Form **990**

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Open to Public

▶ Do not enter social security numbers on this form as it may be made public.
▶ Information about Form 990 and its instructions is at www.irs.gov/form990. Department of the Treasury Internal Revenue Service Inspection For the 2015 calendar year, or tax year beginning , 2015, and ending D Employer identification number Check if applicable: 84-1532028 Address change Colorado Youth Corps Association 1640 Grant Street #210 E Telephone number Name change Denver, CO 80203 Initial return 303-863-0600 Final return/terminated 3,590,247. G Gross receipts \$ Amended return F Name and address of principal officer: Peter Smith H(a) Is this a group return for subordinates? Application pending H(b) Are all subordinates included?
If 'No,' attach a list. (see instructions) Same As C Above Tax-exempt status 4947(a)(1) or 527 X 501(c)(3) 501(c) () ◄ (insert no.) Website: ► H(c) Group exemption number ▶ www.cyca.org X Corporation L Year of formation: 1999 M State of legal domicile: CO Form of organization: Other * Association Part | Summary Briefly describe the organization's mission or most significant activities: CYCA's mission is to advance the Colorado youth conservation corps movement Activities & Governance if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a)..... Number of independent voting members of the governing body (Part VI, line 1b)..... 4 Total number of individuals employed in calendar year 2015 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary)..... 6 7a Total unrelated business revenue from Part VIII, column (C), line 12...... b Net unrelated business taxable income from Form 990-T, line 34. Prior Year **Current Year** 8 Contributions and grants (Part VIII, line 1h)..... 2,223,984 3,395,911. Revenue Program service revenue (Part VIII, line 2g)..... 193,051. 84,781 Investment income (Part VIII, column (A), lines 3, 4, and 7d).... 640 1,285. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)..... 11 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)..... 2,309,405 12 3,590,247. Grants and similar amounts paid (Part IX, column (A), lines 1-3)..... 3,200,000. 1,918,002 Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)..... 182,419 207,703. 16a Professional fundraising fees (Part IX, column (A), line 11e)..... b Total fundraising expenses (Part IX, column (D), line 25) ▶ Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)..... 170,328. 200,362 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)...... 2,300,783 3,578,031. Revenue less expenses. Subtract line 18 from line 12..... 8,622 12,216. Beginning of Current Year End of Year 419,763 503,361. Total liabilities (Part X, line 26)..... 21 134,524 205,906. Net assets or fund balances. Subtract line 21 from line 20..... 285,239 297,455. Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sian Here Jim Corlett Secretary/Treas print name and title. Print/Type preparer's name Preparer's signature Date James M Davis self-employed P00290880 James M Davis Paid Preparer Davis & Co., CPAs, P.C. Firm's name

▶ 9457 S. University Blvd.

Highlands Ranch, CO 80126

May the IRS discuss this return with the preparer shown above? (see instructions)......

Use Only

Firm's address

Firm's EIN * 84-1184234

(303) 791-6800

Phone no.

Form	990 (2015) Colorado Youth Corps Association 84-153202	28	Page 2
Pai	t III Statement of Program Service Accomplishments	AND DESCRIPTION OF THE PROPERTY OF THE PROPERT	r
#SSection state	Check if Schedule O contains a response or note to any line in this Part III		<u> </u>
1	Briefly describe the organization's mission:		
	CYCA's mission is to advance the Colorado youth conservation corps movement		
	Like and gaily viry min to the page for this are trip viry to the this are trip viry to the this to the trip and trip and the trip and trip and the trip and the trip and tri		
2	Did the organization undertake any significant program services during the year which were not listed on the prior	5	
	Form 990 or 990-EZ?	Yes X	No
	If 'Yes,' describe these new services on Schedule O,	53	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X	No
_	If 'Yes,' describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as measure Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the and revenue, if any, for each program service reported.	ed by expe total exper	nses. ises,
	(Code:) (Expenses \$ 2,297,984, including grants of \$ 2,119,462.) (Revenue \$	146,0	119)
** (3	Corps support and project management:	140,0	147.
	1) Supported statewide youth corps participation of 1,450 youth at 10 indep	nendent	lv
	operating regional youth conservation corps;	Middie	<u></u>
	2) Provided land managers with 205 crew weeks of work throughout the state;		
	3) Coordinated \$1,480,679 in statewide fee-for-service contracts with published		 s
	managers;		
	4) Enrolled 51 interns, who completed 28,130 hours of work directed by publ	lic lan	
	managers with the goal of providing opportunities for careers in natural re-		
	management. Of these interns, 31 were entnically diverse or considered		
	non-traditional candidates, including US Armed Services veterans.		
	Under \$745 and \$250 thing have \$100 hand \$0.000 \$1.		
4 b	(Code:) (Expenses \$ 1,097,286. including grants of \$ 1,080,538.) (Revenue \$)
	Americorps fixed award program - inception of 1/1/2015		
	1) Youth and Veterans for Colorado Education Awards Program. Coordinated th	ne	
	provision of \$509,422 in education awards for 291 qualifying corps members		
	people and military veterans). Awards paid out by the Corporation for Natio	onal &	
	Community Service, based on administration provided by the association.		,
	2) Through same program, the association paid (through it's 5 participating		
	regional youth corps) \$1,080,538 in environmental work project stipends to 3	326_cor	ps
	members.		
4 c	(Code:) (Expenses \$94,964, including grants of \$) (Revenue \$	47,(<u>)32.</u>)
	Technical assistance:		
	1) Convened Corps Directors, Program Managers, project partners, and other		
	stakeholders for a CYCA-facilitated conference, supported by grant funding		
	feom corps, to share best practices, lessons learned, and potential collaboration	pration	_and_
	partnerships for next season.		
	2) Partnered with Colorado Alliance for Environmental Education to promote	<u>the</u>	
	"Careers in Natural Resources Initiative", supported by grant funding, to	rmbrove	
	coordination between natural resources agencies, institutions of higher edu	<u>ication</u>	
	and nonprofit partners with the goal of helping young people to qualify for	<u>natur</u>	<u>g</u> T
	resource careers.		
	THE SOU PAGE WHILE WHITE PAGE COLD ROOK TOTAL THE SALES AND ALL ALL ALL ALL AND ALL AN		
A .I	Other program services. (Describe in Schedule O.)		
4 (1	(Expenses \$ including grants of \$) (Revenue \$	١	
A ^			
RAA	Total program service expenses ► 3,490,234.	Form 99	0 (2015)

Page 3 Form 990 (2015) Colorado Youth Corps Association 84-1532028 Part IV Checklist of Required Schedules No Yes Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Х Х Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?...... 2 Χ 3 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? If 'Yes,' complete Schedule C, Part II..... Χ 4 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 X 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? If 'Yes,' complete Schedule D, Χ 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II Х 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' Х complete Schedule D, Part III. 8 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? If 'Yes,' complete Schedule D, Part IV. 9 Χ Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V............... X 10 If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule Х 11 a b Did the organization report an amount for investments – other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII. Χ 11 b c Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII....... Х 11 c d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX. Х 11 d X 11 e e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X... 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)? If 'Yes,' complete Schedule D, Part X. Х 11 f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete X 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 Χ X 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E..... 13 X 14a Did the organization maintain an office, employees, or agents outside of the United States?.......... 14a b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV..... X 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV..... X 15 X 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (Å), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)..... 17 17 Х Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II.

