

UHY Advisors Midwest, Inc. 15 Sunnen Drive Suite 100 St. Louis, MO 63143 Phone: 314-615-1200 Fax: 314-647-8304

October 23, 2024

Programs of Religious Activities With Youth 11123 S Towne Sq B Saint Louis, MO 63123-7816

Dear Jason:

Enclosed is the 2023 Exempt Organization Return, as follows...

2023 Form 990

We have completed the return(s) in accordance with the scope and terms of the engagement letter. The return(s) were completed from information you furnished to us. We have not audited or otherwise verified the data you submitted, although we may have asked you to clarify some of the information.

All of the information you submitted to us was, to the best of your knowledge, correct and complete and included all income, deductions, and other data necessary for the preparation of your income tax return(s). You are responsible for keeping the necessary records to support the information within your return(s). It is important that you review your records to ensure that you have the documentation for these income and expense items. If you find that the documentation is incomplete or incorrect, please notify our office to discuss the propriety of amending these returns.

Enclosed are any original documents that you may have provided to us for the preparation of your returns. We may have retained copies of some or all of the documents, but you should maintain all of the original documents and records to support your return.

Your return(s), of course, are subject to review by the taxing authorities. Any items resolved against you are subject to certain rights of appeal. In the event of any examination, we will be available to represent you as a separate engagement.

The Internal Revenue Code and states provides for numerous penalties. They include penalty for omitting income, failure to file informational returns (such as 1099's or various reporting requirements related to foreign activities), substantial underpayment of tax liability and numerous others. The taxing authorities have indicated they will assess penalties vigorously. Please contact us if you believe that there are any additional filings required that have not been prepared.

The <u>FILING INSTRUCTIONS</u>, which are included with each return, provide information on how to file your return, the due date of the return, and the amount of your refund or amounts due.

Please review the return(s) prior to filing with the taxing authority. Should you have any questions regarding the return(s), please contact us.

You should retain a copy of the return(s) for your files.

We sincerely appreciate the opportunity to work with you, and we look forward to our continued relationship.

Very truly yours,

Vanessa Bowles

Vanessa Bowles UHY Advisors

TAX RETURN FILING INSTRUCTIONS

FORM 990

FOR THE YEAR ENDING

June 30, 2024

Pre	pa	rec	d F	or:
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Programs of Religious Activities With Youth 11123 S Towne Sq B Saint Louis, MO 63123-7816

Prepared By:

UHY Advisors Midwest, Inc. 15 Sunnen Drive, Suite 100 St. Louis, MO 63143-3819

Amount Due or Refund:

Not applicable

Make Check Payable To:

Not applicable

Mail Tax Return and Check (if applicable) To:

Not applicable

Return Must be Mailed On or Before:

Not applicable

Special Instructions:

This return has been prepared for electronic filing. If you wish to have it transmitted electronically to the IRS, please sign, date, and return Form 8879-TE to our office. We will then submit the electronic return to the IRS. Do not mail a paper copy of the return to the IRS. Return Form 8879-TE to us by November 15, 2024.

Form 8879-TF

IRS E-file Signature Authorization for a Tax Exempt Entity

0000 and anding	JUN	3 0	. 20 2 4
. 2023, and ending	O OM	30	, 20 Z 4

OMB No. 1545-0047

Department of the Treasury

Do not send to the IRS. Keep for your records.

For calendar year 2023, or fiscal year beginning JUL 1

Go to www.irs.gov/Form8879TE for the latest information. Internal Revenue Service PROGRAMS OF RELIGIOUS ACTIVITIES EIN or SSN Name of filer 43-1166906 WITH YOUTH JASON NOLAND Name and title of officer or person subject to tax CEO Part I Type of Return and Return Information Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I. b Total revenue, if any (Form 990, Part VIII, column (A), line 12) ______ 1b ____ 238, 406. Form 990 check here 1a **b Total revenue,** if any (Form 990-EZ, line 9) 2a Form 990-EZ check here b Total tax (Form 1120-POL, line 22) Form 1120-POL check here 3a Tax based on investment income (Form 990-PF, Part V, line 5) 4a Form 990-PF check here b Balance due (Form 8868, line 3c) 5b Form 8868 check here 5a Form 990-T check here b Total tax (Form 990-T, Part III, line 4) 6b 6a Form 4720 check here 7a b Total tax (Form 4720, Part III, line 1) 7b b FMV of assets at end of tax year (Form 5227, Item D) 8b 8a Form 5227 check here **b Tax due** (Form 5330, Part II, line 19) Form 5330 check here 9a 10a Form 8038-CP check here **b** Amount of credit payment requested (Form 8038-CP, Part III, line 22) Declaration and Signature Authorization of Officer or Person Subject to Tax Under penalties of perjury, I declare that X I am an officer of the above entity or I I am a person subject to tax with respect to (name , (EIN) and that I have examined a copy of the 2023 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the processing the restriction account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the payment of the federal taxes owed on this return, and the payment of the federal taxes owed on this return, and the payment of the federal taxes owed on this return, and the payment of the federal taxes owed on this return, and the payment of the federal taxes owed on this return, and the payment of the federal taxes owed on this return, and the payment of the federal taxes owed on this return, and the payment of the federal taxes owed on this return, and the payment of the federal taxes owed on this return, and the payment of the federal taxes owed on this return, and the payment of the federal taxes owed on this return, and the payment of the federal taxes owed on this return, and the payment of the federal taxes owed on this return, and the payment of the federal taxes owed on this return, and the payment of the federal taxes owed on the payment of the federal tax financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal. PIN: check one box only X Lauthorize UHY ADVISORS MIDWEST, INC. 55301 to enter my PIN Enter five numbers, but ERO firm name do not enter all zeros as my signature on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen. As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program. I will enter my PIN on the return's disclosure consent screen. **Certification and Authentication** Part III ERO's EFIN/PIN. Enter your six-digit electronic filing identification 43387066666 number (EFIN) followed by your five-digit self-selected PIN. I certify that the above numeric entry is my PIN, which is my signature on the 2023 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. VANESSA BOWLES 10/23/24 ERO's signature Date **ERO Must Retain This Form - See Instructions** Do Not Submit This Form to the IRS Unless Requested To Do So

