

#### 2024 Form 990

#### For Fiscal year 7/1/2023 through 6/30/2024

For the purposes of tax regulation, the Internal Revenue Service recognizes Youth For Christ USA as a 501(c)(3) organization and a church. Based on IRS Regulation 1.6033-2(g)(1)(iv), Youth For Christ USA is therefore neither required to file Form 990 nor to disclose it under the public disclosure rules.

Youth For Christ USA, however, being committed to transparency and accountability, voluntarily provides the main Form 990 publicly each year, even though it is not required to file the form with the IRS.

This form for the most recent year is available on Youth For Christ USA's website, <u>www.yfc.net</u> or by mail for anyone who requests them.

PO Box 4478 | Englewood, CO 80155 | 303-843-9000 | <a href="https://www.yfc.net">www.yfc.net</a> | A member of YFC International

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

Form **990** 

## **Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

2023

Department of the Treasury

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

Do not enter social security numbers on this form as it may be made public.

Open to Public Inspection

	nai Revenu			orm990 for instructions ar			00	inspection		
			ar year, or tax year beginning		23, and end	ing 06/	1	, 20 24		
В	Check if a	pplicable:	C Name of organization YOUTH FOR	CHRIST/USA, INC.			1	r identification number		
Ш	Address c	hange	Doing business as					36-2193619		
Ш	Name cha	ange	Number and street (or P.O. box if mail	is not delivered to street addre	ess)	Room/suite	E Telephone number			
	Initial retu	rn	PO BOX 4478				(3	303) 843-9000		
	Final return	n/terminated	City or town, state or province, country	y, and ZIP or foreign postal co	de					
	Amended	return	ENGLEWOOD, CO 80155				<b>G</b> Gross red	•		
	Applicatio	n pending	<b>F</b> Name and address of principal officer:	JACOB BLAND		1		ubordinates? Yes No		
			SAME AS C ABOVE					included?  Yes  No		
<u> </u>	Tax-exem		✓ 501(c)(3)	) (insert no.) 4947(a)(1	) or 527			See instructions.		
J	Website:		<u> </u>			H(c) Group e	exemption nu			
_		ganization:		Other	L Year of form	mation: 1945	M State of	legal domicile: IL		
Р	art I	Summa	-							
	1 E	Briefly des	cribe the organization's mission of	or most significant activ	ties: YFC I	REACHES YOUN	IG PEOPLE	EVERYWHERE,		
Se		WORKING	TOGETHER WITH LOCAL CHURCH	HES & OTHER PARTNERS	). 					
Activities & Governance	_		<u></u>							
Ver			box $\;\square$ if the organization disco	•	-		5% of its r	net assets.		
ဗိ			voting members of the governing				3	14		
<b>ფ</b>	1		independent voting members of			b)	4	13		
ij			er of individuals employed in cal	•	, line 2a)		5	146		
Ę			er of volunteers (estimate if nece	• •			6	68		
Ă			ated business revenue from Part	. , ,			7a	0		
	b 1	Net unrelat	ed business taxable income fron	n Form 990-T, Part I, lin	e 11		7b	0		
<u>e</u>						Prior Yea	ır	Current Year		
			ns and grants (Part VIII, line 1h)	10,	307,436	8,764,226				
Revenue	1		ervice revenue (Part VIII, line 2g)		862,214	5,120,179				
Şe,	10 I	nvestment	income (Part VIII, column (A), lin	;	305,787	522,732				
-	11 (	Other reve	nue (Part VIII, column (A), lines 5,	, 6d, 8c, 9c, 10c, and 11	e)	(	14,838)	21,419		
	12	Total reven	ue-add lines 8 through 11 (must	equal Part VIII, column (	A), line 12)	15,	460,599	14,428,556		
	13 (	Grants and	similar amounts paid (Part IX, co	olumn (A), lines 1-3) .			310,708	673,998		
	14 E	Benefits pa	id to or for members (Part IX, co	olumn (A), line 4)						
S	15	Salaries, ot	ner compensation, employee bene	efits (Part IX, column (A),	ines 5–10)	8,	140,474	8,450,050		
Expenses	16a F	Profession	al fundraising fees (Part IX, colun	113,759						
xbe	<b>b</b> 7	Total fundr	aising expenses (Part IX, column	n (D), line 25)	933,631					
Ш	17 (	Other expe	nses (Part IX, column (A), lines 1	1a-11d, 11f-24e) .		5,	124,715	4,947,628		
	18	Total expe	nses. Add lines 13–17 (must equ	al Part IX, column (A), lir	ne 25) .	13,	689,656	14,071,676		
		Revenue le	ss expenses. Subtract line 18 fro	om line 12		1,	770,943	356,880		
Net Assets or Fund Balances						Beginning of Cur	rent Year	End of Year		
sets	20	Total asset	s (Part X, line 16)			19,	356,080	20,046,627		
t As	21	Total liabili	ies (Part X, line 26)			2,	175,578	2,123,622		
_			or fund balances. Subtract line 2	21 from line 20	<u></u>	17,	180,502	17,923,005		
Pa	art II	Signatu	re Block							
			I declare that I have examined this return					knowledge and belief, it is		
ıru	e, correct,	and complete	e. Declaration of preparer (other than office	er) is based on all information (	or which prepa	•	•	٥٦		
٥.							04/15/20	<u> </u>		
Sign		Signature	of officer			Da	te			
He	ere	SEAN WA	LLINGER, TREASURER							
		Type or pr	nt name and title							
Pa	id	Print/Type	preparer's name Pre	parer's signature	, ,	Date		if PTIN		
	eparer	ASHLEY	PEABODY	Ushley K Year	20dy	4/16/2025	self-employ	/ed P01385870		
	e Only	L Lives's man			1	Firm'	s EIN	33-2621854		
	Oiliy	Firm's add	ress 345 MASSACHUSETTS AVE	SUITE 300, INDANAPOLI	S, IN 46204	Phon	e no.	(505) 502-2746		
Ма	y the IRS	S discuss t	his return with the preparer shov	wn above? See instruction	ons			. 🗹 Yes 🗌 No		
For	Paperwo	ork Reduct	on Act Notice, see the separate in	nstructions.	Cat.	No. 11282Y		Form <b>990</b> (2023)		