18

19

Χ

Χ

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,'

	TIV Checklist of Required Schedules (continued)		3/00	T 11.
20	Did the organization operate one or more hospital facilities? If 'Yes', complete Schedule H	20a	Yes	No X
	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II.	21	Х	
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? If 'Yes,' complete Schedule I, Parts I and III.	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J.</i>	23		Х
24:	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a	24a		х
I	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
1	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		***************************************
,	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25	a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
ı	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		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If 'Yes', complete Schedule L, Part II.	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III.	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):	28a		Х
	A Current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	20a		
ı	o A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		X
(An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30	L	Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
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		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1	34		Х
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
k	of '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		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	X	
BAA		Form	990	(2015)

Part V	Statements Regarding Other IRS Filings and Tax Compliance
	Check if Schedule O contains a response or note to any line in this Part V

Check if Schedule O contains a response or note to any line in this Part V			[]
	lanana.	Yes	No
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	5		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	_0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Х	
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	_		
	5	Х	
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 <i>e-file</i> (see instructions)	3.0		Х
3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?	}		<u> </u>
	 		
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		Х
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	10,550,000.0	Х
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	}		X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	. 5c		†
6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were	***************************************		
not tax deductible?	6b		
a 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?	<u>7a</u>		X
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		<u> </u>
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	. 7с		Х
d If 'Yes,' indicate the number of Forms 8282 filed during the year			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	. 7e		Х
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899		<u> </u>	
as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7 g		
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.			
a Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10 Section 501(c)(7) organizations. Enter:			
a 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			
11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders			
	\dashv		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.).			
2a 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	_		
3 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a 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			
c Enter the amount of reserves on hand	-		
4a Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O			T
AA TEEA0105L 10/12/15			(2015)

Se	ction A. Governing Body and Management			<u> </u>					
			Yes	No					
1	a Enter the number of voting members of the governing body at the end of the tax year 1a 12 If there are material differences in voting rights among members								
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad								
	of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.								
	b Enter the number of voting members included in line 1a, above, who are independent 1b 12								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		Х					
3	3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?								
4	Did the organization make any significant changes to its governing documents								
	since the prior Form 990 was filed?	4		X					
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X					
6	Did the organization have members or stockholders?	6		X					
7	a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7 a		X					
	b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		Х					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by								
	the following:								
	a The governing body?	8a	X						
	b Each committee with authority to act on behalf of the governing body?	8b	Χ						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	9		X					
Sec	ction B. Policies (This Section B requests information about policies not required by the Internal Re	eveni	ie Co	de.)					
			Yes	No					
	a Did the organization have local chapters, branches, or affiliates?	10a		<u>X</u>					
	b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10 b							
	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Χ						
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O								
	a Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12a	Х						
	b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12 b	Х						
,	c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done See Schedule O	12 c	Х						
13	Did the organization have a written whistleblower policy?	13	Χ						
14	Did the organization have a written document retention and destruction policy?	14	X						
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
á	a The organization's CEO, Executive Director, or top management official. See . Schedule O	15a	Χ						
1	Other officers or key employees of the organization See . Schedule. O	15b	X						
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions).								
16	a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16 a		Х					
1	o If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16 b							
Sec	tion C. Disclosure								
	List the states with which a copy of this Form 990 is required to be filed ▶ None	······································		Bahalananan sunnia					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s for public inspection. Indicate how you made these available. Check all that apply.	only)	avail	able					
	Own website Another's website X Upon request Other (explain in Schedule O)								
19	the public during the tax year. See Schedule 0	ble to							
20	State the name, address, and telephone number of the person who possesses the organization's books and records:								
	Nancy Weil 1640 Grant Street, #210 Denver CO 80203 (303) 863-0600								

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

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

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

- 1 a 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.

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

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

			(C)							
(A) Name and Title	(B) Average hours	is	s both	an o	fficer truste	eck mo is pers and a ee)		(D) Reportable (E) Reportable compensation from related organizations		(F) Estimated amount of other compensation
	per week (list any hours for related organiza- tions below dotted line)	individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-271099-MISC)	relatéd organizations (W-2/1099-MISC)	from the organization and related organizations
(1) Jessica Kelleher	0.5									
Director	0 .	X						0.	0.	0.
(2) Peter Robinson	0.5		-		-				_	_
Director	0	Х			c			0.	0.	0.
(3) Jim Corlett	0.5									
Secretary/Treas	0	X		X				0.	0.	0.
(4) Matt Hamilton	0.5_							•	_	
Director	0	X						0.	0.	0.
(5) John Hausdoerffer	0.5	,,						^	^	^
Director	0	X					-	0.	0.	0.
(6) Joe Duda	0.5	.,							0.	0.
Director	0	X	-					0.	<u> </u>	V.
(7) Peter Smith	_0.5_	v		X				0.	0.	0.
Chairman	0	X	┝╌┼	Λ				<u> </u>	<u> </u>	<u>v.</u>
(8) Jason Corzine Director	0.5	Х						0.	0.	0.
(9) Ron Hassel	0.5	<u> </u>						U .	V.	<u> </u>
Director	0.3	Х	ŀ					0.	0.	0.
(10) Nancy Wilson	0.5	<u> </u>	┝─┼					· · · · · · · · · · · · · · · · · · ·		<u> </u>
Director	0	Х						0.	0.	0.
(11) Margaret Taylor	0.5	 								
Director	0	X						0.	0.	0.
(12) John Swartout	0.5	 							······································	
Director	0	X						0.	0.	0.
(13) Scott Segerstrom	40									
Executive Director	0				Х		L	67,573.	0.	0.
(14)										
eSet for the the third continuous and the transfer of the third continuous and the transfer of the transfer	<u> </u>	<u> </u>			WORKEN TO		<u></u>	<u></u>		**************************************

