Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

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

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

2020 **Open to Public** Inspection

Inte	mal Reve	enue Service	Go to www.irs.gov/Form990 for instructions and the lates	st information	on.		Inspection							
Α	For the	e 2020 calend	dar year, or tax year beginning 07/01/2020 and ending	0	6/30/20	21								
в	Check if	f applicable:	C Name of organization YWCA OF MINNEAPOLIS	C) Emplo	oyer identification number								
	Address	s change	Doing business as YWCA Minneapolis 41-0693891											
	Name c	hange	Number and street (or P.O. box if mail is not delivered to street address)	E	E Telephone number									
	Initial re	turn	1130 Nicollet Mall		612-332-0501									
	Final retu	urn/terminated	City or town, state or province, country, and ZIP or foreign postal code											
	Amende	ed return	Minneapolis, MN, 55403		Ģ	Gross	receipts \$ 16,479,299							
	Applicat	tion pending	F Name and address of principal officer: Shelley Carthen Watson	H(a) Is t	this a group	o return fo	r subordinates? 🗌 Yes 🗹 No							
			1130 Nicollet Mall, Minneapolis, MN 55403	H(b) Ar	e all sub	ordinat	es included? 🗌 Yes 🗌 No							
I	Tax-exe	empt status:	✓ 501(c)(3) 501(c) () ◄ (insert no.) 4947(a)(1) or 527	lf "No,"	' attach a	a list. Se	e instructions							
J	Website	e: 🕨 ywcam	ols.org	H(c) Gr	roup exe	mption	number 🕨							
к	Form of	organization:	Corporation ☐ Trust	nation: 189	91 N	I State	of legal domicile: MN							
Ρ	art I	Summa	ry											
	1	Briefly des	cribe the organization's mission or most significant activities: The n	nission of Y	WCA N	/linnea	polis is eliminating							
e		racism, em	powering women and promoting peace, justice, freedom and dignity fo	r all.										
Activities & Governance														
/err	2	Check this	box ► □ if the organization discontinued its operations or dispose	d of more t	than 25	5% of	its net assets.							
ő	3	Number of	voting members of the governing body (Part VI, line 1a)			3	33							
ø	4	Number of	independent voting members of the governing body (Part VI, line 1)	b)		4	33							
ties	5	Total numb	per of individuals employed in calendar year 2020 (Part V, line 2a)			5	566							
tivi	6	Total numb		6	3,355									
Ac	7a	Total unrel	ated business revenue from Part VIII, column (C), line 12			7a	0							
	b	Net unrelat	ed business taxable income from Form 990-T, Part I, line 11			7b	0							
				Pric	or Year		Current Year							
Ð	8	Contributio	ons and grants (Part VIII, line 1h)		7,73	8,820	8,054,640							
nué	9	Program se	ervice revenue (Part VIII, line 2g)		11,59	1,663	7,507,951							
Revenue	10	Investment	income (Part VIII, column (A), lines 3, 4, and 7d)		68	3,575	648,932							
Œ	11	Other reve	nue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) .		78	3,028	262,775							
	12	Total reven	ue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)		20,79	7,086	16,474,298							
	13	Grants and	I similar amounts paid (Part IX, column (A), lines 1–3)			0	0							
	14	Benefits pa	aid to or for members (Part IX, column (A), line 4)			0	0							
ŝ	15	Salaries, ot	her compensation, employee benefits (Part IX, column (A), lines 5–10)		12,27	5,8 9 2	10,954,375							
Expenses	16a	Profession	al fundraising fees (Part IX, column (A), line 11e)			0	0							
ad x	b	Total fundr	aising expenses (Part IX, column (D), line 25) ► 1,283,629											
Ú	17	Other expe	enses (Part IX, column (A), lines 11a–11d, 11f–24e)		7,04	8,936	6,105,009							
	18	Total expe	nses. Add lines 13–17 (must equal Part IX, column (A), line 25)		19,32	4,828	17,059,384							
	19	Revenue le	ess expenses. Subtract line 18 from line 12		1,47	2,258	-585,086							
s or				Beginning o	of Curren	nt Year	End of Year							
Net Assets or Fund Balances	20	Total asset	s (Part X, line 16)		50,02	0,594	51,048,789							
t As Id B	21	Total liabili	ties (Part X, line 26)		5,84	1,724	4,384,452							
			or fund balances. Subtract line 21 from line 20		44,17	8,870	46,664,337							
Pa	art II	Signatu	re Block											

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

Sign Here	Signature of officer Ramya Rauf, CFO Type or print name and title			Date			
Paid	Print/Type preparer's name	Preparer's signature	Date		Check if self-employed	PTIN	
Preparer Use Only	Firm's name	Firm's EIN ►					
	Firm's address ►			Phone	e no.		
May the IRS	discuss this return with the prepare	r shown above? See instructions				Yes	No
	rk Reduction Act Nation and the cons	rata instructions	at Na 11000V				1/0000

For Paperwork Reduction Act Notice, see the separate instructions.

	00 (2020) Page
Part	III Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
•	YWCA Minneapolis is dedicated to eliminating racism, empowering women and girls, and promoting peace, justice, freedom and
	dignity for all.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
0	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured b
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 5,856,008 including grants of \$) (Revenue \$ 4,468,626)
	HEALTH & WELLNESS: Three Minneapolis locations provided state-of-the-art fitness facilities, swimming pools, group fitness
	classes and fitness coaching for 11,500+ members in 2020-2021. In addition, 375+ community members participated in classes
	and clinics on CPR, first aid, lifeguard certifications, swimming instruction, personal training endurance sports, and other specialty
	topics to enhance their personal well-being. In light of the global COVID-19 pandemic, YWCA adjusted its classes and programs to
	virtual formats so that members could attend to their well-being during stressful times. This switch to virtual events and programs
	extended to our annual Women's Triathlon. Though normally held in-person every August for more than 1,400 women and girls, in
	August 2020, more than 100 individuals participated in YWCA's first-ever virtual tri fest - the most flexible, accessible triathlon
	opportunity in our history. At YWCA a welcoming, inclusive environment supports the participation of people across cultures,
	income levels and age. HEALTH & FITNESS SCHOLARSHIPS: YWCA Minneapolis makes fitness accessible by offering
	fee-based scholarships to youth, adults and families who cannot afford the full cost of a membership. In 2020-21, over 300 scholarships were awarded to support community members' fitness memberships.
	scholarships were awarded to support community members intress memberships.
4b	(Code:) (Expenses \$ 5,376,372 including grants of \$) (Revenue \$ 6,808,833)
	EARLY CHILDHOOD EDUCATION (ECE): High-quality nationally accredited Early Childhood Education was provided at five
	YWCA Children's Centers across the Twin Cities. In 2020-21, 400+ children ages six weeks to 12 years old were served.
	Experienced professional teachers partnered with families to prepare children to excel in school and life. Our unique play-based,
	anti-bias curriculum incorporates values of diversity and conflict resolution skills. Learning opportunities incorporated into every
	part of the day promote social and emotional development, language and literacy development, creativity and the arts, cognitive
	development, and physical and motor skills. Our centers had intermittent brief COVID-19-related closures throughout the year, but
	four of the five centers were open throughout the pandemic and the fifth center opened in July 2021. OUTSTANDING EDUCATIONAL OUTCOMES: For children in care for six or more months in 2020-21: 85 percent of children demonstrated
	age-appropriate developmental progress, and 87 percent of preschoolers met rigorous early learning standards indicating school
	readiness. EARLY CHILDHOOD EDUCATION WORKFORCE DEVELOPMENT: This program provides access to comprehensive
	training and support for participants to complete a Child Development Associate (CDA) - a foundational post-secondary credential
	(Continued on Schedule O, Statement 1)
4c	(Code:) (Expenses \$ 1,219,742 including grants of \$) (Revenue \$ 42,181)
	GIRLS & YOUTH: Five YWCA Minneapolis out-of-school-time and summer programs prepare Twin Cities youth to be learners,
	leaders and creators of change so they graduate from high school ready for college and careers. Culturally responsive high-quality
	programs use research-based curriculum focused on academic success, positive social/emotional development, leadership skills
	and physical health. In 2020-21, 500+ youth were served in afterschool programs at 20 Minneapolis public and charter schools
	and two YWCA locations mostly virtual. PROVEN RESULTS: In 2020-21, 100 percent of youth participants stated their intention to
	graduate high school.
4d	Other program services (Describe on Schedule O.) See Schedule O, Statement 2
4d 4e	Other program services (Describe on Schedule O.) See Schedule O, Statement 2 (Expenses \$ 586,189 including grants of \$ 0) (Revenue \$ 727,867) Total program service expenses > 13,038,311

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

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Part	V Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22		~
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	~	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a		~
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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		┝───
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		~
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		~
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		~
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		~
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):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
b	"Yes," complete Schedule L, Part IV	28a 28b		~
b C	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If	200		
U	"Yes," complete Schedule L, Part IV	28c		~
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		~
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		~
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		~
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		~
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		~
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		~
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		~
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		~
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		~
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
Part		38	~	
	Check if Schedule O contains a response or note to any line in this Part V		 Ver	
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 83		Yes	No
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and			

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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 566			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	~	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		~
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		~
b	If "Yes," enter the name of the foreign country >			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		~
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		~
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		~
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		~
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		~
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		~
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		~
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		~
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 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		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		~
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O .	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		~
40	If "Yes," see instructions and file Form 4720, Schedule N.	40		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		~
	If "Yes," complete Form 4720, Schedule O.			

