#### \*\* PUBLIC DISCLOSURE COPY \*\*

## Return of Organization Exempt From Income Tax

Form **990** Do not enter social security numbers on this form as it may be made public. OM8 No. 1545-0047 Open to Public Inspection

Department of the Transury Internal Revenue Service

A For the 2022 calendar year, or tax year beginning

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Go to www.irs.gov/Form990 for instructions and the latest information.

and ending

C Name of organization D Employer identification number Chack If applicable ~;Addrose COLORADO YOUTH CORPS ASSOCIATION Meme 84-1532028 Doing business as ได้เมื่อไ Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number ]final return/ (303) 863-0600 1640 GRANT STREET, SUITE 210 torm aloc 6,634,913. City or town, state or province, country, and ZiP or foreign postal code G Grose receipts 5 Amende DENVER, CO 80203 H(a) is this a group return JApplica. F Name and address of principal officer: MARGARET TAYLOR for subordinates? ..... JYes LXJNo nending SAME AS C ABOVE H(b) Are all subordinates included? Yes !...... No Tax-exempt status; X 501(c)(3) 527 If "No," attach a list. See instructions \_\_\_ 501(c) ( (insert no.) 🤳 4947(a)(1) or 🕻 WWW.CYCA.ORG H(c) Group exemption number K Form of organization: X Corporation Trust Association L Year of formation: 1999 M State of legal domicile; CO Other Part I Summary 1 Briefly describe the organization's mission or most significant activities: THE COLORADO YOUTH CORPS Governance ASSOCIATION SERVES ON BEHALF OF CONSERVATION CORPS THAT TRANSFORM if the organization discontinued its operations or disposed of more than 25% of its net assets. 9 Number of voting members of the governing body (Part VI, line 1a) 9 Number of independent voting members of the governing body (Part VI, line 1b) Activities & 5 Total number of individuals employed in calendar year 2022 (Part V, line 2a) 5 Ó Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 b Net unrelated business taxable income from Form 990-T, Part I, line 11 Prior Year **Current Year** 3,586,373. 2,783,965. Contributions and grants (Part VIII, line 1h) Revenue 2,866,737. 3,846,472. Program service revenue (Part VIII, line 2g) 301. 4.476. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) Ö. 0. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 6,453,411. 6,634,913. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) ...... 4,130,919 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 6,133,901. 14 Benefits paid to or for members (Part IX, column (A), line 4) 261,887. 250. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 15 Salaries, officer componentially and the salaries of the Professional fundraising fees (Part IX, column (A), line 11c) 21, 157. O. 256,555. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 179,033. 4,571,839. 6,741,706. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 1,881,572. 19 Revenue less expenses. Subtract line 18 from line 12 -106,793. Beginning of Current Year End of Year 4.055,619. 2,620,543. 20 Total assets (Part X, line 16) 1,775,417. 233,548. 21 Total liabilities (Part X, line 26) 2,386,995. 2,280,202. 22 Net assets or fund balances, Subtract line 21 from line 20. Part II | 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. Signature of officer Sign HUDSON BEASLEY, TREASURER Here Type or print name and title MITH Print/Type preparer's name Preparer's signature Paid ₽00186641 JEREMY J. RYAN WATSON COON RYAN, LLC Firm's EIN 82-3543701 Preparer Firm's name Firm's address 6025 SOUTH OUEBEC STREET, SUITE 260 Use Only CENTENNIAL, CO 80111 Phone no.303-792-3020 X Yes No May the IRS discuss this return with the preparer shown above? See Instructions Form 990 (2022)

Total program service expenses

Form 990 (2022) COLORADO YOUTH CORPS ASSOCIATION
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			40*
_	public office? If "Yes," complete Schedule C, Part I	3		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect		х	
5	during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	4	Λ.	
J	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	<del></del>		
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments		l	17
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D. Parts VI, VIII, IX, or X, as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? // "Yes," complete Schedule D,			
	Part VI	11a	х	
ь	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 167 /f "Yes," complete Schedule D, Part VII	11b		х
¢	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u>x</u>
þ	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		_ <u>x</u> _
0	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	110	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			х
12a	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X  Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	111		
123	Behaviola D. Davis W. and W.	12a	х	
ь	Was the organization included in consolidated, independent audited financial statements for the tax year?	120		
•	If "Yes," and if the organization answered "No" to line 12s, then completing Schedule D, Parts XI and XII is optional	12b		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		X
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	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	8		7.7
40	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	}	х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10		
••	column (A), Ilnes 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17	1	х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	]	x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	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		х	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		

COLORADO YOUTH CORPS ASSOCIATION 84-1532028 Page 4 Part IV | Checklist of Required Schedules (continued) Yes No 22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Х 22 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Х Schedule J 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a Х 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b 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 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I Х 25a b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Х Schedule L, Part I 25b Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II X 26 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, 27 creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled Х entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV X 28a b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 28b c. A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?// Х "Yes," complete Schedule L, Part IV 28c Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation X contributions? If "Yes," complete Schedule M 30 X Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Х Schedule N, Part II 32 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 Х 33 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Х 34 ..... X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 Х 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization Х and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 197 X Note: All Form 990 filers are required to complete Schedule O Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes Nο 10 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b

c. Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

(gambling) winnings to prize winners?

Form 990 (2022) COLORADO YOUTH CORPS ASSOCIATION
Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 5			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
Þ	If "Yes," enter the name of the foreign country			
<u></u>	See Instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	٠.		X
ра b	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a 5b		$\frac{\lambda}{X}$
C	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	oc.		
40	any contributions that were not tax deductible as charitable contributions?	6а	Ì	х
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	71		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<b>7</b> g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	_		
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
a b	Did the sponsoring organization make any taxable distributions under section 4966?  Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9a 9b		
10	Section 501(c)(7) organizations. Enter:	AD.		
a	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations, Enter:			
a	Gross income from members or shareholders 11a			
þ	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts, is the organization filing Form 990 in lieu of Form 1041?	12a		
þ	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
8	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.			
þ	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			
	Enter the amount of reserves on hand	7.54		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14a 14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	.713		
	excess parachute payment(s) during the year?	15		х
	If "Yes," see the instructions and file Form 4720, Schedule N,			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16	- 1	Х
	If "Yes," complete Form 4720, Schedule O.		1	
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			
32008	12-13-22	Form	990 (	2022)