Part	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	YOUTH FOR CHRIST REACHES YOUNG PEOPLE EVERYWHERE, WORKING TOGETHER WITH THE LOCAL CHURCH AND
	OTHER LIKE MINDED PARTNERS TO RAISE UP LIFELONG FOLLOWERS OF JESUS, WHO LEAD BY THEIR GODLINESS IN LIFESTYLE, DEVOTION TO THE WORD OF GOD AND PRAYER, PASSION FOR SHARING THE LOVE OF CHRIST,
	AND COMMITMENT TO SOCIAL INVOLVEMENT.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
3	If "Yes," describe these new services on Schedule O.  Did the organization cease conducting, or make significant changes in how it conducts, any program
Ū	services?
_	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,
	the total expenses, and revenue, if any, for each program service reported.
4a	(Code: ) (Expenses \$ 4,056,291 including grants of \$ 644,130 ) (Revenue \$ 1,293,955 )
	CHAPTER SERVICES: STAFF AND ACTIVITIES DEVOTED TO PROVIDING SERVICES TO YFC CHAPTERS TO ASSIST
	CHAPTERS IN MOVING FORWARD WITH THE YFC MISSION. EXAMPLES INCLUDE YFCAMP, STAFF TRAINING, AND
	STAFF DEVELOPMENT.
4b	(Code:) (Expenses \$ 2,784,116 including grants of \$ 25,868 ) (Revenue \$ 1,707,469 )
	FIELD LEADERSHIP: STAFF AND ACTIVITIES DEVOTED TO PROVIDING GUIDANCE AND LEADERSHIP TO YFC
	CHAPTERS. EXAMPLES INCLUDE FIELD DIRECTORS, NATIONAL MINISTRY DIRECTORS, AND EXPANSION PLANNING.
4c	(Code: ) (Expenses \$ 2,345,642 including grants of \$ ) (Revenue \$ )
	CHAPTER LAUNCHES: MISSION ACTIVITY SERVING 11-19 YEAR OLDS IN THE U.S. AND ON U.S. MILITARY
	BASES AROUND THE WORLD.
	Other program services (Describe on Schedule O.)
4d	Other program services (Describe on Schedule O.) (Expenses \$ 2,325,956 including grants of \$ 4,000 ) (Revenue \$ 2,118,755 )
4e	Total program service expenses 11 512 005