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Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes	s on S	Schedule O.	See in	struc	
	Check if Schedule O contains a response or note to any line in this Part VI					~
Secti	on A. Governing Body and Management					
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar	<u>1a</u>	33		Yes	No
	committee, explain on Schedule O.					
b	Enter the number of voting members included on line 1a, above, who are independent	<u>1b</u>	33			
2	Did any officer, director, trustee, or key employee have a family relationship or a business r any other officer, director, trustee, or key employee?			2		~
3	Did the organization delegate control over management duties customarily performed by or supervision of officers, directors, trustees, or key employees to a management company or ot			3		~
4	Did the organization make any significant changes to its governing documents since the prior Forr			4		~
5 6	Did the organization become aware during the year of a significant diversion of the organization bid the organization have members or stockholders?	on's a	ssets? .	5 6	~	~
7a	Did the organization have members, stockholders, or other persons who had the power to one or more members of the governing body?	elect	or appoint	7a		~
b	Are any governance decisions of the organization reserved to (or subject to approval stockholders, or persons other than the governing body?		members,	7b		~
8	Did the organization contemporaneously document the meetings held or written actions un the year by the following:		ken during			
а	The governing body?			8a	~	
b	Each committee with authority to act on behalf of the governing body?			8b	~	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot the organization's mailing address? If "Yes," provide the names and addresses on Schedule C		reached at	9		~
Secti	on B. Policies (This Section B requests information about policies not required by the		ernal Reven	ue Co	ode.)	
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		~
b	If "Yes," did the organization have written policies and procedures governing the activities of affiliates, and branches to ensure their operations are consistent with the organization's exem			10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before	ore filir	ng the form?	11a	~	
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			12a	~	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give			12b	~	
С	Did the organization regularly and consistently monitor and enforce compliance with the p			10		
10	describe in Schedule O how this was done			12c	マ マ	
13 14	Did the organization have a written whistleblower policy?			13 14	v v	
14 15	Did the process for determining compensation of the following persons include a review a			14	~	
	independent persons, comparability data, and contemporaneous substantiation of the deliberatio The organization's CEO, Executive Director, or top management official	n and	decision?	150	V	
a L	Other officers or key employees of the organization			15a 15b	v v	
b	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	• •		150	•	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or simil with a taxable entity during the year?		•	16a		V
b	If "Yes," did the organization follow a written policy or procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and take steps t organization's exempt status with respect to such arrangements?	n to e o saf	evaluate its eguard the	16b		
Secti	on C. Disclosure	<u>· ·</u>		100		
17	List the states with which a copy of this Form 990 is required to be filed MN					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable (3)s only) available for public inspection. Indicate how you made these available. Check all that Own website Another's website Upon request Other (explain on Science)	e), 99 t appl chedu	0, and 990-7 y. <i>le O)</i>	「(Sec	tion 5	501(c)
19	Describe on Schedule O whether (and if so, how) the organization made its governing docu and financial statements available to the public during the tax year.				•	olicy,
20	State the name, address, and telephone number of the person who possesses the organizatic Ramya Rauf, (612)215-4140	on's b	ooks and re	cords	•	

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

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.

See instructions for the order in which to list the persons above.

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

		(C)								
(A)	(B)				sition			(D)	(E)	(F)
Name and title	Average					e than c is both		Reportable	Reportable	Estimated amount
	hours		er and a direct					compensation	compensation	of other
	per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Institutional trustee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	compensation from the organization and related organizations		
Michelle Basham	50.00									
Chief Executive Officer				~				212,982	0	6,193
Ramya Rauf	50.00	ļ								
Chief Financial Officer				~				166,370	0	13,530
Kari Clark	50.00	ļ								
Chief Development Officer				~				166,211	0	5,230
Stephanie Thomas	50.00									
VP Girls and Youth / Early Childhood Education						~		141,500	0	4,488
Jacqueline Lloyd Cunningham	50.00									
VP Marketing & Communication						~		107,840	0	3,478
Jessie Hendel	40.00									
Chief Program Officer				~				51,154	0	25
Jeninne McGee	7.00									
Chair		~		~				0	0	0
Gwendolyn L McFadden-Vincent	5.00									
Treasurer		~		~				0	0	0
Deborah Hilke	2.00									
Secretary		~		~				0	0	0
Cheryl Cooper Boyd	6.00									
Board Member		~						0	0	0
Angela Davis Drew	0.25									
Board Member		~						0	0	0
Val Moeller	2.00									
Board Member		~						0	0	0
Michele Durkin	1.00									
Board Member		~						0	0	0
Sara H Ahluwalia	1.00									
Board Member		~						0	0	0

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below	box, i office or directo	unles	Pos neck ss pe	erson	e than c is both or/trust employee	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
Jennifer Laible	dotted line)	ee	stee			nsated				
Board Member	5.00	~						0	0	0
Margaret Wood	0.50							0	0	0
Board Member	0.30	~						0	0	0
Darlynn M Benjamin	2.00	-						•		<u>_</u>
Board Member	2.00	~						0	0	0
Debbie Galka	1.00									
Board Member		~						0	0	0
Lisa Huey	2.00									
Board Member		~						0	0	0
Stacy O'Reilly	1.00									
Board Member		~						0	0	0
Lakeeta Hill	0.50									
Board Member		~						0	0	0
Carissa L Rollins	2.50	-								
Board Member		~						0	0	0
Bria Shea	1.00									
Board Member		~						0	0	0
Ananya Banerjee	0.50									
Board Member		~						0	0	0
Lindsey Farrell Stampone	0.25									
Board Member		~						0	0	0
Leslie Holman Holt	0.25							_	_	
Board Member	4.00	~		<u> </u>				0	0	0
Constance St Germain	1.00	~						_	_	
Board Member	0.25	~						0	0	0
Melissa Barra	0.25	~							•	
Board Member		~						0	0	0

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

(A)	(B)			Pos	C) sition			(D)	(E)	(F)
Name and title	Average hours per week	box, office	unles er and	ss pe d a c	more than one erson is both an director/trustee)			Reportable compensation from the	Reportable compensation from related	Estimated amount of other compensation
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	from the organization and related organizations
Remi Kent	0.25	-								
Board Member		~						0	0	0
Kathy Longo	0.50	-								
Board Member		~						0	0	0
Susan Williams	0.50	ļ								
Board Member		~						0	0	0
Colette Campbell	0.50	-								
Board Member		~						0	0	0
Nancy Garrett	2.00	-								
Board Member		~						0	0	0
Lana Slavitt	2.00	ļ								
Board Member		~						0	0	0
Jan Wikman	0.50									
Board Member		~						0	0	0
Mallory Mitchell	1.00									
Board Member		~						0	0	0
Tami Kozikowski	0.50	ļ								
Board Member		~						0	0	0
Beth Smits	1.00	ļ								
Board Member		~						0	0	0
Stephanie Crosby	2.00	-								
Board Member		~						0	0	0
Nicole Kveton	0.25	-								
Board Member		~						0	0	0
Josefina Landrieu	0.25	-								
Board Member		~						0	0	0
Carolyn Link	1.00									
Board Member		~						0	0	0