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

	Check if Schedule O contains a response or note to any line in this Part VI	<u>iardodania</u>		X
Sec	tion A. Governing Body and Management		,	
			Yes	No
ta	Enter the number of voting members of the governing body at the end of the tax year	4		
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.	J		
Þ	Enter the number of voting members included on line 1a, above, who are independent 1b	4	1	
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	<u> </u>	X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	1		
	of officers, directors, trustees, or key employees to a management company or other person?	3	<u> </u>	X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	<u> </u>	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
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			٠,
	persons other than the governing body?	7b		X
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	
Þ	Each committee with authority to act on behalf of the governing body?	8b	X	***********
9	is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
~	organization's malling address? If "Yes," provide the names and addresses on Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		1	
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a	ļ	X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,		İ	1
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	X	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	l		Ì
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
Þ	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	<u> </u>	
¢	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe		x	
	on Schedule O how this was done	12c	x	
13	Did the organization have a written whistleblower policy?	13	x	
14	Did the organization have a written document retention and destruction policy?	14		
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?		х	
a	The organization's CEO, Executive Director, or top management official  Other officers or key ampleyees of the organization	15a	x	
Ď	Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	15b	<del>  ^</del> -	
40-	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	l		
108		10-		х
	taxable entity during the year?  If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	16a	· · · · · ·	
Þ	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b	'	
Sac	tion C. Disclosure	100		
17	List the states with which a copy of this Form 990 is required to be filed CO			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3	le och	\ ausil	ahle
10	for public inspection. Indicate how you made these available. Check all that apply.	js Utily	, avalli	anic
	Own website Another's website LX Upon request Other (explain on Schedule O)			
10	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, ar	d fine	neiel	
19	statements available to the public during the tax year.	iu iinal	roiat	
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
20	NANCY WEIL - (303) 863-0600			
	1640 GRANT STREET, SUITE 210, DENVER, CO 80203			

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
   List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
   Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

Check this box if neither the organization r	nor any related	orga	aniza	ation	co	mpe	nsal	ted any current officer, (	director, or trustee.	,
(A)	(B)			() Dece	G)			(D)	(E)	(F)
Name and title	Average hours per week	offi	, បុភាខ	Position check more than one ess person is both an ind a director/trustee)				Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	indisidual Sustee ex director	institzional luusee	Office	Key employee	Hahest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) SCOTT SEGERSTROM EXECUTIVE DIRECTOR	40.00							05 407	0.	10 010
(2) KARINA AMAYA-RAGLAND	0.50	ļ		х	<u> </u>	-		95,487.	U +	12,019.
DIRECTOR	0.30	x						0.	0.	0.
(3) MIKE KING	0.50	Δ.		-		-		· · · · · · · · · · · · · · · · · · ·	V +	V +
DIRECTOR	0.50	x				1		0.	0.	0.
(4) BRIGID MCRAITH	0.50	T'''				<del>                                     </del>				
DIRECTOR		х						0.	0.	0.
(5) ANNA HENDRICKS	0.50	,,							^	
DIRECTOR (6) JEFF ROBERTS	0.50	Х	<del> </del>	$\vdash$		ļ	ļ	0.	0.	0.
DIRECTOR	0.30	x						0.	ο.	0.
(7) MAELLY OPREZA	0.50			$\vdash$	-	<del> </del>				U.
DIRECTOR		x			1	1		0.	0.	0.
(8) MARGARET TAYLOR	0.50			ļ						
BOARD CHAIR		X		X				0.	0.	0.
(9) HUDSON BEASLEY	1.00	ļ		l				_	_	
TREASURER	0.50	X		X		<u> </u>		0.	0.	0.
(10) PETER ROBINSON SECRETARY	0.50	x		x				o.	0.	0.
SECRETARI		1		<u> </u>		├─	_	V.	V -	V.
						ł	ŀ			
						Γ				
A THE STATE OF THE				_						
, 11 100 100 100 100 100 100 100 100 100				_						
			ļ			<b></b>			*****	
				<u> </u>		ļ				
								•		
									***************************************	
	1		<u> </u>			١	L	ł .		

Part VII Section A. Officers, Directors, Trus		ploy	/ <del>0</del> 0\$			gne	st C					45.	<del></del>
(A) Name and title	(B) Average	(C) Position						(D) Reportable	(E) Reportable		E	(F) stimate	arl
Name and the	hours per	box	, unie	99 pe	<b>180</b> 0	than is bot	h an	compensation	compensatio			nount	
	week		cer pr	dad	recto	i/irus	(00)	from	from related			other	
	(list any hours for	destr						the organization	organization (W-2/1099-MIS		1	pense om th	
	related	10.29	<u>31</u>			景		(W-2/1099-MISC/	1099-NEC)			anizat	_
	organizations below	Si li	SE F		12. S	۱ <u>۳</u>		1099-NEC)	·			d relat	
	line)	Indykdusi bassa or dekribr	Instibational Inustre	Oğlor	to to	Highest compressaled emphyres	JE JE				orga	anizati	ons.
		<u> </u>		0	. <del>3</del>	= =	ı.r.						***************************************
		ļ											
		<u> </u>											
		ł											
							-		***************************************				***************************************
		<u> </u>	$oxed{oxed}$										
1b Subtotal								95,487.		0.	1	2,0	
c Total from continuation sheets to Part V								95,487.		0		~ ~	0.
d Total (add lines 1b and 1c)  Total number of individuals (including but r	2)								2000 of reportable	T .		2,0	T.A.
compensation from the organization	ocumento o	いつから	nare	Q AL	JOVE	≠) Wi	IQ FE	ecetaed mote tilan \$100	nobo of reportable	e			C
3 Did the organization list any former officer.	divinatas terrat	I		اممد			. Landana		14	ſ	· · · ·	Yes	No
3 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s											3		х
4 For any individual listed on line 1a, is the su	ım of reportab	le co	mp	ensa	ition	anc	oth	ner compensation from t	the organization				
and related organizations greater than \$15											4		X
5 Did any person listed on line 1a receive or rendered to the organization? If "Yes," com							elate	ed organization or indivi	dual for services		5		x
Section B. Independent Contractors			or or		VÇ/ 3		.,				<del>-</del>		
1 Complete this table for your five highest co	•									pens	ation f	rom	
the organization. Report compensation for (A)	tne catendar y	ear (	enau	ng w	ntn (	or w	tnin	the organization's tax (B)	/ear.		(0	;}	
Name and business	address	N	NE	}				Description of s	ervices	С	ompe		n
					***************************************								
2 Total number of independent contractors (i	ncluding but n	ot lir	nite	i to	thos	se lis	ted	above) who received m	ore than				
\$100,000 of compensation from the organi	zation				(	)					Form	000	