Form **8879-TE** (2023)

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

Department of the Treasury Internal Revenue Service

A For the 2023 calendar year, or tax year beginning

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

2023

and ending JUN 30,

2024

JUL 1,

	OMB No. 1545-0047
)	2023
	Open to Public Inspection
	шересиен
tic	on number
6	
3	18
	250,476.
ırr	
	Yes X No
	ed? Yes No
	See instructions
	imber
Sta	ate of legal domicile: MO
	/DATE TAT
11	MENT IN
ts.	

В	Check if applicable	C Name of organization PROGRAMS OF RELIGIOUS ACTIVITIES	D Employer identifie	cation number
Г	Addre	SS TITEL IZOLEMI		
F	Name chang		43-11669	06
Ē	Initial return			
	Final return	11123 C TOWNE CO	314-845-	3318
	termir		G Gross receipts \$	250,476.
	Amen return		H(a) Is this a group re	eturn
	Application	Finame and address of principal officer:	for subordinates	
	pendi	SAME AS C ABOVE	H(b) Are all subordinates in	cluded? Yes No
ı	Tax-ex	empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 5	27 If "No," attach a	list. See instructions
J	Websi		H(c) Group exemption	
			ar of formation: 1976	1 State of legal domicile: MO
P	art I	Summary		
ė	1	Briefly describe the organization's mission or most significant activities: PROMOTING RELIGIOUS ACTIVITIES	YOUTH INVOLV	/EMENT IN
Activities & Governance			ure then OEO/ of its not see	unto.
ern	2	Check this box if the organization discontinued its operations or disposed of mo	1 1	ets.
Ó	3	Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b)		8
0	5 5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)		
ţi.	6	Total number of volunteers (estimate if necessary)		2329
:	7 2	Total unrelated business revenue from Part VIII, column (C), line 12		0.
Ă	' b	Net unrelated business taxable income from Form 990-T, Part I, line 11		0.
	1 -		Prior Year	Current Year
4	8	Contributions and grants (Part VIII, line 1h)	10,552.	20,569.
Revenue	9	Program service revenue (Part VIII, line 2g)	195,324.	198,655.
eve	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	18,894.	19,182.
α	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	0.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	224,770.	238,406.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	120,650.	114,677.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
Ž	b	Total fundraising expenses (Part IX, column (D), line 25) 2,558.	127 700	142 205
	''	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	137,790. 258,440.	143,205.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	-33,670.	257,882. -19,476.
	19 n	Revenue less expenses. Subtract line 18 from line 12	Beginning of Current Year	End of Year
Net Assets or	20		625,325.	631,881.
4SSe	21	T. 1.17.1777 (D. 1.17.17.	31,237.	29,655.
let.	22	Net assets or fund balances. Subtract line 21 from line 20	594,088.	602,226.
Р	art II	Signature Block	02 = 7 0 0 0 1	
Und	der pena	alties of perjury, I declare that I have examined this return, including accompanying schedules and state	ments, and to the best of my	knowledge and belief, it is
true	e, correc	ct, and complete. Declaration of preparer (other than officer) is based on all information of which prepa	rer has any knowledge.	-
Sig	ın	Signature of officer	Date	
He	re	JASON NOLAND, CEO		
		Type or print name and title		
		Print/Type preparer's name Preparer's signature	Date Check C	PTIN
Pai		VANESSA BOWLES VANESSA BOWLES	10/23/24 self-employ	
	parer	Firm's name UHY ADVISORS MIDWEST, INC.	Firm's EIN 4	3-1305800
Use	Only	Firm's address 15 SUNNEN DRIVE, SUITE 100		A C1E 1000
		ST. LOUIS, MO 63143-3819	Phone no. 3 T	4-615-1200
Ma	y the II	RS discuss this return with the preparer shown above? See instructions		X Yes No