Part	VII Section A. Officers, Directors, 1	rustees,	Key	Em	ploy	yee	s, an	d H	lighest Compe	nsated I	Emplo	yees (d	contin	nued)
	(A)	(B)			Pos	C) ition			(D)	(E)			(F)	
	Average (do not check more than o box, unless person is both hours officer and a director/trust						an	Reportable compensation from the	Report compens from rel	able sation	ot	ted am f other pensatio		
		(list any hours for related organizations	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	organiza (W-2/1099	ations	fro	om the zation	and
		below dotted line)	Istee	rustee		ă	oensated							
			-											
			-											
			-											
			-											
			-											
			-											
			-											
			-											
 1b	Subtotal		-						04/ 057		0			
c d	Total from continuation sheets to Part	VII, Sectio		•	•	• •	•		846,057		0			2,944
2	Total number of individuals (including but reportable compensation from the organi	not limited					above	e) w		e than \$1	00,000	of		
3	Did the organization list any former of employee on line 1a? <i>If "Yes," complete s</i>							-	loyee, or highes	-		3	Yes	No V
4	For any individual listed on line 1a, is the organization and related organizations individual	greater th	an \$	150,	000)? [f "Ye	s,"	complete Sched				~	
5	Did any person listed on line 1a receive of for services rendered to the organization?													~
Secti	on B. Independent Contractors													
1	Complete this table for your five high compensation from the organization. Rep													
News	(A) Name and business add	ress							(B) Description of serv	vices		(C) Compens	ation	
None														
2	Total number of independent contracto	rs (includir	ng bi	ıt n	ot	limit	ed to	b th	ose listed abov	e) who				

2	Total number of independent contractors (including but not inflited to those	listeu
	received more than \$100,000 of compensation from the organization \blacktriangleright	0

Part VIII Statement of Revenue

Far	. •	Check if Schedule O contains a resp	onse or note to an	y line in this Pa	art VIII....		🗸
		· · · · · · · · · · · · · · · · · · ·		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns 1	a 554,013				
	b	Membership dues 1					
s, G	С	Fundraising events 1					
ar /	d	Related organizations 1					
s, G mili	е	Government grants (contributions) 1	e 1,476,362				
ion r Si	f	All other contributions, gifts, grants, and similar amounts not included above 1	£ (000 0 10				
but			f 6,000,342				
d O	g	Noncash contributions included in lines 1a–1f	g \$ 0				
Col	h			8,054,640			
			Business Code	0,004,040			
ce	2a	Health and Wellness Membership Dues	713940	2,334,840	2,334,840	0	0
Program Service Revenue	b	Health and Wellness Services	713940	664,403	664,403	0	0
jram Ser Revenue	с	Early Childhood Education Services	624410	2,060,547	2,060,547	0	0
am	d	Early Childhood Education Govt. Purcha	se 624410	2,064,259	2,064,259	0	0
ogr	е	Racial Justice and Public Policy	110000	383,902	383,902	0	0
Pr	f	All other program service revenue .		0	0	0	0
	g	Total. Add lines 2a–2f		7,507,951			
	3	Investment income (including divider					
		other similar amounts)		648,932	0	0	648,932
	4	Income from investment of tax-exempt	•	0	0	0	0
	5	Royalties	(ii) Personal	0	0	0	0
	6a	Gross rents 6a					
	b	Less: rental expenses 6b					
	c	Rental income or (loss) 6c	0 0				
	d	Net rental income or (loss)					
	7a	Gross amount from (i) Securities	(ii) Other				
		sales of assets					
		other than inventory 7a					
an	b	Less: cost or other basis					
evenue		and sales expenses . 7b					
	-	Gain or (loss) 7c	0 0				
Other R	_	Net gain or (loss)	· · · · •				
oth	8a	Gross income from fundraising events (not including \$ 23,923					
-		of contributions reported on line					
		1c). See Part IV, line 18 8	a 0				
	b	Less: direct expenses 8					
	с	Net income or (loss) from fundraising e	vents 🕨	-2,922		0	-2,922
	9a	Gross income from gaming					
		activities. See Part IV, line 19 . 9	a				
	b	Less: direct expenses 9					
	С	Net income or (loss) from gaming activ	ities 🕨				
	10a	Gross sales of inventory, less					
	L	returns and allowances 10					
	D C	Less: cost of goods sold		2 704	0	0	2 704
			Business Code	2,704	0	0	2,704
ŝno	11a	Incidental Revenue	710040	179,493	0	0	179,493
scellanec Revenue	b		713740	17,473		0	177,473
ella ÿvei	c						
Miscellaneous Revenue	d	All other revenue		83,500	0	0	83,500
Σ	е	Total. Add lines 11a–11d		262,993			
	12	Total revenue. See instructions .	🕨	16,474,298	7,507,951	0	911,707
							Form 990 (2020)

Part IX Statement of Functional Expenses

171,441

648,374

11,146

70,705

75,708

0

0

0

0

0

121,115

55,900

20,836

2,398

10,921

413

0

0

0

4,825

20,240

1,495

41,513

13,848

12,667

1,283,629

21

63

0

0

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX . **(D)** Fundraising Do not include amounts reported on lines 6b. 7b. (A) Total expenses (B) (C) Program service expenses Management and 8b. 9b. and 10b of Part VIII. general expenses expenses Grants and other assistance to domestic organizations 1 and domestic governments. See Part IV, line 21 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 879.002 308,486 399.075 6 Compensation not included above to disgualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . 0 0 0 7 Other salaries and wages 999,733 8,271,680 6,623,573 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 173,349 135,600 26,603 Other employee benefits 9 829,859 677,836 81,318 10 Payroll taxes 130,288 800,485 594,489 11 Fees for services (nonemployees): Management 0 0 0 а Legal 275,775 420 275,355 b С Accounting 36,000 0 36,000 d Lobbying 5,000 5,000 0 Professional fundraising services. See Part IV, line 17 е 0 Investment management fees 20,000 f 0 20,000 Other, (If line 11g amount exceeds 10% of line 25, column a (A) amount, list line 11g expenses on Schedule O.) 231,890 71,119 39,656 12 Advertising and promotion 447.322 381,994 9.428 13 Office expenses 405,910 324,818 60,256 14 Information technology 65,038 50,617 12,023 15 Royalties 0 0 0 Occupancy 53,423 16 1,348,057 1,283,713 Travel 17 2,531 1,830 288 Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 0 0 0 19 Conferences, conventions, and meetings . 37,394 26,078 6,491 20 Interest 113.086 65.011 48.075 21 Payments to affiliates 40,000 0 40,000 22 Depreciation, depletion, and amortization . 1,784,231 1,499,738 264,253 23 Insurance 77,334 232,284 153,455 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25. column (A) amount, list line 24e expenses on Schedule O.) Program Supplies and Expenses 537,013 10,177 а 485,323 ACH, Bank and Credit Card Fees 169,770 141,583 14,339 b С Temporaries 91,996 38,439 53,536 Licenses and Permits d 29.047 28,521 463 All other expenses е 232,665 140,668 79,330

17,059,384

13.038.311

2.737.444

25 Total functional expenses. Add lines 1 through 24e
 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)

Form 990 (2020)