Page 9

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII וםו टा Revenue excluded Related or exempt Unrelated Total revenue from tax under function revenue business revenue sections 512 - 514 Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns ..... 48,600. b Membership dues 1b c Fundraising events 1c d Related organizations 10 2,672,718. e Government grants (contributions) te f All other contributions, gifts, grants, and 62,647. similar amounts not included above .... "I f Q Noncash contributions included in lines 3a-1f 19 2,783,965 h Total. Add fines 1a-1f Business Code 2,120,362.2,120,362. 1,726,110.1,726,110. 900099 2 a SERVICE CONTRACTS - GOV Program Service Revenue 900099 TRAINING & PROGRAM FEE All other program service revenue ..... 3,846,472. g Total. Add lines 2a-2f Investment income (including dividends, interest, and 4,476. 4,476. other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties ..... (i) Real (ii) Personal 6 a Gross rents b Less: rental expenses ... 65 6c c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (ii) Other assets other than inventory b Less; cost or other basis Other Revenue and sales expenses ..... 7b c Gain or (loss) 7c d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 9a b Less: direct expenses 96 Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold ..., ..... 10b Net income or (loss) from sales of inventory. Business Code Miscellaneous Revenue d All other revenue e Total. Add lines 11a-11d 6,634,913.3,846,472. 4,476. Total revenue. See instructions

COLORADO YOUTH CORPS ASSOCIATION

Form 990 (2022) COLORADO YOUTH CORPS ASSOCIATION
Part IX Statement of Functional Expenses

Sect	ion 501(c)(3) and 501(c)(4) organizations must comp	plete all columns. All oth	er organizations must co	mplete column (A).	
	Check if Schedule O contains a respon	se or note to any line in	this Part IX		
	not include emounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	(D) Fundralsing expenses
1	Grants and other assistance to domestic organizations	C 100 001	5 4 3 3 4 5 5 4		
	and domestic governments. See Part IV, line 21	6,133,901.	6,133,901.	·····	
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,	107,506.	05 241	17 600	A A776
_	trustees, and key employees	107,500.	85,341.	17,689.	4,476.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and			1	
	persons described in section 4958(c)(3)(B)	200,213.	158,008.	33,890.	8,315.
7	Other salaries and wages Pension plan accruals and contributions (include	200,213.	130,000,	33,030	0,313+
8	section 401(k) and 403(b) employer contributions)	3,324.	2,734.	384.	206.
		18,499.	15,699.	2,100.	700.
9 10	Other employee benefits Payroll taxes	21,708.	17,050.	3,729.	929.
11	Fees for services (nonemployees):	4+,,,,,,	*,,000.	w///m-/*	+ 12 22 12
	Management				
b	Legal				
c	Accounting	17,128.		17,128.	
ď	Lobbying	35,000.	35,000.		
ė	Professional fundraising services. See Part IV, line 17	,	22,000.		
f	Investment management fees				
g					
	column (A), amount, list line 11g expenses on Sch O.)	75,066.	69,133.	5,000.	933.
12	Advertising and promotion				
13	Office expenses	10,654.	5,639.	3,507.	1,508.
14	Information technology	12,205.	9,718.	1,971.	516.
15	Royalties				
16	Occupancy	42,266.	33,223.	7,217.	1,826.
17	Travel	10,587.	9,717.	846.	24.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	24,356.	24,356.		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	4,096.		4,096.	
23	Insurance	6,349.		6,349.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)	,			
я	DUES, FEES AND SUBSCRIP	12,121.	10,149.	568.	1,404.
b	PRINTING, POSTAGE AND P	5,142.	2,892.	1,998.	252.
c	EQUIPMENT RENTAL AND MA	1,585.	1,221.	296.	68.
d	The state of the s			***************************************	
6	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	6,741,706.	6,613,781.	106,768.	21,157.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined		ļ		
	educational campaign and fundraising solicitation.				
	Check here it rollowing SOP 98-2 (ASC 958-720)				
232014	7 12-13-22				Form <b>990</b> (2022)

Pa	rt X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	235,560.	t	778,775.
	2	Savings and temporary cash investments	2,168,778.	2	1,405,740.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	191,442.	4	1,716,346.
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
\$3	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
4	9	Prepaid expenses and deferred charges	11,877.	9	9,778.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 196,931.			
	ь	Less: accumulated depreciation 10b 60,741.	0.	10c	136,190.
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments · program-related. See Part IV, line 11		13	
	14	Intangible assets	12,886.	14	8,790.
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	2,620,543.	16	4,055,619.
	17	Accounts payable and accrued expenses	233,548.	17	1,640,034.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
æ	22	Loans and other payables to any current or former officer, director,			
Liabilities	i	trustee, key employee, creator or founder, substantial contributor, or 35%			
<u> </u>		controlled entity or family member of any of these persons		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			435 363
		of Schedule D	0.		135,383.
	26	Total liabilities. Add lines 17 through 25	233,548.	26	1,775,417.
ý,		Organizations that follow FASB ASC 958, check here			
20		and complete lines 27, 28, 32, and 33.	EC4 00E		702 006
60	27	Net assets without donor restrictions	564,995.	27	783,086.
B	28	Net assets with donor restrictions	1,822,000.	28	1,497,116.
.5		Organizations that do not follow FASB ASC 958, check here			
2		and complete lines 29 through 33.			
\$3	29	Capital stock or trust principal, or current funds		29	
35	30	Paid-in or capital surplus, or land, building, or equipment fund	***************************************	30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or other funds	7 700 000	31	2 200 202
#	32	Total net assets or fund balances	2,386,995.	32	2,280,202.
	33	Total liabilities and net assets/fund balances	2,620,543.	33	4,055,619.

#### SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

## Public Charity Status and Public Support

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

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

OMB No. 1545-0047

**Open to Public** Inspection

Name of the organization COLORADO YOUTH CORPS ASSOCIATION Employer identification number 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 12, check only one box.) 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).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state; 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in 7 section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 \_\_\_\_ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g, Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations g Provide the following information about the supported organization(s). (iv) lá fric örganization listed (i) Name of supported (II) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other עסט זעל (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