Part VII Section A. Onicers, Directo	(B)	ney	<u>CII</u>	ipic (C	_=	es,	alli	a Highest Con	ihenzaren Pilih	loyees (continued)
(A) Name and title	Average hours per	1 box	, unle	Pos check ess pe	sition more erson firect	e than is bot or/trus	h an tee)	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	week (list any hours for related organiza tions below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	refated organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(15)										
(16)				:						2.62
(17)										
(18)	MANNE WORKE SHAME WIND AND WIND									
(19)				-,,					anning a militar a la a militar ad resolutiva avelitiva reletiva e del estre de venero reli	
(20)										Control of the Contro
(21)		-								
(22)				********						
(23)										
(24)				**********						
(25)										
1 b Sub-total	II, Section A	<i></i> .					A A	67,573. 0.	0. 0. 0.	0.
d Total (add lines 1b and 1c)	ot limited to those I	isted	abo	ve) v	who	recei		67,573. more than \$100,00		oensation 0.
3 Did the organization list any former office on line 1a? If 'Yes,' complete Schedule of the second	er, director, or tru I for such individu	stee,	key	en en	nplo	yee,	or h	nighest compensa	ted employee	Yes No
4 For any individual listed on line 1a, is the the organization and related organization such individual	s greater than \$1	50,00	00?	If 'Y	'es'	com	plet	e Schedule J for		. 4 X
5 Did any person listed on line 1a receive of for services rendered to the organization	or accrue compen ? <i>If 'Yes,' comple</i>	satio	n fr	om : Iule	any <i>J fa</i>	unre or suc	late ch p	ed organization or erson	individual	. 5 X
Section B. Independent Contractors 1 Complete this table for your five highest	compensated ind	enen	den	t coi	otra	ctors	tha	t received more t	han \$100 000 of	H-1-1-11-1-11-1-1-1-1-1-1-1-1-1-1-1-1-1
compensation from the organization. Report	compensation for	the c	alen	dar	year	endi	ng v	with or within the oi	rganization's tax yea	
Name and busing	ess address					·····		Description	of services	(C) Compensation
			in and the same state of the s			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
		ė								
2 Total number of independent contractors (in \$100,000 of compensation from the organ		ited to	o the	ose I	iste	d abo	ve)	who received more	than	
BAA		TEEAC)108L	10/1	12/15		<u>-</u> -			Form 990 (2015)

		Check if Schedule O co	intains a res _l	oonse or note to ar	ny line in this Part V	44		
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ats.	1	a Federated campaigns						
Contributions, Gifts, Grants and Other Similar Amounts		b Membership dues			A 100 C 100 C			
S, S		c Fundraising events						
£ 7		d Related organizations	1					
S. E.		 Government grants (contributions 	i) <u>1e</u>	3,338,076.				
5 0		All other contributions, gifts, gran similar amounts not included abo	nts, and					
Z C				57,835.				
2 2		g Noncash contributions included in						
		h Total. Add lines 1a-1f	,		3,395,911.			
age			_	Business Code				
9		Training & progr	<u>am fees</u>	900099	193,051.	193,051.		
Program Service Revenue)		**************************************				
1 80	'	; 			_			
જૂ	'						· · · · · · · · · · · · · · · · · · ·	
ä		All other program service	rovonio					
8		Total. Add lines 2a-2f			102 051			
L.L.	3	Investment income (includ			193,051.			
	3	other similar amounts)		s, iiiterest anu 	1,285.	*		1,285.
	4	Income from investment o	f tax-exemp	t bond proceeds				
	5	Royalties						
			(i) Real	(ii) Personal				
	6 8	Gross rents	· · · · · · · · · · · · · · · · · · ·					
	l	Less: rental expenses						
		: Rental income or (loss)						
	(Net rental income or (loss)		**************************************				
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	with the same and a same a same and a same a sa					
	Ł	Less: cost or other basis and sales expenses						
	,	Gain or (loss)					100000000000000000000000000000000000000	
		Net gain or (loss)		>				
41		Gross income from fundrai						
eme	00	(not including\$	ising evenits					
		of contributions reported o	n line 1c).					
ů.		See Part IV, line 18 a						
Other Rev	b	Less: direct expenses		b	0.0000000000000000000000000000000000000	2.575.0	100000000000000000000000000000000000000	Section 1995
రౌ	C	Net income or (loss) from	fundraising e	events 🟲				
	9 a	Gross income from gaming	g activities.					
	j.	See Part IV, line 19 Less: direct expenses		a b				
		Net income or (loss) from		·				
				1				
	Iva	Gross sales of inventory, leand allowances	ess returns	a				
	b	Less: cost of goods sold						
		Net income or (loss) from						
		Miscellaneous Revenue		Business Code				
	11 a							
	b							
	С	water appear plant with apply from favor with white white will					***************************************	
l	d All other revenue							
		Total. Add lines 11a-11d						
	12	Total revenue. See instruc	tions	· - / · · · · · / · · · · · · · · · · ·	3,590,247.	193,051.	0.	1,285.

mbranda	Check if Schedule O contains a r				namental de la company de la c
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	3,200,000.	3,200,000.		
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	67,573.	50,681.	10,135.	6,757.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	114,163.	106,445.	2,911.	4,807.
8	Pension plan accruats and contributions (include section 401(k) and 403(b) employer contributions)	3,112.	2,691.	223.	198.
9	Other employee benefits	9,060.	7,834.	651.	575.
10	Payroll taxes	13,795.	11,929.	990.	876.
11	Fees for services (non-employees):	. :			
	ı Management	40,323.	13,391.	6.	26,926.
	Legal				
	: Accounting	11,903.	1,167.	10,648.	88.
_	Lobbying				
	Professional fundraising services. See Part IV, line 17 Investment management fees				
	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)	30,552.	30,305.	47.	200.
12	Advertising and promotion	3,070.			3,070.
13	Office expenses	9,295.	6,130.	1,432.	1,733.
14 15	Information technology	9,958.	8,621.	793.	544.
16	Occupancy	26,732.	23,066.	1,991.	1,675.
17	Travel	9,805.	7,497.	389.	1,919.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.		and the second s		
19	Conferences, conventions, and meetings	11,602.	8,818.	464.	2,320.
20	Interest				
21	Payments to affiliates		~	A	
22	Depreciation, depletion, and amortization	4,730.	4,250.	247.	233.
23 24	Other expenses. Itemize expenses not	4,794.	2,784.	1,815.	195.
	covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	Dues, fees & subscriptions	3,248.	1,704.	115.	1,429.
	Printing and Publications	2,178.	1,248.	721.	209.
	Equip rent/maintenance	1,938.	1,673.	144.	121,
	Postage and Shipping	200.		200.	
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	3,578,031.	3,490,234.	33,922.	53,875.
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 ► X if following SOP 98-2 (ASC 958-720).				
RAA			danner (dans) (1114) - (12) september (de properties personations (1114) - (1114)	Name - Color - Print,	Form 990 (2015)