		(A) Beginning of year		(B) End of year	
1	Cash-non-interest-bearing	3,732,998	1	2,120,835	
2	Savings and temporary cash investments	264,221	2	347,378	
3	Pledges and grants receivable, net	1,267,728	3	995,656	
4	Accounts receivable, net	510,812	4	1,199,026	
5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	.,,.	
6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B).		6		
3 7	Notes and loans receivable, net		7		
2 7 8 8 9 9	Inventories for sale or use	22,078	8	22,196	
ີ 9	Prepaid expenses and deferred charges	289,481	9	275,775	
10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 53,613,055				
b	Less: accumulated depreciation 10b 27,293,710	27,883,528	10c	26,319,345	
11	Investments – publicly traded securities	15,869,962	11	19,588,215	
12	Investments – other securities. See Part IV, line 11	179,786	12	180,363	
13	Investments – program-related. See Part IV, line 11		13		
14	Intangible assets		14		
15	Other assets. See Part IV, line 11		15		
16	Total assets. Add lines 1 through 15 (must equal line 33)	50,020,594	16	51,048,789	
17	Accounts payable and accrued expenses	1,523,850	17	1,296,920	
18	Grants payable	0	18		
19	Deferred revenue	159,543	19	170,865	
20	Tax-exempt bond liabilities	0	20		
21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21		
22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%				
2	controlled entity or family member of any of these persons		22		
ī 23	Secured mortgages and notes payable to unrelated third parties		23		
24	Unsecured notes and loans payable to unrelated third parties	4,158,331	24	2,916,667	
25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X				
06		0	25	0	
26 }	Total liabilities. Add lines 17 through 25 . . <th .<="" td=""><td>5,841,724</td><td>26</td><td>4,384,452</td></th>	<td>5,841,724</td> <td>26</td> <td>4,384,452</td>	5,841,724	26	4,384,452
	and complete lines 27, 28, 32, and 33.				
27	Net assets without donor restrictions	33,309,543	27	34,000,837	
28	Net assets with donor restrictions	10,869,327	28	12,663,500	
27 28 29 30 31 32 33	Organizations that do not follow FASB ASC 958, check here ► □ and complete lines 29 through 33.				
29	Capital stock or trust principal, or current funds		29		
30	Paid-in or capital surplus, or land, building, or equipment fund		30		
31	Retained earnings, endowment, accumulated income, or other funds		31		
32	Total net assets or fund balances	44,178,870	32	46,664,337	
33	Total liabilities and net assets/fund balances	50,020,594	33	51,048,789	

Form **990** (2020)

	0 (2020)				Pa	ige 1
Part						_
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1			16,47	
2	Total expenses (must equal Part IX, column (A), line 25)	2		-	17,05	
3	Revenue less expenses. Subtract line 2 from line 1	3			-58	5,08
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		4	14,17	8,87
5	Net unrealized gains (losses) on investments	5			3,07	0,55
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	10		4	16,66	4,33
Part	XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII			•		
					Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," et	xplain	i in 📔			
2a	Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		~
24	If "Yes," check a box below to indicate whether the financial statements for the year were con					•
	reviewed on a separate basis, consolidated basis, or both:	ipiieu				
	Separate basis Consolidated basis Both consolidated and separate basis					
h	Were the organization's financial statements audited by an independent accountant?			2b	~	
D	If "Yes," check a box below to indicate whether the financial statements for the year were audit				•	
	separate basis, consolidated basis, or both:	eu o	na			
	Separate basis, consolidated basis, or both.					
_						
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over			2c	~	
	the audit, review, or compilation of its financial statements and selection of an independent accounta			2C	V	
	If the organization changed either its oversight process or selection process during the tax year, ex Schedule O.	plain	on			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set for	th in	the			
	Single Audit Act and OMB Circular A-133?			Ba		V
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und					
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such a			3b		

Form **990** (2020)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ.

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

20 20
Open to Public
Inspection

Name of the organization

Employer identification number

11-0603801

YWCA	OF	MINNE	APOLIS

I WOA OI		41-0073071
Part I	Reason for Public Charity Status. (All organizations must complete this p	art.) See instructions.

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

- A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1
- A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 2
- 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:
- An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
- \checkmark An organization that normally receives (1) more than 33¹/₃% of its support from contributions, membership fees, and gross 10 receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box 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 а the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C.
 - Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, С 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) d that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV. Sections A and D. and Part V.
 - Check this box if the organization received a written determination from the IRS that it is a Type I. Type II. Type III. е 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) α

3		·····(·)				
(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

Part IISupport Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under
Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section	on A. Public Support		-						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total		
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")								
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf								
3	The value of services or facilities furnished by a governmental unit to the organization without charge								
4	Total. Add lines 1 through 3								
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)								
6	Public support. Subtract line 5 from line 4								
	on B. Total Support		1		1	1	1		
	dar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total		
7	Amounts from line 4								
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources								
9	Net income from unrelated business activities, whether or not the business is regularly carried on								
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)								
11	Total support. Add lines 7 through 10								
12	Gross receipts from related activities, etc.					12			
13	First 5 years. If the Form 990 is for the organization, check this box and stop here	-			-				
Secti	on C. Computation of Public Suppor								
14	Public support percentage for 2020 (line 6	-		11. column (f)		14	%		
15	Public support percentage from 2019 Sch					15	%		
16a	331/3% support test-2020. If the organi								
	box and stop here. The organization qua			-					
b	33 ¹ /3% support test—2019. If the organization this box and stop here. The organization								
17a	17a 10%-facts-and-circumstances test—2020. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization								
b	10%-facts-and-circumstances test — 20 15 is 10% or more, and if the organizatio in Part VI how the organization meets the organization	n meets the fa e facts-and-cir	acts-and-circu cumstances te	mstances test, est. The organ	, check this bo ization qualifie	ox and stop he s as a publicly	re. Explain		
18	Private foundation. If the organization of instructions								

Schedule A (Form 990 or 990-EZ) 2020

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.)

Secti	on A. Public Support			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,	
Calen	dar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and membership fees						
-	received. (Do not include any "unusual grants.")	6,553,628	5,403,865	5,125,331	7,663,445	8,054,640	32,800,909
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose	14,459,573	14,816,941	15,110,601	12,474,442	7,507,951	64,369,508
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513	75,066	67,445	84,299	12,330	0	239,140
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf	0	0	0	0	0	0
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
•		0	0	0	0	0	0
6 7a	Total. Add lines 1 through 5	21,088,267	20,288,251	20,320,231	20,150,217	15,562,591	97,409,557
/a	received from disqualified persons .	270.070	107.450	177 500	201 1 40	100 010	072 40/
L.	Amounts included on lines 2 and 3	279,078	187,458	177,509	201,149	128,212	973,406
b	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year	1,019,714	1,302,831	1,299,813	1,405,022	1,385,659	6,413,039
с	Add lines 7a and 7b	1,298,792	1,490,289	1,477,322	1,606,171	1,513,871	7,386,445
8	Public support. (Subtract line 7c from	1,2,0,1,2	1,170,207	1,111,022	1,000,111	1,010,071	7,000,110
	line 6.)						90,023,112
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9	Amounts from line 6	21,088,267	20,288,251	20,320,231	20,150,217	15,562,591	97,409,557
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources .	453,267	586,841	773,872	682,253	648,932	3,145,165
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975	0	0				0
С		453,267	586,841	773,872	682,253	648,932	3,145,165
11	Net income from unrelated business activities not included in line 10b, whether						
	or not the business is regularly carried on						0
10		0	0				0
12	Other income. Do not include gain or loss from the sale of capital assets						
	(Explain in Part VI.)	83,939	68,092	44,301	348,965	83,500	628,797
13	Total support. (Add lines 9, 10c, 11,	03,737	00,072	,501	540,705	03,500	020,177
-	and 12.)	21,625,473	20,943,184	21,138,404	21,181,435	16,295,023	101,183,519
14	First 5 years. If the Form 990 is for the						
	organization, check this box and stop he	re					🕨 🗌
Secti	on C. Computation of Public Suppor	rt Percentage	e				
15	Public support percentage for 2020 (line 8					15	88.97 %
16	Public support percentage from 2019 Sch					16	88.94 %
	on D. Computation of Investment In		-				
17	Investment income percentage for 2020 (•			3.11 %
18	Investment income percentage from 2019					18	3 %
19a	$33^{1}/_{3}\%$ support tests - 2020. If the organ						
	17 is not more than $33^{1}/_{3}\%$, check this box	-	-	-		-	
b	331 / ₃ % support tests - 2019. If the organiz						
00	line 18 is not more than 33 ¹ / ₃ %, check this I	-	-				
20	Private foundation. If the organization di	u not check a	box on line 14,	, 19a, or 19D, C			
					Sch	edule A (Form 990	or 990-EZ) 2020

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Yes No

1

2

3a

3b

3c

4a

4b

4c

5a

5b 5c

6

7

8

9a

9b

9c

10a

10b

Part IV Supporting Organizations (continued)

- 11 Has the organization accepted a gift or contribution from any of the following persons?
 - a A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?
 - **b** A family member of a person described in line 11a above?
 - c A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.

Section B. Type I Supporting Organizations

- 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
- 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.

Section C. Type II Supporting Organizations

1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).

Section D. All Type III Supporting Organizations

- 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 1 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).
- 3 By reason of the relationship described in line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.