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

Part I	V Checklist of Required Schedules (continued)		-	
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		_
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	,	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	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		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 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 Schedule L, Part I	25b		_
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		~
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? 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).			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		~
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		~
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		,
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		~
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		,
31 32	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	31		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If</i> "Yes," <i>complete Schedule R, Part I</i>	33		,
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	_	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	~	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	~	
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36		,
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		,
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O	38	~	
Part				
	Check if Schedule O contains a response or note to any line in this Part V			
_	Enter the manches were arted in heavily of Ferral 1999. Enter 1999 if the transit of the		Yes	No
1a b	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	~	

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		100	140
	Statements, filed for the calendar year ending with or within the year covered by this return  2a 146			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	~	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		~
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O .	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		~
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		~
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		~
_	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			
<b>L</b>	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		~
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a	/	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	~	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		~
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		~
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		~
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h 8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? <b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the	7h		
U	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	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.	13a		
а	Is the organization licensed to issue qualified health plans in more than one state?	ısa		
b	Enter the amount of reserves the organization is required to maintain by the states in which			
-	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		~
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		~
	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		~
	If "Yes," complete Form 4720, Schedule O.			
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.			

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Section A. Governing Body and Management No Yes 1a Enter the number of voting members of the governing body at the end of the tax year . . . 1a 14 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. Enter the number of voting members included on line 1a, above, who are independent . 13 1b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, trustees, or key employees to a management company or other person? . 3 4 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 6 6 ~ Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b V Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O . . . . . 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No **10a** Did the organization have local chapters, branches, or affiliates? 10a V If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 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. **12a** Did the organization have a written conflict of interest policy? *If "No," go to line 13* 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b 1 Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 Did the organization have a written whistleblower policy? . . . . . . . . . . . . 13 ~ 14 14 Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official . . . 15a 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed NONE 17 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) 18 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website ✓ Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 19 and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records. SEAN WALLINGER, PO BOX 4478, ENGLEWOOD, CO 80155, (303) 843-9000

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

#### 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	on nor any relate	d org	aniz		on c C)	ompe	nsa	ted any current	officer, director,	or trustee.
(A)	(B)	Position (do not check more than one				a than a	200	(D)	(E)	(F)
Name and title	Average hours per week	box,	unles	ss pe	rson	is both or/trust	n an	Reportable compensation from the	Reportable compensation from related	Estimated amount of other compensation
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former		organizations (W-2/ 1099-MISC/ 1099-NEC)	from the organization and related organizations
(1) JACOB D. BLAND	50.0									
PRESIDENT/CEO	1.0	~		~				160,834	0	68,899
(2) ALISON J. KING	50.0									
CORPORATE VICE-PRESIDENT				~				156,465	0	7,271
(3) SEAN WALLINGER	50.0									
TREASURER/CFO	1.0			~				142,946	0	6,248
(4) NATHAN JONES	1.0									
PRESIDENT, YFC FOUNDATION						~		110,362	0	11,171
(5) MATT RIDGELY	50.0									
VP OF PEOPLE STEWARDSHIP						~		111,281	0	3,335
(6) KEVIN BUSSEMA	50.0									
VP STRATEGIC ALIGNMENT						~		111,692	0	1,048
(7) GUNNAR JOHNSON	50.0									
VP OF MISSION INVESTMENT						~		103,208	0	1,403
(8) BARRY C. HUEBNER	1.0									
CHAIR / SECRETARY		~		~				0	0	0
(9) K. GAY BROWN	1.0									
VICE CHAIR		~		~				0	0	0
(10) LUTHER A. BRADLEY	1.0									
TRUSTEE		1						0	0	0
(11) LYNN M. BREEN	1.0									
TRUSTEE		~						0	0	0
(12) ANDRE' DANTZLER	1.0									
TRUSTEE		~						0	0	0
(13) SHERYL A. HAUSHALTER	1.0									
TRUSTEE		~						0	0	0
(14) GILBERT T. HERNANDEZ	1.0									
TRUSTEE		~						0	0	0