84-1532028

23 24

Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year End of year Cash – non-interest-bearing..... 1 Savings and temporary cash investments..... 292,692 2 217,594. Pledges and grants receivable, net..... 3 Accounts receivable, net 113,268 4 254,444. Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L..... 6 7 Notes and loans receivable, net..... 8 8 Inventories for sale or use..... Prepaid expenses and deferred charges..... 6.912 9 6,371. 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D..... 10a 33,965 14,213. 91 10 c 19,752. 11 Investments – publicly traded securities..... 11 Investments - other securities. See Part IV, line 11..... 12 13 Investments - program-related. See Part IV, line 11..... 13 14 Intangible assets..... 6,800. 14 5,200. 15 Other assets. See Part IV, line 11..... 15 Total assets. Add lines 1 through 15 (must equal line 34)..... 503,361. 16 419,763. 16 17 Accounts payable and accrued expenses 134,524. 17 205,906. Grants payable 18 18 19 19 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D..... 21 iabilitie: Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons.

Complete Part II of Schedule L 22

Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. 25 Total liabilities, Add lines 17 through 25..... 134,524. 26 205,906. Organizations that follow SFAS 117 (ASC 958), check here ▶ X and complete Fund Balances lines 27 through 29, and lines 33 and 34. Unrestricted net assets..... 27 270,239. 277,455. 28 Temporarily restricted net assets..... 28 15,000. 20,000. Permanently restricted net assets. 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. ő 30 Capital stock or trust principal, or current funds..... 31 Paid-in or capital surplus, or land, building, or equipment fund..... 31 32 Retained earnings, endowment, accumulated income, or other funds..... 32 2 33 Total net assets or fund balances..... 33 285,239. 297,455. Total liabilities and net assets/fund balances..... 34 34 503,361. 419,763.

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties.....

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Form 990 (2015)

Forn	n 990 (2015) Colorado Youth Corps Association 2016 1990 (2015)	4-1532	0.28	Pa	ge 12	
Pa	Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI		والإلجاجيج			
1	Total revenue (must equal Part VIII, column (A), line 12)	. 1	3,5	90,2	47.	
2	Total expenses (must equal Part IX, column (A), line 25)	. 2	3,5	78,0	31.	
3	Revenue less expenses. Subtract line 2 from line 1	3		12,2	16.	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2	85,2	39.	
5	Net unrealized gains (losses) on investments	. 5		-		
6	Donated services and use of facilities	. 6				
7	Investment expenses	7				
8	Prior period adjustments	. 8			uttrutuidioirerteeriote	
9	Other changes in net assets or fund balances (explain in Schedule O)	. 9			0.	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	2	97,4	155.	
Pai	t XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			Yes	No	
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.					
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviseparate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis	ewed on a				
t	Were the organization's financial statements audited by an independent accountant?		2b	X		
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepasis, consolidated basis, or both: X Separate basis	parate				
C	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the arreview, or compilation of its financial statements and selection of an independent accountant?	ıdit,	2c	Х	************	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.					
	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing Audit Act and OMB Circular A-133?	,	За	Х		
	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required or audits, explain why in Schedule O and describe any steps taken to undergo such audits			لسيسبا		
BAA			Form	1990 ((2015)	

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.
 Information about Schedule A (Form 990 or 990-EZ) and its instructions is

at www.irs.gov/form990.

Department of the Treasury Internal Revenue Service Information about Sch

4947(a)(1) nonexempt charitable trust.
► Attach to Form 990 or Form 990-EZ.

2015

Open to Public Inspection

Employer identification number

Schedule A (Form 990 or 990-EZ) 2015

Colorado Youth Corps Association 84-1532028 Part | Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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 section 5 170(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). 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.) 7 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts 9 from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one 11 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 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations g Provide the following information about the supported organization(s). (vi) Amount of other (i) Name of supported organization (ii) EIN (iv) is the organization listed (v) Amount of monetary (lii) Type of organization (described on lines 1-9 above (see instructions)) in your governing document? Yes No (A) (B) (C) (D) (E)

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

Sch	edule A (Form 990 or 990-EZ) 20	5 Colorado	Youth Corp	os Associati	ion	84-153202	8 Page 2			
Pa	Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)									
Sec	Section A. Public Support									
Cale beg	endar year (or fiscal year inning in) ►	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total			
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	1,890,652.	1,740,806.	2,079,101.	2,223,984.	3,395,911.	11,330,454.			
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.			:			0.			
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.			
4	Total. Add lines 1 through 3	1,890,652.	1,740,806.	2,079,101.	2,223,984.	3,395,911.	11,330,454.			
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)						0.			
6	Public support. Subtract line 5 from line 4						11,330,454.			

	TOTAL MICE CONTRACTOR OF THE C						111,000,101
Sec	tion B. Total Support						
Calendar year (or fiscal year beginning in) ▶		(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7	Amounts from line 4	1,890,652.	1,740,806.	2,079,101.	2,223,984.	3,395,911.	11,330,454.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	507.	572.	925.	640.	1,285.	3,929.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)			and the second s			0.
11	Total support. Add lines 7 through 10	100					11,334,383.
12	Gross receipts from related activ	vities, etc. (see in:	structions)			12	0.
13	First five years. If the Form 990 is organization, check this box and	for the organization	n's first, second, th				

		Comments of the Control of the Control	CHARLES AND ADDRESS OF THE PARTY OF THE PART	,,,,,,,
ec	tion C. Computation of Public Support Percentage			
14	Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f))	14	99.97%	6
15	Public support percentage from 2014 Schedule A, Part II, line 14	15	99.97%	6
16 a	a 33-1/3% support test — 2015. If the organization did not check the box on line 13, and line 14 is 33-1/3% or more and stop here. The organization qualifies as a publicly supported organization.	e, chec	ck this box	χ

b 33-1/3% support test - 2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test — 2015. 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.....