Section E. Type III Functionally Integrated Supporting Organizations

- Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). 1
- а The organization satisfied the Activities Test. Complete **line 2** below.
- The organization is the parent of each of its supported organizations. *Complete line 3 below.* b
- С The organization supported a governmental entity. Describe in **Part VI** how you supported a governmental entity (see instructions). Yes No
- 2 Activities Test. Answer lines 2a and 2b below.
- Did substantially all of the organization's activities during the tax year directly further the exempt purposes of а 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.
- b Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.
- Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each b of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

2a

2b

3a

3b

Yes No

11a

11b

11c



Yes No



1

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

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

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		
	Discount claimed for blockage or other factors			
е	(explain in detail in Part VI):	1e		
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C-Distributable Amount	•		Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the ergenization's first as a neg function		ntograted Type III auppe	rting organization

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990 or 990-EZ) 2020

Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Organi	zations (continue	d)	
	on D-Distributions	, oupporting organi			Current Year
1	Amounts paid to supported organizations to accomplish e	exempt purposes		1	
2	Amounts paid to perform activity that directly furthers exe	mpt purposes of suppo	rted		
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	3	
4	Amounts paid to acquire exempt-use assets		4		
_ 5	Qualified set-aside amounts (prior IRS approval required-	5			
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which (provide details in Part VI). See instructions.	h the organization is res	ponsive	8	
9	,			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2020	าร	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020 (reasonable cause required – <i>explain in Part VI</i>). See instructions.				
3	Excess distributions carryover, if any, to 2020				
а	From 2015				
b	From 2016				
с	From 2017				
d	From 2018				
е	From 2019				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2020 distributable amount				
i	Carryover from 2015 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2020 from Section D, line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2020 distributable amount				
C	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI.</i> See instructions.				
6	Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.				
7	Excess distributions carryover to 2021. Add lines 3j and 4c.				
8	Breakdown of line 7:				
а	Excess from 2016				
b	Excess from 2017				
C	Excess from 2018				
d	Excess from 2019				
e	Excess from 2020				

Schedule A (Form 990 or 990-EZ) 2020

Page 8

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

Schedule A, Part III, Line 12 - Revenue from reimbursement of unemployment insurance and other miscellaneous sources. -----

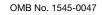
Schedule B	
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(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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



2020

Employer identification number 41-0693891

YWCA	OF	MINNEAPOL	IS

Organization type (check one):

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

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

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

General Rule

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

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

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

Employer identification number

YWCA OF MINNEAPOLIS

Name of organization

41-0693891 Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a)	<i>(</i> h)		(4)
(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
		\$ <u>240,000</u>	PersonImage: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$\$_225,040	PersonImage: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$\$	PersonPayrollDoncashNoncash(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$\$	PersonPayrollNoncash(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$\$	PersonPayrollNoncash(Complete Part II for noncash contributions.)

Employer identification number 41-0693891

Page

YWCA OF MINNEAPOLIS

Part II No

Name of organization

Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

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

Schedule B (F	Form 990, 990-EZ, or 990-PF) (2020)				Page	of	of Part III	
Name of org	anization				Employer ide	entificat	tion number	
YWCA OF I	MINNEAPOLIS				41	-069389	91	
Part III	Exclusively religious, charitable, e (10) that total more than \$1,000 fo the following line entry. For organiza contributions of \$1,000 or less for t	or the year from any ations completing Pa he year. (Enter this ir	one contributor. Art III, enter the tota Information once. So	Complete I of <i>exclus</i>	columns (a) <i>ively</i> religious	throug	h (e) and	
	Use duplicate copies of Part III if ad	ditional space is nee	eded.					
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) De	scription of h	now gif	t is held	
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee							
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) De	scription of h	now gif	t is held	
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee						e	
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) De	scription of h	now gif	t is held	
_	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of t				nsferor to tra	nsferee	9	
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) De	scription of h	now gif	it is held	
-	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee							
				Schedule	e B (Form 990, 99	90-EZ, oi	r 990-PF) (2020)	

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

Department of the Treasury Internal Revenue Service Complete if the organization is described below.
 Attach to Form 990 or Form 990-EZ.
 Go to www.irs.gov/Form990 for instructions and the latest information.

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

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

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

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

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

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

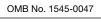
Name o	of organization	Employer id	lentificati	ion number	
YWCA	OF MINNEAPOLIS		41-069	93891	
Part	I-A Complete if the organization is exempt under section 501(c) or is a section 501(c) or i	ection 52	7 organ	ization.	
1	Provide a description of the organization's direct and indirect political campaign actidefinition of "political campaign activities")	vities in Pa	art IV. (S	See instruc	tions for
2	Political campaign activity expenditures (See instructions)	🕨	\$		
3	Volunteer hours for political campaign activities (See instructions)				
Part	I-B Complete if the organization is exempt under section 501(c)(3).				
1	Enter the amount of any excise tax incurred by the organization under section 4955 .				
2	Enter the amount of any excise tax incurred by organization managers under section 495	5	\$		
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?			Yes	No No
4a	Was a correction made?			Yes	No No
b	If "Yes," describe in Part IV.				
Part	I-C Complete if the organization is exempt under section 501(c), except	section 5	01(c)(3).		
1	Enter the amount directly expended by the filing organization for section 527 exemp	t function			
	activities	🕨	\$		
2	Enter the amount of the filing organization's funds contributed to other organizations for	or section			
	527 exempt function activities	🕨	\$		
3	Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1 line 17b		\$		
4	Did the filing organization file Form 1120-POL for this year?			Yes	No
5	Enter the names, addresses and employer identification number (EIN) of all section 527 p organization made payments. For each organization listed, enter the amount paid from th	0			0

the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

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

Schedule C (Form 990 or 990-EZ) 2020





Pa	art I	I-A	Complete if the organization section 501(h)).	is exempt under section 501(c)(3) and filed	d Form 5768 (elec	tion under
Α	Che	eck 🕨		s to an affiliated group (and list in Part IV each affi	liated group membe	r's name,
			-	hare of excess lobbying expenditures).		
В	Che	eck 🕨	if the filing organization checke	ed box A and "limited control" provisions apply.		
				ving Expenditures ans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
	la	Total lo	bbying expenditures to influence	oublic opinion (grassroots lobbying)	0	
	b	Total lo	bbying expenditures to influence a	a legislative body (direct lobbying)	5,000	
	с	Total lo	bbying expenditures (add lines 1a	and 1b)	5,000	
	d	d Other exempt purpose expenditures			17,054,384	
	е				17,059,384	
	f	f Lobbying nontaxable amount. Enter the amount from the following table in both				
		columr	IS.		1,000,000	
		If the ar	nount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
		Not ove	r \$500,000	20% of the amount on line 1e.		
		Over \$5	00,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
		Over \$1	,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
		Over \$1	,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
		Over \$1	7,000,000	\$1,000,000.		
	g	Grassr	oots nontaxable amount (enter 259	% of line 1f)	250,000	
	h	Subtra	ct line 1g from line 1a. If zero or les	ss, enter -0	0	
	i	Subtra	ct line 1f from line 1c. If zero or les	s, enter -0	0	
	j		e is an amount other than zero on section 4911 tax for this vear?	on either line 1h or line 1i, did the organization		Yes No

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobby	Lobbying Expenditures During 4-Year Averaging Period								
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) Total				
2a Lobbying nontaxable amount	1,000,000	1,000,000	950,097	1,000,000	3,950,097				
 b Lobbying ceiling amount (150% of line 2a, column (e)) 					5,925,146				
c Total lobbying expenditures	28,478	44,959	25,498	5,000	103,935				
d Grassroots nontaxable amount	250,000	250,000	237,524	250,000	987,524				
e Grassroots ceiling amount (150% of line 2d, column (e))					1,481,286				
f Grassroots lobbying expenditures	6,278	0	0	0	6,278				

Schedule C (Form 990 or 990-EZ) 2020

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

For e	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed	(8	I)		(b)	
	iption of the lobbying activity.	Yes	No	Am	nount	
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
С	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
ĥ	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
i	Total. Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912		-			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part)(5), c	or sec	ction		
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
_						

2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3

	e 3, is
1	on A, line

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

Part IV Supplemental Information

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

SCHEDULE D (Form 990)