Schedule A (Form 990) 2022 COLORADO YOUTH CORPS ASSOCIATION 84-15320
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 falled to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	1,426,791.	1,579,571.	1,409.633.	3,586,373.	2,783,965.	10,786,333.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to	į					
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	1,426,791.	1,579,571.	1,409,633.	3,586,373.	2,783,965.	10,786,333.
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)		1				
6	Public support, Subtract line 5 from line 4.						10,786,333.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	1,426,791,	1,579,571.	1,409,633.	3,586,373.	2,783,965.	10,786,333.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	848.	480.	3,788.	301.	4,476.	9,893.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10				, ,		10,796,226.
12	Gross receipts from related activities,	etc. (see instruction	ns)			12	
13	First 5 years. If the Form 990 is for th	ne organization's fir	st, second, third, f	ourth, or fifth tax y	ear as a section 5	501(c)(3)	
	organization, check this box and stop						
	tion C. Computation of Publ		<del></del>				
	Public support percentage for 2022 (I					14	99.91 %
	Public support percentage from 2021					15	99.78 %
1 <b>6</b> a	33 1/3% support test - 2022. If the o	•					C
	stop here. The organization qualifies	as a publicly supp	orted organization				[X]
þ	33 1/3% support test - 2021, if the o	W-				•	NV N/ UNITED A
	and stop here. The organization quali	ifles as a publicly s	upported organiza	tion	,		LJ
17a	10% -facts-and-circumstances test	•					
	and if the organization meets the fact	s-and-circumstanc	es test, check this	box and stop her	e. Explain in Part '	VI how the organiza	ation
	meets the facts and circumstances te						1
b	10% -facts-and-circumstances test	-					10% or
	more, and if the organization meets th						process and
	organization meets the facts-and-circu						The state of the s
18	Private foundation. If the organization	n did not check a t	oox on line 13, 16a	, 16b, 17a, or 17b	, check this box a		
						Schedule A (	Form 990) 2022

Schedule A (Form 990) 2022 COLORADO YOUTH CORPS ASSOCIATI Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or If the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support									
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total			
1	Gifts, grants, contributions, and									
	membership fees received. (Do not	. 1								
	include any "unusual grants.")									
2	Gross receipts from admissions, merchandise sold or services per-									
	formed, or facilities furnished in any activity that is related to the									
	organization's tax-exempt purpose									
3	Gross receipts from activities that									
	are not an unrelated trade or bus-	ļ								
	thess under section 513									
4	Tax revenues levied for the organ-									
	Ization's benefit and either paid to									
_	or expended on its behalf					1				
5	The value of services or facilities									
	furnished by a governmental unit to				j	1				
	the organization without charge									
	Total. Add lines 1 through 5									
<b>7</b> a	Amounts included on lines 1, 2, and									
	3 received from disqualified persons									
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year									
	Add lines 7a and 7b									
	Public support. (Subtractline 7c from line 6.)									
	tion B. Total Support				•	1				
	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total			
	Amounts from line 6	372.332								
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources									
Ł	Unrelated business taxable income									
	(less section 511 taxes) from businesses									
	acquired after June 30, 1975									
c	Add lines 10a and 10b				<u> </u>					
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on									
12	Other income. Do not include gain or loss from the sale of capital									
13	assets (Explain in Part VI.)	(			1					
	First 5 years. If the Form 990 is for th	/	rot popond third	fourth or fifth tax	Loor so a continu	FO1(a)(2) organizat	ion			
14		_			•		ron,			
Ç <sub>0</sub> ,	check this box and stop here ction C. Computation of Publ	ia Support Da	rantaaa	·····		<del></del>	<u></u>			
						T T				
	Public support percentage for 2022 (					15	%			
	Public support percentage from 2021					16	%			
	tion D. Computation of Inve					T 7				
	Investment income percentage for 2022 (fine 10c, column (f), divided by line 13, column (f))									
		from 2021 Schedule A, Part III, line 17								
192	33 1/3% support tests - 2022. If the	the organization dld not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not								
	more than 33 1/3%, check this box a	nd <b>stop here.</b> The	organization quali	fies as a publicly s	supported organiza	ation				
ŧ	33 1/3% support tests - 2021. If the	organization did r	not check a box or	line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%,	and			
	line 18 is not more than 33 1/3%, che	ck this box andst	<b>op here.</b> The orga	nization qualifies s	as a publicly suppo	orted organization				
20	Private foundation, If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions									

#### Part IV | Supporting Organizations

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

#### Section A. All Supporting Organizations

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

		Yes	No
	1		
	2		
	3 <b>a</b>		
	35		
	3c		
	4a		
	4b		
	4c		
	5a		
	5b		
i	5c		
	6		
	7		
			<del></del>
	₽		
	9a		<u></u>
	9b		
	9c		
	10a		
	10ъ		

	7 ( 411 000) 2044		***********	
Pa	rt IV   Supporting Organizations <sub>(continued)</sub>		T	7
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
8	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
	A family member of a person described on line 11a above?	11b	ļ	
C	, , , , , , , , , , , , , , , , , , ,			1
Soc	detall in Part VI. tion B. Type I Supporting Organizations	11¢	<u> </u>	
OC.	don b. sype i supporting Organizations		1	- A-
4	Did the gavering back, marriage of the gaverning back, officers entire in their official appearing or membership of one or		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			1
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			•
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
_	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in	ĺ		
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	[		
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations		<del></del>	A
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control	l		
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1_1_		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	<b>↓</b>	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	İ		
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2	<b></b>	
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	ا ا		
800	supported organizations played in this regard. Ition E. Type III Functionally Integrated Supporting Organizations	3	L	
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yeatsee instructions	·····		
1	The organization satisfied the Activities Test, Complete line 2 below.	1+		
a b	The organization is the parent of each of its supported organizations, Complete line 3 below.			
C	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	astructio	ins).	
2	Activities Test. Answer lines 2a and 2b below.	101100110	Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		1	
_	the supported organization(s) to which the organization was responsive? // "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			1
	how the organization was responsive to those supported organizations, and how the organization determined		1	1
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in		1	ł
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in		•	ĺ
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
þ	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	36		I

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ing Orgai	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualify	ing trust on	Nov. 20, 1970 (explain in	Part VI). See instructions,
	All other Type III non-tunctionally integrated supporting organizations mu	st complete	Sections A through E.	
Sec	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
_3	Other gross income (see Instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		'
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
3	Average monthly value of securities	1a		
b	Average monthly cash balances	16		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
ė	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			İ
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Mintmum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	ally integrate	ed Type III supporting org	anization (see

Schedule A (Form 990) 2022

instructions).