O:	1%-facts-and-circumstances test — 2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part VI how the
O:	ganization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization

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

Schedule A (Form 990 or 990-EZ) 2015

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 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.)

Sec	tion A. Public Support						
Calen	dar year (or fiscal year beginning in) ►	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions and membership fees received. (Do not include any 'unusual grants.')						
	received. (Do not include						
	Gross receipts from admis-						
	sions, merchandise sold or			-			
	services performed, or facilities furnished in any activity that is			***************************************			
	related to the organization's						
3	tax-exempt purpose Gross receipts from activities						
,	that are not an unrelated trade or business under section 513.						
4	Tax revenues levied for the						
	organization's benefit and either paid to or expended on						
_	its behalf						
5	The value of services or facilities furnished by a						
	governmental unit to the						
c	organization without charge						
	Total. Add lines 1 through 5 Amounts included on lines 1.				-		
, ,	2, and 3 received from	·]					
	disqualified persons			.:		***************************************	
b	Amounts included on lines 2 and 3 received from other than						
	disqualified persons that					***************************************	
	exceed the greater of \$5,000 or 1% of the amount on line 13	THE STATE OF THE S					
	for the year						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Sec	tion B. Total Support		// · · · · · · · · · · · · · · · · · ·	**************************************			A CONTRACTOR OF THE PROPERTY O
	lar year (or fiscal year beginning in) 🕨	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9	Amounts from line 6						-
10 a	Gross income from interest, dividends,						
	payments received on securities loans, rents, royalties and income from						
5. .	similar sources			S			
D	Unrelated business taxable income (less section 511						
	taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b	***************************************		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
-	Net income from unrelated business				<u> </u>		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
	activities not included in line 10b,						
	whether or not the business is regularly carried on						
12	Other income. Do not include	***************************************	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		international annual contraction of the contraction	***************************************	***************************************
	gain or loss from the sale of capital assets (Explain in	ĺ				and the state of t	
	Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990	is for the organiza	ation's first, secor	nd, third, fourth, o	r fifth tax year as	a section 501(c)(3	
بمرسيم بسج	organization, check this box and			, , , , , , , , , , , , , , , , , , ,			
	ion C. Computation of Pul Public support percentage for 20			no 12 nolumn (f)\	Co-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	15	8
	Public support percentage from 2	•	•				<u> </u>
Tobacco de Budo esta d	ion D. Computation of Inv	HYVESINSE HOGGHKV EKSININ HOSHT DIKENSIK KASININ CISIN	**************************************				**************************************
	Investment income percentage for				ma (f))	17	%
	Investment income percentage for						8
	33-1/3% support tests – 2015. If						
	is not more than 33-1/3%, check	this box and stop	here. The organ	ization qualifies a	is a publicly supp	orted organization	
	33-1/3% support tests - 2014, If						
	line 18 is not more than 33-1/3% Private foundation. If the organia		•				140000
20 20 A	i made romandin ii tiic organi	SCHOOL GIG HOUGHO	CK a DUX OH HITE			bodula A (Form 000	

Part IV Supporting Organizations

(Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A and D, and D, and complete Part I.

	Sections A, D, and E. If you checked 11d of Part 1, complete Sections A and D, and complete	erai	(V .)	
Sec	tion A. All Supporting Organizations			T
			Yes	No
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.	1		
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)	2		
3 a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below.	3a		
ŀ	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.	3b		
(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	3с		
4 a	Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 11a or 11b in Part I, answer (b) and (c) below	4a		-
ŀ	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	4b		
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	4c		
5 a	Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
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?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5с		
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	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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)	7		
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)	8		
9 a	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	9a		
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	9b		
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 .	9c		
10 a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes,' answer 10b below	10a		
t	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.)	10b		

No

No

No

No

	Check the box next to the method that the organization used to satisfy the integral Part Test during the year (see instructions):
a	The organization satisfied the Activities Test. Complete line 2 below.
b	The organization is the parent of each of its supported organizations. Complete line 3 below.
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).

2	Activities Test. Answer (a) and (b) below.	(00000000000000000000000000000000000000	Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
İ	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i> 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? <i>Provide details in Part VI</i>	3a		
١	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its	3h		

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) 2015

Pa	↑V Type III Non-Functionally Integrated 509(a)(3) Su	upporting Organiza	tions (continued)	
Sec	tion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt pu	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
2	Amounts paid to perform activity that directly furthers exempt purposes in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purposes of s			
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the organization Part VI). See instructions		, , , , , , , , , , , , , , , , , , , ,	
9	Distributable amount for 2015 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
Sec	tion E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1	Distributable amount for 2015 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2015 (reasonable cause required — see instructions).			
3	Excess distributions carryover, if any, to 2015:			
a				
b				
С				
d	From 2013			
е	From 2014			
1	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2015 distributable amount			
į	Carryover from 2010 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2015 from Section D, line 7: \$			
	Applied to underdistributions of prior years			
	Applied to 2015 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2015, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6	Remaining underdistributions for 2015. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7	Excess distributions carryover to 2016. Add lines 3j and 4c			
8	Breakdown of line 7:			
a b				
C	Excess from 2013			
	Excess from 2014			
	Excess from 2015			

BAA Schedule A (Form 990 or 990-EZ) 2015 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 C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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 instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see instructions), then

⊕ ;	Section 501(c)(4), (5), or (6) of	organizations: Complete Part III.							
Name	of organization	Employer identifica	ation number	**********					
Colorado Youth Corps Association 84-1532028									
Pa	rt I-A Complete if the o	rganization is exempt under secti	on 501(c) or is a	section 527 organia	zation.				
1		organization's direct and indirect political of							
2	Political expenditures			* \$					
3		^******************************							
Pa		rganization is exempt under secti			10000000000000000000000000000000000000				
1	Enter the amount of any exc	cise tax incurred by the organization under	section 4955	<i>,</i>		0.			
2	Enter the amount of any exc	cise tax incurred by organization managers	under section 4955.	▶\$		Ō.			
3	If the organization incurred a	a section 4955 tax, did it file Form 4720 for	this year?	, ,	Yes	No			
48	Was a correction made?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			☐Yes ☐I	No			
	If 'Yes,' describe in Part IV.				لــا - اــا				
Pai	TIC Complete if the o	rganization is exempt under section	on 501(c), excep	t section 501(c)(3).					
1		pended by the filing organization for section							
2	Enter the amount of the filing of function activities	organization's funds contributed to other organ	nizations for section 52	7 exempt 					
3	Total exempt function expen	ditures. Add fines 1 and 2. Enter here and	on Form 1120-POL,	▶\$					
4	Did the filing organization file	e Form 1120-POL for this year?			Yes	No			
5	Did the filing organization file Form 1120-POL for this year?								
***************************************	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter 0.	(e) Amount of political contributions received ar promptly and directly delivered to a separate political organization. It none, enter ·0				
(1)									
(2)									
(3)									
(4)									
(5)									
(6)		THE PUR LIFE THE PLUE LINE AND LINE AND LINE LINE LINE LINE LINE LINE LINE AND ADDRESS THE REAL PURPLE LINE AND				.,			

