216	33 10-02-18			Schedule I	R (For	m 990	) 2018					

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)	(b)	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e)	(f)	(g)	(t	1)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Predominant income (related unrelated	partners s	Share of	Share of	Dispre	opor- iate	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Genera manag	Percentage
of entity		(state or foreign country)	excluded from tax under	orgs.?	total income	end-of-year assets	allocat	ions?	of Schedule K-1	partne	ownersnip
		Country)	Sections 5 (2-5 (4)	Yes N	o income	assets	Yes	No	(F0ffff 1065)	Yes I	10
				$\vdash$						$\vdash$	
				$\sqcup \bot$						$\sqcup$	
										$\sqcap$	
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# Young Americans Center for Financial Education

Schedule R	(Form 990) 2018  Supplemental Info	Education	84-1564926	Page <b>5</b>
Part VII	Supplemental Info	ormation.		
	Provide additional inform	nation for responses to questions on Schedule R. See instructions.		