Part V | Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes 1 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 2 Administrative expenses paid to accomplish exempt purposes of supported organizations 3 4 Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) 5 Other distributions (describe in Part VI). See instructions. 6 7 Total annual distributions. Add lines 1 through 6. 7 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. 8 Distributable amount for 2022 from Section C, line 6 9 10 10 Line 8 amount divided by line 9 amount (ii) (iii) Underdistributions Distributable Section E - Distribution Allocations (see instructions) **Excess Distributions** Amount for 2022 Pre-2022 Distributable amount for 2022 from Section C, line 6 Underdistributions, if any, for years prior to 2022 (reasonable cause required - explain in Part VI). See instructions. 3 Excess distributions carryover, if any, to 2022 a From 2017 b From 2018 c From 2019 d From 2020 e From 2021 f Total of lines 3a through 3e g Applied to underdistributions of prior years h Applied to 2022 distributable amount i Carryover from 2017 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. 4 Distributions for 2022 from Section D. a Applied to underdistributions of prior years b Applied to 2022 distributable amount c Remainder, Subtract lines 4a and 4b from line 4. 5 Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2023. Add lines 3; and 4c. 8 Breakdown of line 7: a Excess from 2018 b Excess from 2019 c Excess from 2020 d Excess from 2021

Schedule A (Form 990) 2022

e Excess from 2022

Schedule A	(Form 990) 2022	COLORADO	YOUTH	CORPS	ASSOCIATI	ON	84-1532028	Page 8
Part VI	Supplemental Infor Part IV, Section A, lines 1 line 1; Part IV, Section D, Section D, lines 5, 6, and	, 2, 3b, 3c, 4b, 4c, I lines 2 and 3; Part	5a, 6, 9a, 9b IV. Section E	, 9c, 11a, 11 , lines 1c, 2	ib, and 11c; Part IV a, 2b, 3a, and 3b; F	/, Section B, lines 1 Part V, line 1; Part V,	17b; Part III, line 12; and 2; Part IV, Sectior Section B. line 1e; Pa	n C.
	(See instructions.)							
							1100-00-10-00-10-10-10-10-10-10-10-10-10	
						***************************************	THE RESIDENCE ASSESSMENT OF THE PROPERTY OF TH	
	W-110111101							
		N- 101 11 - 101 11 - 101 11 11 11 11 11 11 11 11 11 11 11 11						
					1100 O 1100 E 11 110 - 101 - 101 - 101 I 110 I 110 I 110 E 111 I I 110 E 111 I I I I I I I I I I I I I I I I I		***************************************	
				***************************************		***************************************	anning strenge full traditional tip strenger to be a limbor to distrib	
							(1919)	
					1000-7101 (100-710-11-710-71-11-71-71-71-71-71-71-71-71-71-71-71-			
						VIII.		
		***************************************				***************************************	A-0	
					***************************************		THE PROPERTY OF THE PROPERTY O	
							·	

#### Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

### **Schedule of Contributors**

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

OMB No. 1545-0047

Employer identification number

2022

COLORADO YOUTH CORPS ASSOCIATION 84-1532028 Organization type (check one): Filers of: Section: X 501(c)( 3 ) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

#### Special Rules

	or (ii) Form 990-t∟2, line 1. Complete Parts I and II.
	For an organization described in section 501(c)(7), (8), or (10) filling Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific,
	literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering
	"N/A" in column (b) instead of the contributor name and address), II, and III.
<u></u>	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc.,
	purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively
	religious, charitable, etc., contributions totaling \$5,000 or more during the year \$

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h;

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule 8 (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule 8 (Form 990).

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

Schedule B (Form 990) (2022)

Name of organization

Employer identification number

## COLORADO YOUTH CORPS ASSOCIATION

84-1532028

Part I	Contributors (see instructions). Use duplicate copies of Part I if additions	al space is needed.	
(a) No.	(b) Name, address, and ZiP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 2,646,638.	Person X Payroll I Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part If for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payrolt Oncash Ochmplete Part II for roncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions.)

Employer identification number

## COLORADO YOUTH CORPS ASSOCIATION

84-1532028

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

Schedule 8 (Form 990) (2022) Page 4 Name of organization Employer identification number COLORADO YOUTH CORPS ASSOCIATION 84-1532028 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 503(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or tess for the year. (Enter this info. once.) \$ Use duplicate copies of Part III if additional space is needed. (a) No. from Part i (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part ! (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (ø) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

#### SCHEDULE C (Form 990)

**Political Campaign and Lobbying Activities** 

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

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

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

OMB No. 1545-0047
2022
Open to Public Inspection

Department of the Treesury Internal Revenue Service

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

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

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

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

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

- :	Section 501(c)(4), (5), or (6) organizat	ions: Complete Part III.				
Nam	e of organization				Emplo	yer identification number
		O YOUTH CORPS AS				84-1532028
Pa	rt I-A Complete if the org	anization is exempt un-	der section 501(c)	or is a section 5	27 or	ganization.
2 3	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai	ures gn activities				
		anization is exempt un				
1	Enter the amount of any excise tax	incurred by the organization un	der section 4955		\$ .	
2	Enter the amount of any excise tax Enter the amount of any excise tax If the organization incurred a section	incurred by organization manag	gers under section 495	5	\$ .	
~	ii tile organization incance a sectio	D TOOD LAN, GIO IL ME I CHIN TIEL	a tot time your to the contract			·· = ' = · ·
	Was a correction made?					Yes No
<u>b</u>	If "Yes," describe in Part IV.  If I-C   Complete if the org	anization is avament up	der section 501/c	avoant eaction	504/	-1/2)
		·				
	Enter the amount directly expended Enter the amount of the filing organ				<b></b>	
Z					•	
9	exempt function activities				.,., Ф	
		. Add lines 1 and 2. Citter here			4	
	Did the filing organization file Form	1120-DOL for this year?			.,,, Ф,	Vac No
5	Enter the names, addresses and en made payments. For each organiza contributions received that were problitical action committee (PAC). If	nployer identification number (E tion listed, enter the amount pa omptly and directly delivered to	BN) of all section 527 p aid from the filing organ a separate political org	olitical organizations to ization's funds. Also e ganization, such as a s	o which nter the	n the filing organization e amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid t filing organizatio funds. If none, ent	n's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