Supplemental Financial Statements

20 to Public ction

0

OMB No. 1545-0047

•			anization answered "Yes" on Form 990,		2020
	nent of the Treasury Revenue Service	▶.), 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b Attach to Form 990. 190 for instructions and the latest informa		Open to Public Inspection
	of the organization				er identification number
YWCA		LIS			41-0693891
Par	t Organ	izations Maintaining Donor Advi	sed Funds or Other Similar Fund	is or Ac	counts.
	Compl	ete if the organization answered "	Yes" on Form 990, Part IV, line 6.		
			(a) Donor advised funds	(b) Funds and other accounts
1		at end of year			
2		ue of contributions to (during year) .			
3		ue of grants from (during year)			
4		ue at end of year			
5	funds are the	organization's property, subject to the	advisors in writing that the assets he organization's exclusive legal control	?	🗌 Yes 🗌 No
6	only for charit	able purposes and not for the benefit	nd donor advisors in writing that grant t of the donor or donor advisor, or for	r any otł	her purpose
Par	<u> </u>	rvation Easements.			
r ar		ete if the organization answered "	Yes" on Form 990, Part IV, line 7.		
1		conservation easements held by the o			
	PreservationProtection	n of land for public use (for example, recreat of natural habitat on of open space	ation or education)		rically important land area ied historic structure
2			d a qualified conservation contributior	in the f	orm of a conservation
2	easement on	the last day of the tax year.			Held at the End of the Tax Year
а					la
b	-	-			2b
c			storic structure included in (a)		2c
d	historic struct	ure listed in the National Register .	c) acquired after 7/25/06, and not o	· 2	d
3	tax year ►		ferred, released, extinguished, or term	ninated k	by the organization during the
4		ates where property subject to conserv			
5	-	anization have a written policy regaind a second termination of the conservation eas	arding the periodic monitoring, insp ements it holds?		handling of Yes No
6	Staff and volun ►	teer hours devoted to monitoring, inspec	ting, handling of violations, and enforcing	conserv	ation easements during the year
7	Amount of exp ►\$	enses incurred in monitoring, inspecting	g, handling of violations, and enforcing c	conserva	tion easements during the year
8	Does each con and section 17	•	2(d) above satisfy the requirements of s		
9	balance sheet	, and include, if applicable, the text of	onservation easements in its revenue a the footnote to the organization's fina	•	
Dord	-	accounting for conservation easemer		Othor C	timilar Acceto
Part		ete if the organization answered "	of Art, Historical Treasures, or (Yes" on Form 990, Part IV, line 8.	Juner 3	imilar Assets.
1 a	of art, historio	cal treasures, or other similar assets	B ASC 958, not to report in its revenu held for public exhibition, education, o its financial statements that describe	or rese	earch in furtherance of public
b	art, historical t provide the fo (i) Revenue in	treasures, or other similar assets held llowing amounts relating to these item ncluded on Form 990, Part VIII, line 1		earch in	furtherance of public service, . ► \$
	(II) Assets Incl	uded in Form 990, Part X		• •	. ▶ \$

-----If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the 2 following amounts required to be reported under FASB ASC 958 relating to these items: - included on Fo 000 Dort VIII lin . • Б

а	Revenue included on Form 990, Part VIII, line 1	•	•	•	•	•	•	•	•	•	•	•	• •	•	•	•	·	\$
b	Assets included in Form 990, Part X																	\$

-	e D (Form 990) 2020						Page 2
Part	III Organizations Maintaining	Collections of A	Art, Historica	I Treasures	s, or O	ther Similar Ass	sets (continued)
3	Using the organization's acquisition, a collection items (check all that apply):		ner records, ch	eck any of th	ne follov	wing that make sig	gnificant use of its
а	Public exhibition		d 🗌 Loa	n or exchang	ge progi	ram	
b	Scholarly research		e 🗌 Oth				
с	Preservation for future generations						
4	Provide a description of the organizat		and explain how	v they further	r the org	ganization's exem	pt purpose in Part
5	During the year, did the organization assets to be sold to raise funds rather						□ Yes □ No
Part							
	Complete if the organization 990, Part X, line 21.	answered "Yes'	' on Form 990	, Part IV, lin	e 9, or	reported an am	ount on Form
1a	Is the organization an agent, trustee,	custodian or oth	-			r other assets not	Yes 🗌 No
b	If "Yes," explain the arrangement in Pa	art XIII and comple	ete the following	a table:			
						An	nount
с	Beginning balance				10	;	
d	Additions during the year				10	ł	
е	Distributions during the year				16	•	
f	Ending balance				11	F	
2a	Did the organization include an amour	nt on Form 990, Pa	art X, line 21, fo	r escrow or c	ustodia	I account liability?	' 🗌 Yes 🗌 No
b	If "Yes," explain the arrangement in Pa	art XIII. Check here	e if the explana	tion has beer	n provid	ed on Part XIII .	🗌
Par							
	Complete if the organization		' on Form 990			1	
		(a) Current year	(b) Prior year	(c) Two yea	ars back	(d) Three years back	(e) Four years back
1a	Beginning of year balance	14,847,565	9,303,3	32 9,	051,195	8,573,320	13,418,167
b	Contributions	49,500	5,502,7	26	40,348	70,018	174,198
С	Net investment earnings, gains, and losses	3,412,226	514,2	00	613,321	821,661	1,223,492
d	Grants or scholarships	0		0	0	0	0
е	Other expenditures for facilities and						
	programs	584,671	459,6	00	387,727	397,783	6,222,421
f	Administrative expenses	18,543	13,0	93	13,805	16,021	20,116
g	End of year balance	17,706,077	14,847,5	55 9,	303,332	9,051,195	
2	Provide the estimated percentage of t	he current year en	d balance (line	1g, column (a	a)) held	as:	•
а	Board designated or quasi-endowmer	nt 🕨 🛛 45	%				
b	Permanent endowment 🕨	13 %					
С	Term endowment ► 42 %						
	The percentages on lines 2a, 2b, and	2c should equal 10	00%.				
3a	Are there endowment funds not in the	e possession of th	e organization	that are held	and ad	Iministered for the)
	organization by:		-				Yes No
	(i) Unrelated organizations						3a(i) 🖌
	(ii) Related organizations						3a(ii) 🖌 🗸
b	If "Yes" on line 3a(ii), are the related of	rganizations listed	as required on	Schedule R?	·		3b
4	Describe in Part XIII the intended uses		n's endowmen	t funds.			
Part							
	Complete if the organization	answered "Yes'	' on Form 990	, Part IV, lin	e 11a.	See Form 990, I	Part X, line 10.
	Description of property	(a) Cost or otl (investme		st or other basis (other)		Accumulated epreciation	(d) Book value
1a	Land		0	2,958,974			2,958,974
b	Buildings		0	41,668,622		20,723,334	20,945,288
с	Leasehold improvements		0	0		0	0
d	Equipment		0	8,976,755		6,570,376	2,406,379
e	Other		0	8,704		0	8,704
Total.	Add lines 1a through 1e. (Column (d) n	nust equal Form 99	90, Part X, colu	mn (B), line 1	0c.) .		26,319,345

Schedule D (Form 990) 2020

	Complete if the organization answered "Yes" on Form 990, Part I			
	(a) Description of security or category (including name of security)	(b) Book value		thod of valuation: d-of-year market value
(1) Financial	derivatives			-
	eld equity interests			
(B)				
(F)				
(H) Total (Colu	mn (b) must equal Form 990, Part X, col. (B) line 12.) . ►			
Part VIII	Investments – Program Related.			
	Complete if the organization answered "Yes" on Form 990, Part I	V line 11c See F	orm 990	Part X line 13
	(a) Description of investment	(b) Book value		thod of valuation:
		(2) 20011 14140		d-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
<u>(9)</u>				
Part IX	mn (b) must equal Form 990, Part X, col. (B) line 13.) . Other Assets.			
Partix	Complete if the organization answered "Yes" on Form 990, Part I	V line 11d See F	orm 000	Part X line 15
	(a) Description	v, inte i iu. See i	0111 330,	(b) Book value
(1)	(4) 2000 (2001			(2) 2001 1440
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, col. (B) line 15.)			
Part X	Other Liabilities.		0 · · · F · · · ·	
	Complete if the organization answered "Yes" on Form 990, Part I	v, line 11e or 11f.	See Form	1 990, Part X,
1.	line 25. (a) Description of liability			
(1) Federal in				(b) Book value
				U
(2)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, col. (B) line 25.)			0