Form		-1166906	Page 2
Pai	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		\square
1	Briefly describe the organization's mission:		
	THE ORGANIZATION PROMOTES CHRISTIAN GROWTH OF YOUTH THROUGH	CHURCHES	
	AND YOUTH SERVING AGENCIES.		
2	Did the organization undertake any significant program services during the year which were not listed on the		
_	prior Form 990 or 990-EZ?	Yes	XNo
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	X No
3	If "Yes," describe these changes on Schedule O.		_21_ NO
4	•	rad bu avaanaa	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measur		1
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the t	otal expenses, al	na
_	revenue, if any, for each program service reported.	100	665.)
4a	/\/\/\/\/\/\/\/\/\/\/\/\/\/\/\		
	PROGRAMS OF RELIGIOUS ACTIVITIES WITH YOUTH (P.R.A.Y.) PROMO		н
	INVOLVEMENT IN RELIGIOUS ACTIVITIES THROUGH PARTICIPATION IN		
	PROGRAMS. THE ORGANIZATION PROVIDES RELIGIOUS MEDALS, AWARDS		
	EDUCATIONAL MATERIALS TO CHILDREN PARTICIPATING IN CHURCH AN	ID YOUTH	
	SERVING AGENCY PROGRAMS.		
4b	(Code:) (Expenses \$)
4c	(Code:) (Expenses \$)
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$\frac{\text{including grants of \$}}{\text{(Revenue \$}})	
4e	Total program service expenses 213, 216.		
		Form 9	90 (2023)

Form 990 (2023) WITH YOUTH
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		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
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		X
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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
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			
	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, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			l
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		7.7	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			,,
	Schedule D, Parts XI and XII	12a		X
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		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			_ v
4-	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	4-		v
40	foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		X
16		4.0		v
47	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	47		X
10	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part 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	40		х
10	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,"	40		x
20-	complete Schedule G, Part III	19 20a		X
20a b	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a 20b		
21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
۲۱	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x
	domestic government on traiting column (-), into 1: 11 Yes, complete scriedule I, Parts I and II	41		

Form 990 (2023) WITH YOUTH
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	22		X
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			
	Schedule J	23		X
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	1		37
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	050		X
L	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
D	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			
	, ,	25b		X
26	Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	230		
26				
	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</i> "Yes," <i>complete Schedule L, Part II</i>	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,	20		
21	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		x
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? <i>If</i>			
-	"Yes," complete Schedule L, Part IV	28a		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		х
	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		X
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?		v	1
Par	Note: All Form 990 filers are required to complete Schedule O rt V Statements Regarding Other IRS Filings and Tax Compliance	38	X	
ı aı				
	Check if Schedule O contains a response or note to any line in this Part V			
4 -	Enter the number reported in box 2 of Form 1006. Enter 0, if not applicable		Yes	No
_	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 1b	1		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b Under the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	4		
U		1c	Х	
	(gambling) winnings to prize winners?	110	_ _	

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

				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 2								
	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?	2b 3a	X	Х					
	3a Did the organization have unrelated business gross income of \$1,000 or more during the year?									
	b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O									
4a	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)?										
b	If "Yes," enter the name of the foreign country	(EDAD)								
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).										
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X					
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction that it was or is a party to a prohibited tax shelter transaction file Form 2006 T2		5b							
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c							
oa	Does the organization have annual gross receipts that are normally greater than \$100,000, and did th any contributions that were not tax deductible as charitable contributions?		6a		Х					
h	If "Yes," did the organization include with every solicitation an express statement that such contributions.	one or gifte	Ua		- 21					
b		· ·	6b							
7	were not tax deductible? Organizations that may receive deductible contributions under section 170(c).		OD							
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices provided to the payor?	7a		Х					
		vices provided to the payor.	7b							
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was		1.2							
_	to file Form 8282?	•	7c		Х					
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d								
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co		7e							
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra		7f							
g										
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?										
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?										
9 Sponsoring organizations maintaining donor advised funds.										
a Did the sponsoring organization make any taxable distributions under section 4966?										
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b							
10	Section 501(c)(7) organizations. Enter:	l I								
а	Initiation fees and capital contributions included on Part VIII, line 12	10a	4							
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	-							
11	Section 501(c)(12) organizations. Enter:	l I								
_	Gross income from members or shareholders	11a	-							
b	Gross income from other sources. (Do not net amounts due or paid to other sources against	445								
120	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	10412	10-							
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	1041? 12b	12a							
13 D	Section 501(c)(29) qualified nonprofit health insurance issuers.	1±W								
	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.		100							
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	13b								
С	Enter the amount of reserves on hand	13c								
			14a		Х					
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul		14b							
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner									
	excess parachute payment(s) during the year?									
	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		Х					
	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 ac									
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17							
	If "Yes," complete Form 6069.									

Form 990 (2023)