Sch	nedule C (Form 990) 2022	COLORADO	YO	UTH CORPS A	SSOCIATION	84-1	.532028 Page 2
	art II-A Complete if the org section 501(h)).	ganization is	exei	npt under sectio	n 501(c)(3) and fil	ed Form 5768 (e	lection under
	expenses, and sha	re of excess lob	bying (		Part IV each affiliated	group member's nan	ne, address, EIN,
	Lim	its on Lobbying	Ехрен			(a) Filing organization's totals	(b) Affiliated group totals
1	a Total lobbying expenditures to infi	uence public op	inion (	grassroots lobbying)		20,013.	
	b Total lobbying expenditures to infl					28,222.	
	c Total lobbying expenditures (add l					48,235.	
	d Other exempt purpose expenditur					6,693,471.	
	<ul> <li>Total exempt purpose expenditure</li> </ul>					6,741,706.	
	Lobbying nontaxable amount. Ent		om the	following table in bot	h columns.	487,085.	
	If the amount on line 1e, column (a)	or (b) is: T	re lobi	bying nontaxable am	ount is:		
	Not over \$500,000			the amount on line 1e.			
	Over \$500,000 but not over \$1,00			O plus 15% of the exc			
	Over \$1,000,000 but not over \$1,5			Optus 10% of the exc			
	Over \$1,500,000 but not over \$17			O plus 5% of the exce	ss over \$1,500,000.		Ĭ
	Over \$17,000,000	1 \$7	,000,0	000.			
	- Overeste nontriolite annual (v.	- A	4.6			121,771.	
	g Grassroots nontaxable amount (er			//···		121,//1.	/
	<ul> <li>Subtract line 1g from line 1a. if zer</li> <li>Subtract line 1f from line 1c. if zer</li> </ul>			***************************************	1.40101.1417011741	ŏ:	
	j If there is an amount other than ze		,		tion file Form 4720		
	reporting section 4911 tax for this		111 ()1 1	mie 14 dio die ordens	2000 HG 1 GHH 41 50	٦	Yes No
		4-Ye		raging Period Under			
	(Some organizations t	See the s	separa	ite instructions for ill	nes 2a through 2f.)	of the five columns b	ėlow.
		Lobbying	Expen	ditures During 4-Yes	r Averaging Period		
	Calendar year (or fiscal year beginning in)	(a) 2019		( <b>b)</b> 2020	(c) 2021	(d) 2022	(e) Total
2:	a Lobbying nontaxable amount	324,1	58.	302,543.	378,592.	487,085.	1,492,378.
1	b Lobbying ceiling amount (150% of line 2a, column(e))						2,238,567.
	c Total lobbying expenditures	30,0	00.	30,000.	30,000.	48,235.	138,235.
	d Grassroots nontaxable amount	81,0	40.	75,636.	94,648.	121,771.	373,095.
	e Grassroots ceiling amount (150% of line 2d, column (e))					**************************************	559,643.
	f. Grassroots Johhving expenditures	6.0	00.	6.000.		20.013.	32.013.

Schedule C (Form 990) 2022

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

Fore	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a	)	(t	)
	e lobbying activity.	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:  Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
1					
g			'		
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
í	Other activities?				
ĵ	Total. Add lines 1¢ through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
þ	If "Yes," enter the amount of any tax incurred under section 4912				
¢	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section	on 501(c)(	5), or se	ction	
	501(c)(6).				
				Yes	Nο
1	Were substantially all (90% or more) dues received nondeductible by members?				
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the				
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(4)				
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	"No" OH	(b) Part	m-A, in	e 3, 1s
	answered "Yes."				
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	cal			
	expenses for which the section 527(f) tax was paid).				
8	Current year				
	Carryover from last year				
c					
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and i	political			
_	expenditures next year?	, , , , ,	4		
Par	Taxable amount of lobbying and political expenditures. See instructions  t IV   Supplemental Information	• • • • • • • • • • • • • • • • • • • •	5		
			A 41		
	de the descriptions required for Part I-A, Ilne 1; Part I-B, Ilne 4; Part I-C, Ilne 5; Part II-A (affiliated group	) BST); Mart II-	A, IIDes 1 a	ind 2 (See	
เกรเก	actions); and Part II-B, line 1. Also, complete this part for any additional information.				

#### SCHEDULE D

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

COLORADO YOUTH CORPS ASSOCIATION

Employer identification number 84~1532028

Pa	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds	s or Accounts.Complete if the
***************************************	organization answered "Yes" on Form 990, Part IV, lir		·
***************************************		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in		sed funds
	are the organization's property, subject to the organization's	-	
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor of		
	Impermissible private benefit?		
Pa			
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply).	
	Preservation of land for public use (for example, recrea	ation or education) Preservation of	a historically important land area
	Protection of natural habitat	Preservation of	a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quality	fied conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Yea
a	Total number of conservation easements		29
b	Total acreage restricted by conservation easements		
C	Number of conservation easements on a certified historic str		
	Number of conservation easements included in (c) acquired		
	historic structure listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the	e organization during the tax
	year		
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the pe-	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements i	t holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing con-	servation easements during the year
	<del></del>		
7	Amount of expenses incurred in monitoring, inspecting, hand	illing of violations, and enforcing conserva	ition easements during the year
	***************************************		
8	Does each conservation easement reported on line 2(d) above		
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservati	•	
	balance sheet, and include, if applicable, the text of the footr	note to the organization's financial statem	ents that describes the
	organization's accounting for conservation easements.	f A. A. Michael C. The comment	
rai	t III Organizations Maintaining Collections o	-	ther Similar Assets,
	Complete if the organization answered "Yes" on Form		
18	If the organization elected, as permitted under FASB ASC 95		
	of art, historical treasures, or other similar assets held for put		
	service, provide in Part XIII the text of the footnote to its final		
b	If the organization elected, as permitted under FASB ASC 95	•	
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furti	nerance of public service,
	provide the following amounts relating to these items:		dt.
	(i) Revenue included on Form 990, Part VIII, line 1		
_	(ii) Assets included in Form 990, Part X		
2	if the organization received or held works of art, historical tre		ıı gain, provide
	the following amounts required to be reported under FASB A	-	ф.
<i>a</i>	Revenue included on Form 990, Part VIII, line 1		
þ	Assets included in Form 990, Part X		