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

	e D (Form 990) 2020				Page 4
Part	•			Return.	
	Complete if the organization answered "Yes" on Form 990, I	Part l'	V, line 12a.		
1	Total revenue, gains, and other support per audited financial statements			1	20,590,246
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	3,070,553		
b	Donated services and use of facilities	2b	1,040,394		
С	Recoveries of prior year grants	2c	0		
d	Other (Describe in Part XIII.)	2d	0		
е	Add lines 2a through 2d			2e	4,110,947
3	Subtract line 2e from line 1	· ·		3	16,479,299
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	0		
b	Other (Describe in Part XIII.)	4b	-5,001		
С	Add lines 4a and 4b			4c	-5,001
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	16,474,298
Part				r Return).
	Complete if the organization answered "Yes" on Form 990, I	Part l'	V, line 12a.		
1	Total expenses and losses per audited financial statements			1	18,104,779
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	1,040,394		
b	Prior year adjustments	2b	0		
С	Other losses	2c	0		
d	Other (Describe in Part XIII.)	2d	5,001		
е	Add lines 2a through 2d			2e	1,045,395
3	Subtract line 2e from line 1	· ·		3	17,059,384
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	0		
b	Other (Describe in Part XIII.)	4b	0		
С	Add lines 4a and 4b			4c	0
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line	ə 18.)		5	17,059,384
Part					
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and				
	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part $% \left({\left[{{{\rm{A}}} \right]_{\rm{A}}} \right)_{\rm{A}}} \right)$	-	-		
	ule D, Part V, Line 4 - The Board of Directors annually approves an appropriati		*		
	ment income to current operations. Of the total endowment balance of \$17,706				
	ned by the spending policy approved annually by the Board. \$7,110,269 is mad	e up o	of market growth derive	d from the	e permanent
endow	ment corpus of \$2,349,935.				
	ule D, Part X, Line 2 - YWCA is classified as a tax-exempt organization under S				
	n 509(a)(2) of the Internal Revenue Code, and is subject to federal and state in				
	ial Accounting Standards Board (FASB) Accounting Standards Codification (A				
	n uncertain tax position may be recognized when it is more likely than not tha				
	ing resolutions of any related appeals or litigation processes, based on the tec				
	han not recognition threshold to be recognized. This interpretation also provide				
	ication, interest and penalties, accounting in interim periods, disclosure, and	ransit	ion. YWCA recorded no	o liabilities	in 2021 and
2020 f	or unrecognized tax positions.				
	ule D, Part XI, Line 4b - Circle of Women expenses moved to net against reven	ue - \$2	2,922. Cost of goods so	ld expens	es netted
agains	t revenue - \$2,079.				
	ule D, Part XII, Line 2d - Circle of Women expenses moved to net against rever	nue = \$	2,922. Cost of goods s	old net ag	ainst revenue =
\$2,079	·				

SCHEDULE G Form 990 or 990-E Department of the Treasu	Z) Complete in	f the organization a organization ent	nswered "Yes	" on Form 990 n \$15,000 on	aising or Gam), Part IV, line 17, 18, Form 990-EZ, line 6a. 990-EZ.	or 19, or if the	OMB No. 1545-0047
ternal Revenue Service	· •	Go to www.irs.gov	/Form990 for i	nstructions a	nd the latest informa		Open to Public Inspection
lame of the organization						Employer identifi	
WCA OF MINNEAP		<u> </u>					-0693891
	aising Activities . 990-EZ filers are i				vered "Yes" on	Form 990, Part IV,	line 17.
		•		•	wing optivition (heck all that apply.	
a 🗌 Mail solid	0		e		on of non-govern		
	and email solicitatio	ons	f		on of governmen	•	
	olicitations		a [undraising events	0	
d 🗌 In-perso	n solicitations		5 -		J		
2a Did the orga	nization have a wri	tten or oral agre	ement with	any individ	lual (including offi	cers, directors, trus	tees,
or key emplo	oyees listed in Form	n 990, Part VII) c	or entity in c	onnection v	with professional	fundraising services	? 🗌 Yes 🗌 No
				draisers) pu	rsuant to agreen	nents under which th	ne fundraiser is to b
compensate	ed at least \$5,000 b	y the organization	on.				
	dress of individual fundraiser)	(ii) Activity	custody c	draiser have or control of outions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
			Yes	No			
1							
2							
3							
4							
5							
5							
6							
·							
7							
8							
9							
10							
10							+
10							
10 				►			

5

6

7

8

Other direct expenses

Volunteer labor .

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

			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			Circle of Women			(add col. (a) through
			(event type)	(event type)	(total number)	col. (c))
ne						
Revenue	1	Gross receipts	26,845			26,845
ВĢ						
	2	Less: Contributions	0			0
	3	Gross income (line 1 minus				
		line 2)	26,845			26,845
	4	Cash prizes	0			0
	5	Noncash prizes	0			0
S						
Ise	6	Rent/facility costs	0			0
Direct Expenses						
Щ	7	Food and beverages	0		0	0
ŝct						
Dire	8	Entertainment	0		0	0
	9	Other direct expenses .	2,922			2,922
	10	Direct expense summary. Ac	5		4	2,922
	11	Net income summary. Subtra	act line 10 from line 3, c	olumn (d)	<u> </u>	23,923
Pa	rt III	Gaming. Complete if th		ered "Yes" on Form S	990, Part IV, line 19,	or reported more than
	-	\$15,000 on Form 990-E2	z, iine ba.			
ne			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c)
/en				biligo/progressive biligo		
Revenue						
	1	Gross revenue				
ses	2	Cash prizes				
Direct Expenses	^	Nonooob prizes				
Ä	3	Noncash prizes				
ct		Dept/feeility/esste				
Dire	4	Rent/facility costs				
	1		1	1	1	

а	Enter the state(s) in which the organization conducts gaming activities:	☐ Yes	No
	Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? . If "Yes," explain:	☐ Yes	□ No

Yes

No

%

Yes

No

%

Yes

 \square No

Direct expense summary. Add lines 2 through 5 in column (d)

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

%

►

►

Schedu	lle G (Form 990 or 990-EZ) 2020 Page 3
11	Does the organization conduct gaming activities with nonmembers?
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?
13	Indicate the percentage of gaming activity conducted in:
а	The organization's facility
b	An outside facility
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:
	Name ►
	Address ►
15a	Does the organization have a contract with a third party from whom the organization receives gaming
iou	revenue?
b	name and the second
	amount of gaming revenue retained by the third party ► \$
с	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:
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or
	spent in the organization's own exempt activities during the tax year ► \$
Part	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

Schedule G (Form 990 or 990-EZ) 2020

SCHEDULE J		Compensation Information				OMB No. 1545-0047			
(Form 990)		For certain Officers, Dire	ctors, Trustees, Key Employees, and Hi mpensated Employees	ghest	20	20			
		Complete if the organization	on answered "Yes" on Form 990, Part IV	/, line 23.	Open to				
Department of Internal Rever	f the Treasury	ne Treasury				ectior			
Name of the		Ŭ		Employer identification					
	MINNEAPOI			41-0	693891				
Part I	Questio	ns Regarding Compensation							
	ack the ener	versists bey/en) if the exercited are	wided any of the following to as for a	naraan liatad an Fr		Yes	No		
			ovided any of the following to or for a rovide any relevant information regardir						
		or charter travel	Housing allowance or residence 1	•					
	Travel for co		Payments for business use of per						
	Tax indemn	ification and gross-up payments	Health or social club dues or initia	ation fees					
	Discretional	y spending account	Personal services (such as maid,	chauffeur, chef)					
h ir	<i>.</i>								
			ne organization follow a written polic penses described above? If "No,"						
					. 1b				
					1.0				
			r to reimbursing or allowing expe						
		-	D/Executive Director, regarding the it	ems checked on I					
18	?				· 2				
3 Inc	licate which	if any of the following the organiza	tion used to establish the compensati	on of the					
			hat apply. Do not check any boxes for		a				
			he CEO/Executive Director, but expla						
		ion committee	 Written employment contract 						
		t compensation consultant	Compensation survey or study						
	Form 990 o	f other organizations	Approval by the board or comper	nsation committee					
4 Du	ring the vea	r, did any person listed on Form 990	, Part VII, Section A, line 1a, with resp	ect to the filing					
		a related organization:							
a Re	ceive a seve	erance payment or change-of-contro	I payment?		. 4a		~		
			ntal nonqualified retirement plan? .				~		
							~		
lt "	Yes" to any	of lines 4a–c, list the persons and pi	rovide the applicable amounts for eac	h item in Part III.					
On	ly section !	501(c)(3), 501(c)(4), and 501(c)(29) o	rganizations must complete lines 5	-9.					
			ion A, line 1a, did the organization		any				
CO	mpensation	contingent on the revenues of:							
							~		
					. 5b		~		
IT .	Yes" on line	5a or 5b, describe in Part III.							
6 Fo	r persons l	sted on Form 990, Part VII. Sect	ion A, line 1a, did the organizatior	pay or accrue a	any				
		contingent on the net earnings of:							
	0						~		
					. 6b		~		
lf "	Yes" on line	6a or 6b, describe in Part III.							
7 Fo	r persons li	sted on Form 990. Part VII Section	on A, line 1a, did the organization p	provide any nonfiv	xed				
			describe in Part III				~		
	-		paid or accrued pursuant to a contra						
to	the initial	contract exception described in	Regulations section 53.4958-4(a)(3)	? If "Yes," descr	ribe				
in l	Part III				. 8		~		
9 lf '	"Vee" oo lii	a 8 did the organization also fol	low the rebuttable presumption pro	ocdure deceribed					
	-				, .	1	i .		