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

<u> </u>							X	
Sec	tion A. Governing Body and Management							
			I	۰.		Yes	No	
1a	Enter the number of voting members of the governing body at the end of the tax year	<u>1a</u>		8				
	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.							
b	Enter the number of voting members included on line 1a, above, who are independent	1b		8				
2	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?			. L	2		X	
3	Did the organization delegate control over management duties customarily performed by or under the	direc	t supervision					
	of officers, directors, trustees, or key employees to a management company or other person?			. L	3		X	
4	Did the organization make any significant changes to its governing documents since the prior Form 9	90 wa	s filed?	[4		X	
5	Did the organization become aware during the year of a significant diversion of the organization's ass	ets?			5		Х	
6	Did the organization have members or stockholders?			`` Г	6	Х		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap			· [
	more members of the governing body?				7a	X		
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st							
	persons other than the governing body?				7b	Х		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the yea							
	The governing body?	-	=		8a	Х		
b	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 read			·	OD			
3	organization's mailing address? <i>If</i> "Yes." <i>provide the names and addresses on Schedule O</i>				9		х	
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re				3			
	This Section B requests information about policies not required by the internal Re	<u>veriue</u>	Code.)			Yes	No	
102	Did the organization have local chapters, branches, or affiliates?			Γ	10a	163	X	
	If "Yes," did the organization have written policies and procedures governing the activities of such ch			· -	iva			
b					10b			
112	Has the organization provided a complete copy of this Form 990 to all members of its governing body		re filing the form?	· ·	11a	Х		
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	, peloi	e illing the loint!	H	Ha	21		
	Did the organization have a written conflict of interest policy? If "No," go to line 13				12a	Х		
				- 1	12b	X		
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			··	120	- 21		
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	,			40-	Х		
40	on Schedule O how this was done				12c	X		
13	Did the organization have a written whistleblower policy?			` Г	13	X		
14	Did the organization have a written document retention and destruction policy?			.	14	Λ		
15	Did the process for determining compensation of the following persons include a review and approva	i by in	dependent					
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					37		
	The organization's CEO, Executive Director, or top management official				15a	X		
b	Other officers or key employees of the organization			.	15b	X		
	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	nent w	rith a					
	taxable entity during the year?			L	16a		X	
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	e its p	articipation					
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ							
	exempt status with respect to such arrangements?			.	16b			
	tion C. Disclosure							
17	List the states with which a copy of this Form 990 is required to be filedNONE							
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, ar	nd 990	9-T (section 501(c)	(3)s (only) a	availal	ole	
	for public inspection. Indicate how you made these available. Check all that apply.							
	X Own website Another's website Upon request Other (explain	on Sc	chedule O)					
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co	nflict o	of interest policy, a	and f	financ	ial		
	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 boo	ks and	d records					
	JASON NOLAND - (314) 845-3318							
	11123 S TOWNE SQUARE STE. B, SAINT LOUIS, MO 63123	}						

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.

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

- 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.

(A) Name and title	(B) Average	(do	not c	Pos	C) ition	than o	one	(D) Reportable	(E) Reportable	(F) Estimated				
	hours per week	box	, unle	ss pei	rson i	s both r/trus	an	compensation from	compensation from related	amount of other compensation				
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	y employee ghest compensated nployee rmer		Key employee Highest compensated employee Former		ey employee ighest compensated mployee ormer		the organization (W-2/1099-MISC/ 1099-NEC)	ization (W-2/1099-MISC/ 99-MISC/ 1099-NEC)	
(1) CHARLES FLOWERS	1.00	.,		Ι,,					_					
PRESIDENT	1 00	Х		Х				0.	0.	0.				
(2) TRACY KELLER VICE - PRESIDENT	1.00	Х		х				0.	0.	0.				
(3) SEDRICK ROBINSON	1.00							•	•	<u>·</u>				
SEC/TREASURER	1.00	х		х				0.	0.	0.				
(4) REV. DR. SANDRA STEINER-BALL	1.00							-	-	-				
DIRECTOR		Х						0.	0.	0.				
(5) STARLETT GEISZ	1.00													
DIRECTOR		Х						0.	0.	0.				
(6) GINNY HILL	1.00													
DIRECTOR		Х						0.	0.	0.				
(7) BRIAN NEWBERRY	1.00							_	_	_				
DIRECTOR		Х						0.	0.	0.				
(8) JON YATES	1.00													
DIRECTOR	40.00	X	_					0.	0.	0.				
(9) JASON NOLAND CEO	40.00			х				97,000.	0.	0.				

(C)

Position

(do not check more than one box, unless person is both an officer and a director/trustee)

(D)

Reportable

compensation

from

(B)

Average

hours per

week

(A)

Name and title

(E)

Reportable

compensation

from related

Page 8

(F)

Estimated

amount of

other

		(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizatior (W-2/1099-MIS 1099-NEC)	SC/	fr org an	pensa om th anizat d relat anizati	ie tion ted
	Subtotal								97,000.		0.			0.
	Total from continuation sheets to Part VII	, Section A							0.		0.			0.
<u>d</u> 2	Total (add lines 1b and 1c) Total number of individuals (including but no								97,000.	000 of reportable	0.			0.
_	compensation from the organization						,		, and the trial of					0
3	Did the organization list any former officer,	director trusta	امد	· OV 6	mnl	OVO	a or	hia	sheet compensated emp	lovee on			Yes	No
3	line 1a? If "Yes," complete Schedule J for so											3		Х
4	For any individual listed on line 1a, is the su											4		Х
5	and related organizations greater than \$150 Did any person listed on line 1a receive or a											4		
_	rendered to the organization? If "Yes." com											5		Х
Sec 1	tion B. Independent Contractors Complete this table for your five highest con	mpensated ind	ene	nde	nt co	ontra	acto	rs th	nat received more than \$	100,000 of com	pensa	tion fro	om	
	the organization. Report compensation for t													
	(A) Name and business	address	NC	NI	3				(B) Description of s	ervices	С)) ompe		n
2	Total number of independent contractors (in	•	ot lin	nited	d to			ted	above) who received mo	ore than				
	\$100,000 of compensation from the organiz	ation				()					Form	990 <i>(</i>	(2023)
332008	3 12-21-23											, 5,111	(_020)