Part II-A Complete if t section 501(I	he organization	n is exempt under see	ction 501(c)(3) and	filed Form 5768 (el	ection under
2000		gs to an affiliated group (and	list in Part IV each affilia	ated group member's name	
ŧI		d share of excess lobbying			•
B Check ► ☐ if the filin	g organization che	cked box A and 'limited cor	ntrol' provisions apply.		
(The term		ring Expenditures ons amounts paid or incur	ed.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditu		,	• • •	6,000.	
		egislative body (direct lobb		18,000.	
, , ,	•	nd 1b)		24,000.	0
e Total exempt purpose ex	•	nes 1c and 1d)		3,554,031. 3,578,031.	0.
		·		3,318,031.	<u> </u>
f Lobbying nontaxable am both columns		ount from the following tail		328,902.	•
If the amount on line 1e, colu	mn (a) or (b) is:	The lobbying nontaxable	amount is:		
Not over \$500,000		20% of the amount on line 1e.			
Over \$500,000 but not over \$1,0		\$100,000 plus 15% of the excess			
Over \$1,000,000 but not over \$1		\$175,000 plus 10% of the excess			
Over \$1,500,000 but not over \$1 Over \$17,000,000		\$225,000 plus 5% of the excess c \$1,000,000.	VBT \$1,000,000.		
g Grassroots nontaxable a		, , , , , , , , , , , , , , , , , , ,		82,226.	0.
h Subtract line 1g from line				02,220.	0.
i Subtract line 1f from line	1c. If zero or less	, enter -0		0.	0.
j If there is an amount other	than zero on either	line 1h or line 1i, did the org	anization file Form 4720	reporting	
section 4911 tax for this	year?	· · · · · · · · · · · · · · · · · · ·			Yes No
		4-Year Averaging Period U	Inder section 501(h)	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
(Some	organizations tha	t made a section 501(h) el s below. See the instruction	ection do not have to c	complete all of the five	
*					
	LODD	ying Expenditures During	4- Year Averaging Peri	00 :	***************************************
Calendar year (or fiscal	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total
year beginning in)	.,		` ,	, ,	• •
2 a Lobbying nontaxable		na mananan mananan merinaman anan disangkan kelasan pelilik pelipun dipendungkan pelipungkan dipendungkan pendu	<u> </u>		······································
amount	243,00	3. 260,978.	265,039.	328,902.	1,097,922.
b Lobbying ceiling					
amount (150% of line					1 (16 000
2a, column (e))					1,646,883.
c Total lobbying expenditures	24,00	0. 24,000.	24,000.	24,000.	96,000.
	24,00	J. 24,000. 24,1		23,000.	20,000.
d Grassroots nontaxable amount	60,75	1. 65,245.	66,260.	82,226.	274,482.
e Grassroots ceiling					
amount (150% of line					
2d, column (e))					411,723.
f Grassroots lobbying expenditures	8,00	0. 6,000.	6,000.	6,000.	26,000.
BAA	0,000	U. J	0,000.		990 or 990-EZ) 2015

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

(election under Section 501(n)).									
For each 'Yes' response on lines 1a through 1i below, provide in Part IV a detailed description				(b)					
of each res response on mes ra unough it below, provide in ran tv a detailed description of the lobbying activity.					nount	(1/2012 p. 1000 - 4 200			
through	ne year, did the filing organization attempt to influence foreign, national, state or local on, including any attempt to influence public opinion on a legislative matter or referendum, the use of:								
	ers?								
	ff or management (include compensation in expenses reported on lines 1c through 1i)?								
	to members, legislators, or the public?								
	ons, or published or broadcast statements?				uliaiananintertetele				
=	o other organizations for lobbying purposes?								
	ontact with legislators, their staffs, government officials, or a legislative body?								
=	demonstrations, seminars, conventions, speeches, lectures, or any similar means?					***************************************			
	tivities?								
	Id lines 1c through 1í.				***···································				
•	activities in line 1 cause the organization to be not described in section 501(c)(3)?								
	enter the amount of any tax incurred under section 4912								
	enter the amount of any tax incurred by organization managers under section 4912								
	ng organization incurred a section 4912 tax, did it file Form 4720 for this year?								
	Complete if the organization is exempt under section 501(c)(4), section 501	c)(5)	. or			uwenere.			
	section 501(c)(6).	-/(-/:				T			
4 146	1 1: 11 11: 10:000	•			Yes	No			
	ostantially all (90% or more) dues received nondeductible by members?				-				
	organization make only in-house lobbying expenditures of \$2,000 or less?			j	┿				
	organization agree to carry over lobbying and political expenditures from the prior year?			······································	<u> </u>				
(Complete if the organization is exempt under section 501(c)(4), section 501((6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b) I answered 'Yes.'	c)(5), Part l	, or s II-A,	ection 5 line 3, is	101(c) ;				
1 Dues, as	sessments and similar amounts from members		1						
2 Section expense	162(e) nondeductible lobbying and political expenditures (do not include amounts of political s for which the section 527(f) tax was paid).								
a Current y	rear		2a						
b Carryove	r from last year		2 b						
c Total		[2 c						
3 Aggregat	e amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		main.acrossfi.etv@etichost	····			
4 If notices does the expendit	were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess organization agree to carryover to the reasonable estimate of nondeductible lobbying and political are next year?		4						
	amount of lobbying and political expenditures (see instructions)	<i>.</i> .	5						
art IV Si	upplemental Information			amen compagnity amin					

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

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

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Inspection Employer identification number