Part	VII Section A. Officers, Directors, 1	Trustees,	Key	Emį	plo	yee	s, an	d F	lighest Compe	nsated	Emplo	yees (	contir	nued)	
	(4)	(5)			•	<b>C)</b> sition			)	<b>(=</b> )			<b>(</b> =)		
	(A) Name and title	(B) Average hours	Average hours per week hours					n an	(D)  Reportable compensation from the	(E)  Reportable compensation from related		0	(F) Estimated amount of other compensation		
		(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former		organizatio 1099-N 1099-N	ns (W-2/ 1ISC/	fr	om the	and	
		dotted line)	ď	stee			sated								
	J. ADELE LACOMBE	1.0									_			_	
TRUS	DEREK S. JACOBSEN	1.0	~						0		0			0	
TRUS		1.0	_						0		0			0	
	DANIEL S. KREGEL	1.0	Ť						0						
TRUS			~						0		0			0	
(18)	ROBERT C. MOELLER	1.0													
TRUS	TEE		~						0		0			0	
(19) TRUS	SHANI P. WILFRED TEE	1.0	,						0		0			0	
	HADDON R. ANDERSON	1.0													
TRUS (21)	RTEE		~						0		0	0		0	
(21)															
(22)															
(23)															
(24)															
(25)															
1b c	Subtotal Total from continuation sheets to Part	 VII, Sectio	 n A						896,788		0		9	9,375	
d	Total (add lines 1b and 1c)								896,788		0		9	9,375	
2	Total number of individuals (including but reportable compensation from the organi		to th	iose	e list	ted	above	e) w	ho received more 7	e than \$1	00,000	of			
_	B. 1. 11	· · ·											Yes	No	
3	Did the organization list any <b>former</b> of employee on line 1a? <i>If "Yes," complete</i> s								loyee, or highes 	-					
4	For any individual listed on line 1a, is the											3			
7	organization and related organizations individual												~		
5	Did any person listed on line 1a receive of for services rendered to the organization								,	ion or inc				~	
Sect	ion B. Independent Contractors		7011161			7001		0, 0		· · ·		5			
1	Complete this table for your five high compensation from the organization. Repo														
	(A) Name and business add	ress							(B) Description of serv	rices		(C)	ation		
STER	LLING VOLUNTEERS, PO BOX 9469, NEW YOR		7-946	9				VC	DLUNTEER VETTIN		<u>'</u>	Compone	Compensation 148,810		
	TECHNOLOGY, 2823 CARLISLE AVE., RACINE							_	FORMATION TEC					7,064	

Total number of independent contractors (including but not limited to those listed above) who

received more than \$100,000 of compensation from the organization

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Part VIII Statement of Revenue