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Form 990 (2023) WITH YO
Part VIII Statement of Revenue

		Check if Schedule O contains a respon-	se or note to any lin	e in this Part VIII			
				(A)	(B)	(C)	(D)
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under
Total. Add Total.				Turiction revenue	business revenue	sections 512 - 514	
Siα	1 a	Federated campaigns 1a					
ant							
2 5		Fundraising events 1c					
fts,		Related organizations 1d					
ية							
Sir		3 · · · · · · · · · · · · · · · · · · ·					
utic er	т	All other contributions, gifts, grants, and	20,569.				
章된		similar amounts not included above 1f	20,309.				
on od	_			20 560			
O g	h	Total. Add lines 1a-1f		20,569.			
			Business Code	100 655	100 655		
S	2 a	PROGRAMS OF RELIGIOUS	_ 611710	198,655.	198,655.		
ē Ķ	b		_				
Se	С						
ar eve	d		_				
go H	е						
4	f	All other program service revenue					
	g	Total. Add lines 2a-2f		198,655.			
	3	Investment income (including dividends, int	erest, and				
		other similar amounts)		15,952.			15,952.
	4	Income from investment of tax-exempt bond					
	5	Royalties					
		(i) Real	(ii) Personal				
	6 a	Gross rents 6a					
	b	Less: rental expenses 6b					
	c	Rental income or (loss) 6c					
	q	Net rental income or (loss)					
		Gross amount from sales of (i) Securitie	s (ii) Other				
	, u	assets other than inventory 7a 15,300					
	h	Less: cost or other basis	, ,				
Φ	b	and sales expenses)				
ğ	_)				
eve			•	3,230.			3,230.
ت ھ		Net gain or (loss)		3,230.			3,230.
ţ	8 а	· · · · · · · · · · · · · · · · · · ·					
0							
		contributions reported on line 1c). See					
		· · · · · · · · · · · · · · · · · · ·	8a				
			8b				
		Net income or (loss) from fundraising events	<u> </u>				
	9 a	Gross income from gaming activities. See					
		* *************************************	9a				
			9b				
	С	Net income or (loss) from gaming activities					
	10 a	Gross sales of inventory, less returns					
		and allowances	10a				
	b	Less: cost of goods sold	10b				
	С	Net income or (loss) from sales of inventory					
_ω			Business Code				
ő a	11 a						
ane	b						
e e	С						
/lisc B	d	All other revenue					
_		Total. Add lines 11a-11d					
	12	Total revenue. See instructions		238,406.	198,655.	0.	19,182.

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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 (**D**)
Fundraising (C) Management and general expenses (A) Total expenses Do not include amounts reported on lines 6b. Program service expenses 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 1,886. 94,291. 77,319. 15,086. trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 3,599. 2,951. 576. 72. Other salaries and wages 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9,430. 7,732. 1,509. 189. Other employee benefits 9 7,357. 6,033. 1,177. 147. 10 Payroll taxes 11 Fees for services (nonemployees): Management Legal 10,383. 10,383. Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.) 5,241. 5,190. 51. Advertising and promotion 12 4,641. 4,502. 139. Office expenses 13 Information technology 14 15 Royalties 17,176. 20,695. 3,519. 16 Occupancy 17 Payments of travel or entertainment expenses 18 for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 Payments to affiliates 21 Depreciation, depletion, and amortization 22 4,478. 3,717. 761. 23 Other expenses. Itemize expenses not covered 24 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.) 48,986. 48,986. PROGRAM EXPENSES - COGS POSTAGE AND SHIPPING 21,267. 20,841. 213. 213. 10,891. 10,891. OUTSIDE SERVICES 10,159. 8,432. 1,727. FINANCIAL SERVICE CHARG 6,464.6.151. 262. 51. e All other expenses _ 257,882. 213,216. 42,108. 2,558. Total functional expenses. Add lines 1 through 24e 25 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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Pa	rt X	Balance Sneet					
		Check if Schedule O contains a response or no	ote to any	line in this Part X	/A\		(D)
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing				1	
	2	Savings and temporary cash investments			166,409.	2	158,899.
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			3,156.	4	2,247.
	5	Loans and other receivables from any current of					
		trustee, key employee, creator or founder, sub-					
		controlled entity or family member of any of the	•			5	
	6	Loans and other receivables from other disqualified persons (as defined					
		under section 4958(f)(1)), and persons describe		6			
ţ	7	Notes and loans receivable, net			0.5.50	7	00 106
Assets	8	Inventories for sale or use			97,730.	8	82,136
⋖	9				5,227.	9	4,416
	10a	Land, buildings, and equipment: cost or other	1	155 410			
		basis. Complete Part VI of Schedule D		155,418.	^		^
	I			155,418.	0.	10c	0.
	11	Investments - publicly traded securities			252 002	11	20/ 102
	12	Investments - other securities. See Part IV, line			352,803.	12	384,183.
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			625,325.	15	631,881
	16	Total assets. Add lines 1 through 15 (must eq	31,237.	16 17	29,655		
	17 18	Accounts payable and accrued expenses Grants payable			31,237.	18	25,055
	19					19	
	20	Deferred revenue Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
	22	Loans and other payables to any current or for					
Liabilities		trustee, key employee, creator or founder, sub-					
Ē		controlled entity or family member of any of the				22	
Ë	23	Secured mortgages and notes payable to unre				23	
	24	Unsecured notes and loans payable to unrelate		· · · · · · · · · · · · · · · · · · ·		24	
	25	Other liabilities (including federal income tax, p					
		parties, and other liabilities not included on line					
		of Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			31,237.	26	29,655.
		Organizations that follow FASB ASC 958, ch	eck here	X			
Ses		and complete lines 27, 28, 32, and 33.					
<u>a</u>	27	Net assets without donor restrictions			320,721.	27	308,866.
Ва	28	Net assets with donor restrictions		<u></u>	273,367.	28	293,360.
рц		Organizations that do not follow FASB ASC	958, ched	k here			
Ē		and complete lines 29 through 33.					
8	29	Capital stock or trust principal, or current fund				29	
sse	30	Paid-in or capital surplus, or land, building, or e				30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated i			F04 000	31	600 000
Se	32	Total net assets or fund balances		<u> </u>	594,088.	32	602,226.
	33	Total liabilities and net assets/fund balances			625,325.	33	631,881.