	Colorado Youth Corps Association	84-1532028							
Pai	Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered 'Yes' on Form 990, Part IV, line 6.								
	(a) Donor advised funds (b) F	unds and other accounts							
1	Total number at end of year								
2	Aggregate value of contributions to (during year)								
3	Aggregate value of grants from (during year)								
4	Aggregate value at end of year								
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised are the organization's property, subject to the organization's exclusive legal control?	funds Yes No							
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be us for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose cor impermissible private benefit?	nferring							
Par	Conservation Easements.								
1	Complete if the organization answered 'Yes' on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply).								
1	Preservation of land for public use (e.g., recreation or education) Preservation of a historical	ly important land area							
	Protection of natural habitat Protection of natural habitat								
	Preservation of open space	Historic structure							
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conser	vation easement on the							
***	last day of the tax year.								
		leld at the End of the Tax Year							
-	Total number of conservation easements								
	Total acreage restricted by conservation easements								
C	: Number of conservation easements on a certified historic structure included in (a)								
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register								
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization tax year	on during the							
4	Number of states where property subject to conservation easement is located ▶								
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of viol	ations,							
_	and enforcement of the conservation easements it holds?								
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation ea	sements during the year							
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements \$\infty\$\$	ents during the year							
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(and section 170(h)(4)(B)(ii)?	E11011							
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, include, if applicable, the text of the footnote to the organization's financial statements that describes the conservation easements.	and balance sheet, and organization's accounting for							
Par	Organizations Maintaining Collections of Art, Historical Treasures, or Other Sin Complete if the organization answered 'Yes' on Form 990, Part IV, line 8.	nilar Assets.							
1 a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of in Part XIII, the text of the footnote to its financial statements that describes these items.	nt and balance sheet works of public service, provide,							
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public following amounts relating to these items:	ic service, provide the							
	(i) Revenue included on Form 990, Part VIII, line 1								
	(ii) Assets included in Form 990, Part X								
	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, pro amounts required to be reported under SFAS 116 (ASC 958) relating to these items:								
	Revenue included on Form 990, Part VIII, line 1								
b	Assets included in Form 990, Part X	▶\$							

Part III Organizations Mainta	ming cone	cuons	OI Art, MISK	orical Treasure	25, or O	mer Sillilar ASS	ers (c	OHUHU	eu)
3 Using the organization's acquisition items (check all that apply):	, accession, a	ind other r	ecords, check a	any of the following	that are a	significant use of its	collectio	n	
a Public exhibition			d Loan	or exchange progr	rams				
b Scholarly research			e Other						
c Preservation for future gener	ations		- Colorest						
Provide a description of the organiz Part XIII.									
5 During the year, did the organiza to be sold to raise funds rather the	tion solicit or an to be ma	receive of intained a	lonations of ar is part of the c	rt, historical treasu organization's colle	res, or o ection?	ther similar assets	Yes		No
Part IV Escrow and Custodia line 9, or reported an	I Arrangen amount on	n ents. C Form 9	Complete if 190, Part X,	the organizatio	n answ	ered 'Yes' on Fo	rm 99	0, Par 	t IV,
1 a Is the organization an agent, trus on Form 990, Part X?					or other a	essets not included	Yes	[No
b If 'Yes,' explain the arrangement	in Part XIII a	and comp	lete the follow	ing table:					
							Amoun	<u>t</u>	
c Beginning balance						L	***************************************	&	
d Additions during the year									
e Distributions during the year									
f Ending balance						16			
2a Did the organization include an a						· · · · · · · · · · · · · · · · · · ·	li	les.	No
b If 'Yes,' explain the arrangement	in Part XIII.	Check he	re if the explai	nation has been p	rovided o	on Part XIII			
TOTAL		SCHOOL STATE OF THE STATE OF TH			electrosconichososcientes pero		***************************************		
Part V Endowment Funds. C				· · · · · · · · · · · · · · · · · · ·					
	(a) Current	year	(b) Prior yea	r (c) Two yea	ers back	(d) Three years back	(e)	Four year	s Dack
1 a Beginning of year balance						***************************************			
b Contributions									
c Net investment earnings, gains, and losses	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		aananakhrussaanika suusseerika —					······································	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
d Grants or scholarships						·			·····
e Other expenditures for facilities and programs									
f Administrative expenses									
g End of year balance									
2 Provide the estimated percentage		nt year e	nd balance (lir	ne 1g, column (a))	held as:				
a Board designated or quasi-endowment	ent 🟲		[%]						
b Permanent endowment ▶	[%]								
c Temporarily restricted endowmen			. %						
The percentages on lines 2a, 2b, an	nd 2c should e	qual 100%	ó,						
3 a Are there endowment funds not in the organization by:	he possession	of the org	janization that a	are held and admin	istered for	r the		Yes	No
(i) unrelated organizations					- ,		. 3a(i)		
(ii) related organizations							. 3a(ii)		
b If 'Yes' on line 3a(ii), are the rela	ted organiza	tions liste	d as required	on Schedule R?			. 3b		
4 Describe in Part XIII the intended	uses of the	organizat	ion's endowm	ent funds.					
Part VI Land, Buildings, and I Complete if the organization			Yes' on For	m 990, Part IV	, line 1	1a. See Form 99	0, Pai	t X, li	ne 10.
Description of property		(a) Cost o	or other basis estment)	(b) Cost or oth basis (other)	ier	(c) Accumulated depreciation	(d)	Book v	alue
1 a Land			······································						
b Buildings									
c Leasehold improvements	,							·	
d Equipment		 		33,9	65.	14,213.		19	,752.
e Other									
Total. Add lines 1a through 1e. (Column	n (d) must e	qual Form	990, Part X,	column (B), line 1	0c,)	,		19	,752.
ВАА				energe service			ule D (F		