		Check if Schedule	Осо	ntains a re	spon	se or note to ar	ny line in this Pa	ırt VIII		🗆
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
Š, Š	1a	Federated campaign	ns .		1a					
Contributions, Gifts, Grants, and Other Similar Amounts	b				1b					
ည် ရှိ	С	Fundraising events			1c					
rts,	d	Related organization			1d					
E E	е	Government grants			1e					
ns,	f	All other contribution								
ë S		and similar amounts no	ot inclu	uded above	1f	8,764,226				
ğ ţ	g	Noncash contribution	ns in	cluded in		, ,				
d tr	_	lines 1a-1f			1g	\$				
a Co	h	Total. Add lines 1a-	-1f .				8,764,226			
		'				Business Code				
e Ce	2a	INSURANCE PREMIL	JMS			524298	2,118,755	2,118,755		
ه ≧َ	b	MEMBERSHIP DUES				561000	1,707,469	1,707,469		
Program Service Revenue	С	CONFERENCE/CON		ION		611710	521,304	521,304		
E Š	d						,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Re	e									
ro	f	All other program se	ervice	revenue		900099	772,651	772,651	0	0
-	g	<b>Total.</b> Add lines 2a-					5,120,179	,	-	-
	3	Investment income								
		other similar amoun					522,732			522,732
	4	Income from investn	nent d	of tax-exem	not ba	nd proceeds	, -			
	5	Daniellia					107			107
	-			(i) Rea	l	(ii) Personal				
	6a	Gross rents	6a	3	6,884					
	b	Less: rental expenses	6b		5,572					
	C	Rental income or (loss)	6c		1,312	0				
	d	Net rental income of					21,312			21,312
	7a	Gross amount from	(1000	(i) Securit		(ii) Other	21,012			21,012
	<i>i</i> u	sales of assets		()		(,, -	-			
		other than inventory	7a							
ø	b	Less: cost or other basis								
ב		and sales expenses .	7b							
Revenue	С	Gain or (loss)	7c		0	0				
		Net gain or (loss)								
Other		Gross income from								
ŏ	ou	events (not including		naraioing						
		of contributions rep		d on line						
		1c). See Part IV, line			8a					
	b	Less: direct expense	es .		8b					
	С	Net income or (loss)			a eve	nts				
	9a	Gross income f			Ĭ					
		activities. See Part I	V, line	e 19 .	9a					
	b	Less: direct expense	es .		9b					
	C	Net income or (loss)			ctivitie	es				
	10a	Gross sales of in	vento	ory, less						
		returns and allowand			10a					
	b	Less: cost of goods	sold		10b					
	С	Net income or (loss)				ory				
S		, ,				Business Code				
Miscellaneous Revenue	11a									
scellaneo Revenue	b									
eli e	C									
<u>s</u>	d						0	0	0	0
Σ	е	Total. Add lines 11a	a–11d	1			0			
	12	Total revenue. See					14,428,556	5,120,179	0	544,151

#### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	Check if Schedule O contains a response	or note to any line	in this Part IX .		
Do no	ot include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	(D)
	o, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundráising expenses
1	Grants and other assistance to domestic organizations		охроносс	gonoral expenses	охроново
	and domestic governments. See Part IV, line 21 .	673,998	673,998		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	0.0,000	3.0,000		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	556,910	361,992	139,228	55,690
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	6,065,867	5,114,272	692,353	259,242
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	159,924	129,400	22,199	8,325
9	Other employee benefits	1,265,788	1,072,993	139,853	52,942
10	Payroll taxes	401,561	329,269	52,438	19,854
11	Fees for services (nonemployees):				
а	Management				
b	Legal	55,979	55,979		
С	Accounting	46,703		46,703	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	37,864		37,864	
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A), amount, list line 11g expenses on Schedule O.) .	864,795	746,345	31,519	86,931
12	Advertising and promotion	12,271	5,130	5,778	1,363
13	Office expenses	382,645	103,032	173,764	105,849
14	Information technology	581,857	492,425	87,581	1,851
15	Royalties				
16	Occupancy	187,337	69,592	103,567	14,178
17 18	Travel	595,926	499,420	31,840	64,666
19	Conferences, conventions, and meetings .	840,396	571,820	6,624	261,952
20	Interest	·			<u> </u>
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	19,507	16,681	2,038	788
23	Insurance	1,125,236	1,104,762	20,474	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
а	MINISTRY EXPENSE	127,560	126,330	1,230	
b	BAD DEBT	44,437	17,688	26,749	
С					
d					
е	All other expenses	25,115	20,877	4,238	0
25	Total functional expenses. Add lines 1 through 24e	14,071,676	11,512,005	1,626,040	933,631
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720)				