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Pa	rt 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)	1	23	8,40	06.
2	Total expenses (must equal Part IX, column (A), line 25)	2		7,88	
3	Revenue less expenses. Subtract line 2 from line 1	3	-1	9,4'	76 .
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	59	4,08	88.
5	Net unrealized gains (losses) on investments	5	2	7,63	14.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	60	2,2	26.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a	Х	
	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:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		. 2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3h		

SCHEDULE A

(Form 990)

Total

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

PROGRAMS OF RELIGIOUS ACTIVITIES **Employer identification number** Name of the organization WITH YOUTH 43-1166906 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 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: 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.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 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 X 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). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box 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 I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes above (see instructions))

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						
Sec	tion B. Total Support			_	_		
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	601(c)(3)	
_	organization, check this box and stor						
	tion C. Computation of Publi						
	Public support percentage for 2023 (I					14	<u>%</u>
	Public support percentage from 2022					15	<u>%</u>
16a	33 1/3% support test - 2023. If the o	-					
	stop here. The organization qualifies		-				
b	33 1/3% support test - 2022. If the o						
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test	-					•
	and if the organization meets the fact			=	•	_	
	meets the facts-and-circumstances te	-		*		17 line 15 in	
b	10% -facts-and-circumstances test	-				•	10% or
	more, and if the organization meets the				-		
40	organization meets the facts-and-circu					***************************************	
18	Private foundation. If the organization	n dia not check a	box on line 13, 16	a, 100, 1/a, 0r 1/1	o, check this box a	nu see instructions	<u> </u>

Schedule A (Form 990) 2023

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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	ciow, picase comp	ioto i uit ii.j				
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and	, ,	, ,	, ,	, ,	, ,	,,
	membership fees received. (Do not include any "unusual grants.")	6,881.	107,704.	16,238.	10,552.	20,569.	161,944.
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	301,359.	225,763.	216,642.	195,324.	198,655.	1137743.
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	308,240.	333,467.	232,880.	205,876.	219,224.	1299687.
78	Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
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						0.
(Add lines 7a and 7b						0.
8	Public support. (Subtract line 7c from line 6.)						1299687.
Se	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 6	308,240.	333,467.	232,880.	205,876.	219,224.	1299687.
108	dross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	9,563.	9,897.	11,607.	13,925.	15,952.	60,944.
k	Unrelated business taxable income (less section 511 taxes) from businesses						-
	acquired after June 30, 1975	9,563.	9,897.	11,607.	13,925.	15,952.	60,944.
	Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on	9,303.	9,097.	11,607.	13,925.	15,952.	00,944.
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)	317,803.	343,364.	244,487.	219,801.	235,176.	1360631.
14	First 5 years. If the Form 990 is for the	•					
<u>C-</u>	check this box and stop here	- Current Day					
	ction C. Computation of Publi			. (6)		45	95.52 %
	Public support percentage for 2023 (li		- · · · · · · · · · · · · · · · · · · ·			15	0.6 55
	Public support percentage from 2022 ction D. Computation of Inves					16	96.55 %
	Investment income percentage for 20			ne 13 column (f)		17	4.48 %
	Investment income percentage from 2					18	3.45 %
	a 33 1/3% support tests - 2023. If the						
	more than 33 1/3%, check this box ar						T
k	33 1/3% support tests - 2022. If the		-	•	•		
	line 18 is not more than 33 1/3%, che	ck this box and st	op here. The orga	nization qualifies a	s a publicly suppo	rted organization	
20	Private foundation. If the organizatio	n did not check a l	oox on line 14, 19a	a, or 19b, check th	is box and see inst	tructions	

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 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- **c** Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 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		
	3a		
	٥L		
	3b		
	3с		
	4a		
	4b		
	4c		
	5a		
	Eh		
	5b 5c		
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Par	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
	<i>y</i> 11 0 0		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of	of one or	100	110
•	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one su			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated amo			
_	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
C	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	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		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described 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			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see in	nstructions).		
a .	The organization satisfied the Activities Test. Complete line 2 below.	-		
b	The organization is the parent of each of its supported organizations. <i>Complete</i> line 3 <i>below.</i>			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity.	antity (see instructiv	nne)	
2	Activities Test. Answer lines 2a and 2b below.	inity (See instruction	Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		1.00	
_	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	2a		
h	that these activities constituted substantially all of its activities.	Za		
b	, , , , , , , , , , , , , , , , , , , ,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in	OI-		
•	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? <i>If</i> "Yes" or "No" provide details in Part VI.	3a		
n	Ling the programment average a concentral 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.