		O YOUTH CO					32028	
Pai	rt III   Organizations Maintaining C	collections of A	rt, Historica	al Treasures, o	r Other	Similar Asso	ts/continu	ied)
3	Using the organization's acquisition, access	ion, and other record	ds, check any c	of the following that	make sign	ificant use of it:	è	
	collection items (check all that apply):							
a	Public exhibition	¢		r exchange progra				
þ	Scholarly research	€	Other_					
¢	Preservation for future generations							
4	Provide a description of the organization's c	ollections and explai	in how they fur	ther the organizatio	n's exemp	t purpose in Pa	rt XIII.	
5	During the year, did the organization solicit of	or receive donations	of art, historica	I treasures, or othe	r similar as	ssets		
	to be sold to raise funds rather than to be m						Yes	No.
Pa	rt IV Escrow and Custodial Arran		ete if the organ	ization answered "`	Yes" on Fo	rm 990, Part IV	line 9, or	
	reported an amount on Form 990, Pa							
1a	Is the organization an agent, trustee, custod							rama
	on Form 990, Part X?					∟	_ Yes	∟ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing table:					
							Amount	
	Beginning balance					1c		
d	Additions during the year					1d		
0	Distributions during the year					10		
f	Ending balance					11		
	Did the organization include an amount on F				_		⊥ Yes	No
	If "Yes," explain the arrangement in Part XIII  t V   Endowment Funds. Complete:							
Fai	rt V Endowment Funds. Complete					Three years back	T. day Cours	eare back
	Control of the state of the sta	(a) Current year	(b) Prior ye	er (c) (wo years	ORON (G)	THISE YEARS DACK	(e) ruur y	OUIS DACK
	Beginning of year balance							
D	Contributions							
¢	Net investment earnings, gains, and losses							
	Grants or scholarships							
e	Other expenditures for facilities			1				
	and programs							
	Administrative expenses							
ã	End of year balance							
2	Provide the estimated percentage of the cur	•		mn (a)) neid as:				
a	Board designated or quasi-endowment	A/	%					
b	Permanent endowment Term endowment	% %						
Ç	The percentages on lines 2a, 2b, and 2c sho	. "						
24	Are there endowment funds not in the posse	*		ald and administra	ad far tha			
ĢД	organization by:	seeming me ordering	erithi nier eie i	ieno anto administer	ed to: tire		ΓŸ	es No
	(ii) Unrelated organizations (iii) Related organizations							
'n	If "Yes" on line 3a(ii), are the related organiza	atione listed as requi	red on Schedu	ie R?			3b	
4	Describe in Part XIII the intended uses of the			10. 111			. L	
Par	rt VI   Land, Buildings, and Equipn		o everitorita i contracti					
	Complete if the organization answere		0. Part IV. line	11a. See Form 990.	Part X, lin	e 10.		
	Description of property	(a) Cost or o		Cost or other	<del> </del>	imulated	(d) Book	value
	esemption of property	basis (investr	, ,	pasis (other)		ciation	fact works	
18	Land				3 p - w			
	Buildings							
c.	Leasehold improvements							
	Equipment			22,791.	2	2,791.		0.
	Other			174,140.	3	7,950.	136	,190.
	LAdd lines 1a through 14 (Column (d) must s		X column (B)				136	

Schedule D (Form 990) 2022

Part VII Investments - Other Securities.	JTH CORPS ASS		34-1532028 Page 3
Complete if the organization answered "Yes" ( (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			
(2) Closely held equity interests (3) Other			
(A)			
(B)			
(C)			
(D)			
(E)		***************************************	
(F)		***************************************	
(Ġ)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part Vill Investments - Program Related.			1.11111
Complete if the organization answered "Yes" of			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or	end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)		***************************************	
(6)			
(7)			
(8)			
(9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes" of	on Form 990. Part IV. fine :	11d See Form 990 Part X line 15	
	escription	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	(b) Book value
(1)			(1)
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (6) line	15.) , ,	7 * 3 1 * 1 1 1 1 3 3 3 4 1 1 1 7 * 4 3 7 3 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Part X Other Liabilities.			
Complete if the organization answered "Yes" o	n Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line	25.
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) LEASE LIABILITY - YOUTH CO	)RPS		
(3) BUILDING			135,383.
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line			135,383.
2. Liability for uncertain tax positions. In Part XIII, provide	the text of the footnote to	the organization's financial statemen	ts that reports the

SCHEDULE (Form 990) Name of the organization

Department of the Treasury Internal Reversue Service

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

Open to Public Inspection Employer identification number

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

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

OMB No. 1545-2047 2022

X No 84-1532028 (h) Purpose of grant Yes 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 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 (f) Method of | (g) Description of (c) IRC section (d) Amount of (e) Amount of Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. COLORADO YOUTH CORPS ASSOCIATION General Information on Grants and Assistance (b) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization Part Part

I (a) ivalie and address of olganization of government	No fai	(if applicable)	(u) Arribunt or cash grant	rej Alikaani di noncash assistance	valuation (book, FMV, appraisal, other)	fg) Description of noncash assistance	(n) Purpose or grant or assistance
CONSERVATION LEGACY 701 CAMINO DEL RIO STE 101 DURANSO, CO 81301	84-1450808		1,302,835,	ea	TO THE RESIDENCE OF THE PARTY O		ENVIRONMENTAL REMEDIATION
LARIMER COUNTY CONSERVATION CORPS 200 W OAK ST #5000 FORT COLLINS, CO 80522	84-6000779		466,179.	en:			SHVIRONMENTAL REMEDIATION
MILE HIGH YOUTH CORPS 1801 FEDERAL BLVD DERVER, CO 8020\$	84-1182631		1,777,383,	Ó			ENVIRONMENTAL REMEDIATION
ROCKY MTN YOUTH CORPS 991 CAPTAIN JACK DR STEAMBOAT SPRINGS, CO 80487	84-1483022		1,657,275.	చ			ENVIRONMENTAL REMEDIATION
WELD COUNTY YOUTH CONSERVATION CORPS - PO BOX 1805 - GREELEY, CO 89632	84-6000813		290,956.	లు			environmental remediation
WESTERN COLORADO CONSERVATION CORPS - 2818 1/2 NORTH AVE - GRAND JUNCTION, CO 81501	74-2486204		639,273.	O			SNVIRONKENTAL REMEDIATION
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	ind government or	ganizations listed in the	1				9

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

3 Enter total number of other organizations listed in the line 1 table

Schedule I (Form 990) 2022

84-1532028

Page 2

Schedule I (Form 990): 2022 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.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
PPAPP TOTO PRAIMAGE AND AND AND AND AND AND AND AND AND AND					
ar arraner ar-unarum ana ur e	Andrew Principal Control of the Cont				
Supplemental Information, Provide the information required		2; Part III, column	(b); and any other ar	in Part I, line 2; Part III, column (b); and any other additional information.	

#### **SCHEDULE O** (Form 990)

Dopartment of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

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

OMB No. 1545-0047 Open to Public inspection

Name of the organization

COLORADO YOUTH CORPS ASSOCIATION

Employer identification number 84-1532028

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
LIVES AND COMMUNITIES THROUGH SERVICE, PERSONAL DEVELOPMENT, AND
EDUCATION STATEWIDE.
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
NATURAL RESOURCES. ANOTHER \$509,901 IN PASS-THROUGH INCOME WAS BILLED
TO THE COLORADO STATE TRAILS-OHV PROGRAM WHICH ADDRESSES RECONSTRUCTING
TRAILS DAMAGED IN 2020 WILDFIRES.
4) RENEWED AMERICORPS GRANT , YOUTH CORPS FOR COLORADO EDUCATION AWARDS
PROGRAM FOR PROGRAM YEAR 2021 (PY2021) STARTING 1/1/2022; EXPENSES
\$2,402,352 AGAINST GRANT PASS-THRU INCOME OF \$2,388,122; INCOME AND
EXPENSE BOTH INCLUDE A QUARTERLY COMMISSION OF 2.1% TO SERVE COLORADO,
OF \$40,335, WHICH INCLUDES PY2020 COMMISSION OF \$7,705. PY2021 FINAL
COMMISSION WAS BILLED IN JANUARY 2023. CYCA BILLED ADMIN FEE IN 2022:
\$213,557 FOR PY2020, AND \$45,060 FOR PY2021 TOTALING \$258,617. THE
BALANCE OF PY2021 ADMIN FEE WAS BILLED IN JANUARY 2023.
CYCA BILLED \$4,076 IN JAN 2022 FOR DEC 2021 (PY2020) CORPSMEMBER HOURS.
IN 2022, AMERICORPS PROVIDED AMERICORPS EDUCATION AWARDS FOR 371 YOUNG
PEOPLE:
FT (1,700 HRS) TO 9 MEMBERS AT \$6,895.00 EACH
TQT (1,200 HRS) TO 24 MEMBERS AT \$4,826.50 EACH
PT (900 HRS) TO 17 MEMBERS AT \$3,447.50 EACH
RPT (675 HRS) TO 38 MEMBERS AT \$2,626.27 EACH
QT (450 HRS) TO 136 MEMBERS AT \$1824.07 EACH