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

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

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

		(B) Breakdown of W-2 and/or 1099-MISC compensation						
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	in column (B) reported as deferred on prior Form 990
Michelle Basham, Chief	(i)	212,982	0	6,193	0	0	219,175	
Executive Officer	(ii)	0	0	0	0	0	0	
Kari Clark, Chief Development	(i)	166,211	0	244	4,986	0	171,441	172,899
2 Officer	(ii)	0	0	0	0	0	0	
Ramya Rauf, Chief Financial	(i)	166,370	0	8,550	4,980	0	179,900	159,734
Officer	(ii)	0	0	0	0	0	0	
	(i)							
4	(ii)							
	(i)							
5	(ii)							
	(i)							
6	(ii)							
	(i)							
7	(ii)							
	(i)							
8	(ii)							
	(i)							
9	(ii)							
	(i)							
10	(ii)							
	(i)							
11	(ii)							
	(i)							
12	(ii)							
	(i)							
13	(ii)							
	(i)							
14	(ii)							
	(i)							
_15	(ii)							
	(i)							
16	(ii)							

Schedule J (Form 990) 2020

Part III Supplemental Information

Provide the information, explanation, 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 information.

SCHEDULE O (Form 990 or 990-EZ)

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.



Internal Revenue Service Name of the organization

Department of the Treasury

YWCA OF MINNEAPOLIS

Employer identification number

41-0693891

Form 990, Part VI, Section A, Line 6 - Any woman or girl, twelve years of age or over, may become a member upon payment of dues. All members, fifteen years of age or over, may vote. As at June 30 2021, the annual requirement for dues was a contribution of \$35.

Form 990, Part VI, Section B, Line 11b - The Form 990 is first prepared and reviewed by the Business Office staff, who review and confirm all facts and figures. Subsequent to the staff review, Form 990 is provided to the Finance and Audit Committee. The Finance and Audit reviews and approves the contents of the Form 990 and and recommends the approval of the Form to the full Board. The Business Office staff then conduct two webinars to all Board members to review and answer any questions before the Board meeting. The 990 and Minnesota Charitable Organization Annual Report, approved by the full Board, is filed with the IRS and state of Minnesota, and a copy is posted on the organization's website.

Form 990, Part VI, Section B, Line 12c - Board members are required to complete disclosures of potential conflicts of interest upon being elected, and annually. The key employees of the organization are also required to disclose potential conflicts of interest annually. The CFO reviews these disclosures and advises the CEO and Board Chair of potential conflicts of interest. In matters where a potential conflict of interest is identified, the Board is notified and the individual with the conflict of interest is recused from deliberations or voting on those matters.

Form 990, Part VI, Section B, Line 15 - The CEO's performance is reviewed and compensation is set annually by the Board of Directors. The CEO prepares a self-assessment including performance to annual goals. The Board Chair meets with the CEO's direct reports, and solicits evaluations from all Board Members, summarizes all comments and prepares a confidential report to the Board. The Board Chair leads a discussion with the Board Members on the CEO's performance rating, performance feedback, and any proposed compensation action with no staff or CEO present for the discussion. Before compensation is set, a survey of compensation of comparable organizations and positions is reviewed. The Board Chair and CEO meet to discuss the performance review and compensation actions, if any, are provided to Human Resources for action.

Form 990, Part VI, Section C, Line 19 - The YWCA makes its Audited Financial Statements, Annual Report, and Form 990 available to the public on its website.

Form 990, Part VIII, Line 1f - On May 4, 2020 the Organization received proceeds in the amount of \$2,455,891 to fund payroll, rent, utilities, and interest on mortgages and existing debt through the Paycheck Protection Program (the "PPP Loan"). The PPP Ioan may be forgiven by the U.S. Small Business Administration (SBA) subject to certain performance barriers, as outlined in the Ioan agreement and the CARES Act. Therefore, the Organization has classified this Ioan as a conditional contribution for accounting purposes. The Organization recognized \$1,038,502 and \$1,417,389 of Paycheck Protection Program Forgivable Loan revenue related to this agreement during the years ended June 30, 2021 and 2020, respectively, which represents the portion of the PPP Ioan funds for which the performance barriers have been met. The SBA has not formally forgiven any portion of the Organization's obligation under this PPP Ioan. Payment of principal and interest is deferred until the date on which the amount of forgiveness is remitted to the lender or, if the organization fails to apply for forgiveness within 10 months after the covered period, then payment of principal and interest shall begin on that date. If the SBA determines that a portion of the PPP Ioan proceeds will not be forgiven, the Organization would be obligated to repay those funds to the SBA at an interest rate of 1% over a period of two years, with payments deferred for up to six months. YWCA submitted to the SBA the Ioan forgiveness application in August 2021. The SBA may review funding eligibility and usage of funds for compliance with program requirements based on dollar thresholds and other factors. The amount of liability, if any, from potential noncompliance cannot be determined with certainty, however, management is of the opinion that any review will not have a material adverse impact on the organization's financial position.

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

Cat No 51056K

Schedule O, Statement 1

Form: Form 990 (2020)

Page: 2

Second Program Service Accomplishments Description

YWCA OF MINNEAPOLIS

EIN: 41-0693891

Part III, Line 4b

Description

for pursuing a career in early childhood education. This training opportunity provides a professional career pathway for successful participants - all live in low-income households, 80 percent identify as people of color, most will be working to enter or re-enter the workforce and many are single mothers.

Form: Form 990 (2020)

Page: 2

YWCA OF MINNEAPOLIS

EIN: 41-0693891

Part III, Line 4d

Activity Code	Description	Expense	Grants	Revenue
Code	RACIAL JUSTICE AND PUBLIC POLICY: The Racial Justice and Public Policy program engages, connects and leads the community in eliminating racism. Creating space for meaningful and open dialogue about racism and privilege is the critical first step to building an equitable and inclusive community. Throughout the year, we motivated and empowered people through public forums, community dialogues, workshops and trainings to understand racism and privilege and take action to end racism in their communities, where they work and live. In October 2020, 1,000 people attended the 18th annual It's Time to Talk: Forums on RaceTM. Inspired by the keynote presentation, attendees engaged in facilitated dialogues about equity and inclusion at their table, leaving the event inspired. Throughout 2020-2021, 1450 people attended the It's Time to Act!TM forum series empowering participants to engage in deeper conversations around race, equity, faith and social justice issues and create plans to take action in their communities. YWCA Minneapolis believes everyone has a role to play in shaping public policy. Ground-breaking, culturally competent advocacy strategies mobilized 2,000+ people to become informed, register to vote, become election judges and take action to create change in their community in 2020-21. YWCA's legislative priority has been to improve equity and access to high-quality early childhood education and afterschool girls and youth programs for all Minnesota children. Throughout 2020-21, YWCA advocated for this agenda educating and organizing program participants,	586,189		727,867

Total:

586,189

727,867

0