PROGRAMS OF RELIGIOUS ACTIVITIES WITH YOUTH

<u>Schedule A (Form 990) 2023</u> WITH YOUTH 43-1166906 Page 6

Part '	V Type III Non-Functionally Integrated 509(a)(3) Support	ing Organi	zations	
1 [Check here if the organization satisfied the Integral Part Test as a qualify	ying trust on N	ov. 20, 1970 (explain in	Part VI). See instructions
	All other Type III non-functionally integrated supporting organizations may		•	
Section	n A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 N	let short-term capital gain	1		
2 R	lecoveries of prior-year distributions	2		
3 0	Other gross income (see instructions)	3		
4 A	dd lines 1 through 3.	4		
5 D	Depreciation and depletion	5		
6 P	ortion of operating expenses paid or incurred for production or			
C	ollection of gross income or for management, conservation, or			
	naintenance of property held for production of income (see instructions)	6		
	Other expenses (see instructions)	7		
	djusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
	n B - Minimum Asset Amount	1	(A) Prior Year	(B) Current Year (optional)
1 A	ggregate fair market value of all non-exempt-use assets (see			
in	nstructions for short tax year or assets held for part of year):			
a A	verage monthly value of securities	1a		
b A	verage monthly cash balances	1b		
c Fa	air market value of other non-exempt-use assets	1c		
d T	otal (add lines 1a, 1b, and 1c)	1d		
e D	Discount claimed for blockage or other factors			
	explain in detail in Part VI):			
2 A	cquisition indebtedness applicable to non-exempt-use assets	2		
3 S	subtract line 2 from line 1d.	3		
4 C	ash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	ee instructions).	4		
5 N	let value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 M	fultiply line 5 by 0.035.	6		
	ecoveries of prior-year distributions	7		
8 M	finimum Asset Amount (add line 7 to line 6)	8		
Section	n C - Distributable Amount			Current Year
1 A	djusted net income for prior year (from Section A, line 8, column A)	1		
	inter 0.85 of line 1.	2		
3 M	finimum asset amount for prior year (from Section B, line 8, column A)	3		
	inter greater of line 2 or line 3.	4		
	ncome tax imposed in prior year	5		
	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	mergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function	nally integrated	d Type III supporting orga	nization (see

Schedule A (Form 990) 2023

instructions).

Pai	t v Type III Non-Functionally Integrated 509((a)(3) Supporting Orga	nizations _{(continu}	ıed)	
Sect	ion D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.	SVIGO GOLDING III		6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.	·· J -···		8	
9	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
		(i)	(ii)		(iii)
Sect	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributior Pre-2023	ns	Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2023				
a	From 2018				
b	From 2019				
с	From 2020				
d	From 2021				
е	From 2022				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2023 distributable amount				
i	Carryover from 2018 not applied (see instructions)				
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D,				
	line 7:				
a	Applied to underdistributions of prior years				
	Applied to 2023 distributable amount				
С	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2023. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2024. Add lines 3				
-	and 4c.				
8	Breakdown of line 7:				
	Excess from 2019				
	Excess from 2020				
	Excess from 2021				
	Excess from 2022				
	Excess from 2023				

Schedule A (Form 990) 2023

43-1166906 Page 8 WITH YOUTH Schedule A (Form 990) 2023 Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. Part VI (See instructions.)

332028 12-21-23 Schedule A (Form 990) 2023

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047 Inspection

Name of the organization

PROGRAMS OF RELIGIOUS ACTIVITIES WITH YOUTH

Employer identification number 43-1166906

		(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 w	riting that the assets held	in donor advised fun	ds
	are the organization's property, subject to the organization's e	exclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor ad			
	for charitable purposes and not for the benefit of the donor or			
	impermissible private benefit?			Yes No
Pai				
1	Purpose(s) of conservation easements held by the organization	n (check all that apply).		
	Preservation of land for public use (for example, recreat	ion or education)	Preservation of a hist	orically important land area
	Protection of natural habitat		Preservation of a cert	ified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualifi	ed conservation contribut	ion in the form of a co	onservation easement on the last
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2a
b	Total acreage restricted by conservation easements			2b
С	Number of conservation easements on a certified historic stru	cture included on line 2a		2c
d	Number of conservation easements included on line 2c acquire	red after July 25, 2006, an	d not	
	on a historic structure listed in the National Register			2d
3	Number of conservation easements modified, transferred, rele	ased, extinguished, or ter	minated by the organ	ization during the tax
	year			
4	Number of states where property subject to conservation ease	ement is located		
5	Does the organization have a written policy regarding the peri	odic monitoring, inspectio	n, handling of	
	violations, and enforcement of the conservation easements it	holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, h	nandling of violations, and	enforcing conservation	on easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handle	ing of violations, and enfo	rcing conservation ea	sements during the year
8	Does each conservation easement reported on line 2d above	•	. , , , , ,	
	and section 170(h)(4)(B)(ii)?			Yes L No
9	In Part XIII, describe how the organization reports conservation		•	
	balance sheet, and include, if applicable, the text of the footne	ote to the organization's fi	nancial statements th	at describes the
D -	organization's accounting for conservation easements.	Aut Historical Topos	Oth C	Similar Assats
Pa	t III Organizations Maintaining Collections of		sures, or Other S	Similar Assets.
	Complete if the organization answered "Yes" on Form			
1a	If the organization elected, as permitted under FASB ASC 958	•		
	of art, historical treasures, or other similar assets held for pub			nce of public
	service, provide in Part XIII the text of the footnote to its finan-			
b	If the organization elected, as permitted under FASB ASC 958	·		
	art, historical treasures, or other similar assets held for public	exhibition, education, or re	esearch in furtherance	e of public service,
	provide the following amounts relating to these items.			
	(i) Revenue included on Form 990, Part VIII, line 1			
2	If the organization received or held works of art, historical trea			provide
	the following amounts required to be reported under FASB AS			
	Revenue included on Form 990, Part VIII, line 1			
	Assets included in Form 990 Part X			\$