Part VII Investments - Other Securities.	'Voo' on Form 000	N/A D, Part IV, line 11b. See Form 990, Part X, line 12
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives.	(B) Dook value	(C) Institute of variation, over the order of year market value
(2) Closely-held equity interests.		
(3) Other	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
(A)	valeriter#teretereterentemennen vivermideltudirrereterinetemetemetemendelalenen.	
(B)		
(C)		
(D)		
(E)	**************************************	
(F)		
(G) (H)	Cintimasum mummus sinotam om monterno medelulala resin	
(1)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.) >		
Part VIII Investments - Program Related.	lamakid mislisti sistem kanalisti si sal PP PP is dakii n 1990 ka katika 199 0 ka	N/A
Complete if the organization answered), Part IV, line 11c. See Form 990, Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)	,	
(2)		
(4)		
(5)	elarkentri (Elanomerii sireelii mitarei seisi karetiereetaastei 1942–1945) eseri kuurra etekti mitarkeetetti s	
(6)	rumunastritanussainemartairinemi mediameteriamiemi heritatiki	
(7)		
(8)		
(9)		
(10)	uuunnaan olika meessa olimeen aananse een alkinude keen on ade een maareen eliiliseen keelise	
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) ▶ Part IX Other Assets.	N/A	A CONTRACTOR OF THE PROPERTY O
Complete if the organization answered	'Yes' on Form 990), Part IV, line 11d. See Form 990, Part X, line 15.
~~~~ <del>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</del>	scription	(b) Book value
(1)		
(3)		
(4)	ar anna an ar rei anna an a	
(5)		
(6)		
(7) (8)	<u>.</u>	
(9)	hannannannannannannannannanni metre (merkentietari 1944) (metre 1944)	
(10)	an ann ar an amh ann amh ann ann ann ann an aire ann an amh ann ann aire a' ann an ann an ann an ann an ann an	
Total. (Column (b) must equal Form 990, Part X, column (E	3) line 15.)	· · · · · · · · · · · · · · · · · · ·
Part X Other Liabilities.	000 0 (1)(1)	1 116 O 000 D + V OF
Complete if the organization answered 'Yes' on Fo	orm 990, Part IV, line I (b) Book value	1e or 111. See Form 990, Part X, tine 25
(1) Federal income taxes	(b) Book value	
(2)		
(3)		
(4)		
(5) (6)		
(7)		
(8)		
(9)		
(10)		
(11)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)  2. Liability for uncertain tax positions. In Part XIII, provide the text of the foo		nancial etatements that reports the organization's liability for uncertain
🗠 Liability for allocatable ax boshious: III Lait VIII''''''''' biordis ais fext of the foc	กลงเซ เบ เลซ บานูสมเผสแบบ \$ 11	nanolal statements that reports the organization's hapling for uncertain

	( IJJZUZU , 49° .
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	eturn.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	
1 Total revenue, gains, and other support per audited financial statements	1 3,590,247.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
a Net unrealized gains (losses) on investments	
b Donated services and use of facilities	
c Recoveries of prior year grants	
d Other (Describe in Part XIII.)	
e Add lines 2a through 2d	2 e
3 Subtract line 2e from line 1	3 3,590,247.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	
a Investment expenses not included on Form 990, Part VIII, line 7b	
b Other (Describe in Part XIII.)	
c Add lines 4a and 4b	4 c
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5 3,590,247.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Return.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	*
1 Total expenses and losses per audited financial statements	1 3,578,031.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	
a Donated services and use of facilities	
b Prior year adjustments	
c Other losses.	
d Other (Describe in Part XIII.)	
e Add lines 2a through 2d	2 e
3 Subtract line 2e from line 1	3 3,578,031.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	
a Investment expenses not included on Form 990, Part VIII, line 7b 4a	
b Other (Describe in Part XIII.)	
c Add lines 4a and 4b.	4c
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5 3,578,031.
Part XIII Supplemental Information.	

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

#### Part X - FIN 48 Footnote

The Association is exempt from federal and state income taxes under IRC Code Section 501(c)(3), has no items of taxable unrelated business income, and believes it is in compliance with all requirements necessary to maintain its status.

# SCHEDULE | (Form 990)

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

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

OMB No. 1545-0047	<b>8 0 0 0 0 0 0 0</b>
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Employer identification number 84-1532028 Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Colorado Youth Corps Association

Part | General Information on Grants and Assistance Department of the Treasury Internal Revenue Service Name of the organization

Yes 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

<u>\$</u>

Partil Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered 'Yes' on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

1 (a) Name and address of organization or government	( <b>a</b> )	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Larimer Cnty Youth Cons Corps 200 W. Oak Street, #5000							Environmental
Fort Collins, CO 80522	84-6000779		95,372.	0			remediation
(2) Mile High Youth Corps		- Annaissement					
1801 Federal Blwd.		- Albert Marvel					Environmental
Denver, CO 80204	84-1182631		1,025,632.	.0	-	WET-T-FREET-T-VOORMOST-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEIRING-T-WEI	remediation
(3) Rocky Mtn Youth Corps							
P.O. Box 775504							Environmental
gs, CO 80477	84-1483022		566,492.	0.	-		remediation
(4) Southwest Conservation Corps							
701 Camino del Rio, #101			emaro o				Environmental
Durango, CO 81301	84-1450808		615,501.	.0			remediation
(5) Steamboat Springs CYC						:	
P.O. Box 775088							Environmental
œ	84-6000721		31,640.	0			remediation
(6) Weld County Youth Conservatio							
P.O. Box 1805					amp arm films		Environmental
0632	84-6000813		122,304.	0			remediation
Western Colorado Conservation					*****		
2818 1/2 North Ave.							Environmental
Grand Junction, CO 81501	74-2486204		743,059.	0.			remediation
					-		
		an breed from					·
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.	3) and government or	ganizations fisted i	n the line 1 table			A	_
3 Enter total number of other organizations listed in the line 1 table	ons listed in the line	1 table	****************			<b>A</b>	0

Schedule I (Form 990) (2015)

TEEA3901L 11/04/15

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

Schedule I (Form 990) (2015) Colorado Youth Corps Association

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

2					
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
			TTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTT	THE RESIDENCE OF THE PROPERTY	THE PROPERTY OF THE PROPERTY O
2					THE THE TAXABLE PARTY AND THE TAXABLE PARTY
					THE
4					THE PROPERTY OF THE PROPERTY O
. 2					
9					And the second s
Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	de the information	required in Part I,	line 2, Part III, col	umn (b), and any other	er additional information.

TEEA3902L 11/04/15

Schedule I (Form 990) (2015)

#### 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.

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047 2015

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Colorado Youth Corps Association

Employer identification number 84-1532028

#### Form 990, Part VI, Line 11b - Form 990 Review Process

Reviewed in detail by Executive committee and then emailed to full board for a one week comments period prior to filing.

#### Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

Reviewed annually to assure full understanding and compliance.

#### Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO & Top Management

Executive Director - Annually by Compensation Committee of the board of directors using comparables from similar sized non-profit organizations in the youth conservation corps and environmental preservation sectors.

### Form 990, Part VI, Line 15b - Compensation Review & Approval Process - Officers & Key Employees

Executive Director - Annually by Compensation Committee of the board of directors using comparables from similar sized non-profit organizations in the youth conservation corps and environmental preservation sectors.

#### Form 990, Part VI. Line 19 - Other Organization Documents Publicly Available

Provided upon written request and the receipt of a nominal fee for handling and shipping.