6) IN COOPERATION WITH BUREAU OF LAND MANAGEMENT, WE HAD AN EXPIRING

INTERNSHIP AGREEMENT THAT WAS EXTENDED THROUGH 2/28/22. UNDER THAT

AGREEMENT WE ENROLLED 15 INTERNS, WHO COMPLETED 9,571 HOURS OF WORK

DIRECTED BY PUBLIC LAND MANAGERS WITH THE GOAL OF PROVIDING

OPPORTUNITIES FOR CAREERS IN NATURAL RESOURCES MANAGEMENT. OF THESE
INTERNS, 7 WERE STILL WORKING AT THE END OF THE AGREEMENT, UNDER NEW
TASK AGREEMENTS. OF THESE INTERNS, 47% WERE ETHNICALLY DIVERSE OR
CONSIDERED NON-TRADITIONAL CANDIDATES. UNDER OUR NEW BLM INTERNSHIP
TASK AGREEMENTS, WE ENROLLED 7 INTERNS WHO CONTINUED FROM OUR EXPIRED
AGREEMENT, PLUS AN ADDITIONAL 30 INTERNS WHO COMPLETED 20,721 HOURS OF
WORK DIRECTED BY PUBLIC LAND MANAGERS TO PROVIDE OPPORTUNITIES FOR
CAREERS IN NATURAL RESOURCE MANAGEMENT. OF THESE INTERNS, 2 WERE STILL
SERVING IN 2023. OF THESE INTERNS, 43% WERE ETHNICALLY DIVERSE OR
CONSIDERED NON-TRADITIONAL CANDIDATES.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

FUNDING, TO SHARE BEST PRACTICES, LESSONS LEARNED, AND POTENTIAL

COLLABORATION AND PARTNERSHIPS NEXT SEASON.

- 2) PARTNERED WITH COLORADO ALLIANCE FOR ENVIRONMENTAL EDUCATION (CAEE)

  TO PROMOTE CAREERS IN NATURAL RESOURCES INITIATIVE, SUPPORTED BY GRANT

  FUNDING, TO IMPROVE COORDINATION BETWEEN NATURAL RESOURCES AGENCIES,

  INSTITUTIONS OF HIGHER LEARNING, AND NONPROFIT PARTNERS WITH THE GOAL

  OF BUILDING MORE PATHWAYS TO NATURAL RESOURCES CAREERS. TASKS INCLUDED

  DESIGNING A WEB-BASED RESOURCE FOR RAISING AWARENESS OF NATURAL

  RESOURCE CAREER PATHWAYS. AS A RESULT, A NEW WEBSITE LAUNCHED IN 2022,

  UNDER THE URL GREENPATHWAYS.ORG, TARGETING HIGH SCHOOL STUDENTS.
- 3) NOTE RE COVID-19 IMPACTS: IN 2022, MOST CORPS DEVELOPED CAPACITY TO

  RUN MORE TYPICAL NUMBERS OF CREWS; CYCA RETAINED A HYBRID WORK MODEL

  FOR THOSE EMPLOYEES PREFERRING TO WORK PART OF THEIR SCHEDULES

  REMOTELY. AS IN 2021, THIS NECESSITATED REMOTE MEETING AND

Name of the organization COLORADO YOUTH CORPS ASSOCIATION	Employer identification number 84-1532028
COMMUNICATION TOOLS. DUE TO THE GREATLY-INCREASED VISITA	rion of
COLORADO'S PUBLIC LANDS DURING 2020 AND 2021, GREAT OUTDO	OORS COLORADO
INCREASED FUNDING TO YOUTH CORPS TO MITIGATE THE IMPACTS	OF HEAVIER
VISITATION AS WELL AS 2020'S CATASTROPHIC FIRE SEASON.	
ADDED TO THIS WAS CYCA'S NEW PARTNERSHIP WITH COSWAP (DE	SCRIBED ABOVE
IN CORPS SUPPORT/ PROJECT MANAGEMENT ITEM 3 ADDRESSING THE	HE INCREASING
SEVERITY OF WILDFIRES), AS WELL AS OUR WORK WITH THE COLO	DRADO STATE
TRAILS PROGRAM IN RECONSTRUCTING OHV TRAILS IMPACTED BY	THE 2020
WILDFIRES.	
FORM 990, PART VI, SECTION B, LINE 11B:	
REVIEWED IN DETAIL BY EXECUTIVE COMMITTEE AND THEN EMAILS	ED TO FULL BOARD
FOR A ONE WEEK COMMENTS PERIOD PRIOR TO FILING.	
FORM 990, PART VI, SECTION B, LINE 12C:	
REVIEWED ANNUALLY TO ASSURE FULL UNDERSTANDING AND COMPL	ANCE.
FORM 990, PART VI, SECTION B, LINE 15:	
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	ON SECTORS.
FORM 990, PART VI, SECTION C, LINE 19:	
PROVIDED UPON WRITTEN REQUEST AND THE RECEIPT OF A NOMINA	AL FEE FOR HANDLING
AND SHIPPING.	
FORM 990, PART XII, LINE 2C	
THE PROCESS OF THE OVERSIGHT OF THE AUDIT OF ITS FINANCIA	L STATEMENTS

	ule O (Form 990) 20:	55										Page 2
Name	of the organization	CO	LORA	ADO	YOUTH CO	RPS ASSOCIA	TIÖN			Employer 84-	identification 1532028	number
AND	SELECTION	OF	AN	IN	DEPENDENT	ACCOUNTANT	HAS	NOT	CHANGEI	FROM	PRIOR	
YEA	RS.											
	****											
										************************	***************************************	***************************************
						,						
								•				
					***************************************							
		•		'								
			'									
			,									