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#### Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Par	t X							
			(A) Beginning of year		<b>(B)</b> End of year					
	1	Cash—non-interest-bearing	942,526	1	156,387					
	2	Savings and temporary cash investments	5,297,928	2	3,565,444					
	3	Pledges and grants receivable, net	774,000	3	3,094,536					
	4	Accounts receivable, net	630,669	4	274,882					
	5	trustee, key employee, creator or founder, substantial contributor, or 35%								
	_		0	5	0					
	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)	0	6	0					
ts	7	Notes and loans receivable, net		7						
Assets	8	Inventories for sale or use		8						
Ä	9	Prepaid expenses and deferred charges	578,208	9	514,969					
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 2,298,825								
	b	Less: accumulated depreciation <b>10b</b> 1,131,226	1,189,622	10c	1,167,599					
	11	Investments—publicly traded securities	8,155,024	11	9,462,363					
	12	Investments – other securities. See Part IV, line 11	0	12	0					
	13	Investments—program-related. See Part IV, line 11	1,758,921	13	1,780,896					
	14	Intangible assets		14						
	15	Other assets. See Part IV, line 11	29,182	15	29,551					
	16	Total assets. Add lines 1 through 15 (must equal line 33)	19,356,080	16	20,046,627					
	17	Accounts payable and accrued expenses	436,239	17	587,164					
	18	Grants payable		18						
	19	Deferred revenue	1,727,055	19	1,524,679					
	20	Tax-exempt bond liabilities		20						
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21						
Liabilities	22	Loans and other 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								
jap			0	22	0					
_	23	Secured mortgages and notes payable to unrelated third parties		23						
	24 25	Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X		24						
		of Schedule D	12,284	25	11,779					
	26	Total liabilities. Add lines 17 through 25	2,175,578	26	2,123,622					
nces		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.								
<u>ala</u>	27	Net assets without donor restrictions	14,296,609	27	13,875,423					
8	28	Net assets with donor restrictions	2,883,893	28	4,047,582					
Net Assets or Fund Balances		Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.								
ō	29	Capital stock or trust principal, or current funds		29						
ěts	30	Paid-in or capital surplus, or land, building, or equipment fund		30						
ASS	31	Retained earnings, endowment, accumulated income, or other funds .		31						
et /	32	Total net assets or fund balances	17,180,502	32	17,923,005					
Ž	33	Total liabilities and net assets/fund balances	19,356,080	33	20,046,627					
					Form <b>990</b> (2023)					

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Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI				~	
1	Total revenue (must equal Part VIII, column (A), line 12)			14,42	8,556	
2	Total expenses (must equal Part IX, column (A), line 25)			14,07	1,676	
3	Revenue less expenses. Subtract line 2 from line 1			35	6,880	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))			17,18	0,502	
5	Net unrealized gains (losses) on investments			25	5,648	
6	Donated services and use of facilities					
7	Investment expenses					
8	Prior period adjustments					
9	Other changes in net assets or fund balances (explain on Schedule O)			12	9,975	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))			17,92	3,005	
Part	XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
		_		Yes	No	
1	1 Accounting method used to prepare the Form 990:   Cash Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both.					
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis					
b		. [	2b	<b>'</b>		
	If "Yes," check a box below to indicate whether the financial statements for the year were audited separate basis, consolidated basis, or both.	on a				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig					
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	~		
	If the organization changed either its oversight process or selection process during the tax year, explai Schedule O.	n on				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		,	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b			