Schedule D (Form 990) 2023 WITH YOUTH

Part III Organizations Maintaining Collections 43-1166906 Page 2

	Net investment earnings, gains, and losses	46,143.	35,934.	-47,4	-		6,104.			230.
	Grants or scholarships									
е	Other expenditures for facilities									
	and programs	14,750.		35,3	51.	1	8,710.		12,	345.
								I		
f	Administrative expenses									
f g	End of year balance	385,409.	354,016.	318,0	82.	40	0,870.		333,	176.
g 2	End of year balance	ent year end balance	e (line 1g, column (a)	,	82.	40	0,870.		333,	176.
g 2 a	End of year balance Provide the estimated percentage of the curr Board designated or quasi-endowment	rent year end balance	•	,	82.	40	0,870.		333,	176.
g 2 a b	End of year balance Provide the estimated percentage of the curr Board designated or quasi-endowment Permanent endowment 70.8135	ent year end balance	e (line 1g, column (a)	,	82.	40	0,870.		333,	176.
g 2 a b	End of year balance Provide the estimated percentage of the curr Board designated or quasi-endowment Permanent endowment Term endowment	rent year end balance 29.1864%	e (line 1g, column (a)	,	82.	40	0,870.		333,	176.
g 2 a b c	End of year balance Provide the estimated percentage of the curr Board designated or quasi-endowment Permanent endowment Term endowment The percentages on lines 2a, 2b, and 2c sho	rent year end balance 29.1864% % uld equal 100%.	e (line 1g, column (a) _%) held as:	1	40	0,870.		333,	176.
g 2 a b c	End of year balance Provide the estimated percentage of the curr Board designated or quasi-endowment Permanent endowment Term endowment The percentages on lines 2a, 2b, and 2c sho Are there endowment funds not in the posse	rent year end balance 29.1864% % uld equal 100%.	e (line 1g, column (a) _%) held as:	1	40	0,870.			
g 2 a b c	End of year balance Provide the estimated percentage of the curr Board designated or quasi-endowment Permanent endowment Term endowment The percentages on lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by:	rent year end balance 29 • 1864% which is a second of the organization of the or	e (line 1g, column (a) _% attion that are held an) held as: d administered	for the				333, Yes	No
g 2 a b c	End of year balance Provide the estimated percentage of the curr Board designated or quasi-endowment Permanent endowment The percentages on lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by: (i) Unrelated organizations?	rent year end balance 29 • 1864% which is a second of the organization of the or	e (line 1g, column (a) _% attion that are held an) held as: d administered	for the			3a(i)		No X
g 2 a b c	End of year balance Provide the estimated percentage of the curr Board designated or quasi-endowment Permanent endowment The percentages on lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by: (i) Unrelated organizations? (ii) Related organizations?	rent year end balance 29 • 1864 % % uld equal 100%. ssion of the organiza	e (line 1g, column (a) _% stion that are held an) held as: d administered	for the			3a(ii)		No
g 2 a b c	End of year balance Provide the estimated percentage of the curr Board designated or quasi-endowment Permanent endowment Term endowment The percentages on lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by: (i) Unrelated organizations? (ii) Related organizations? If "Yes" on line 3a(ii), are the related organizations	rent year end balance 29 • 1864% % uld equal 100%. ssion of the organiza	e (line 1g, column (a) _% Ition that are held an) held as: d administered	for the					No X
g 2 a b c 3a	End of year balance Provide the estimated percentage of the curr Board designated or quasi-endowment Permanent endowment The percentages on lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by: (i) Unrelated organizations? (ii) Related organizations? If "Yes" on line 3a(ii), are the related organization bescribe in Part XIII the intended uses of the	rent year end balance 29 • 1864 % % uld equal 100%. ssion of the organiza tions listed as requir organization's endo	e (line 1g, column (a) _% Ition that are held an) held as: d administered	for the			3a(ii)		No X
g 2 a b c 3a	End of year balance Provide the estimated percentage of the curr Board designated or quasi-endowment Permanent endowment The percentages on lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by: (i) Unrelated organizations? (ii) Related organizations? If "Yes" on line 3a(ii), are the related organization bescribe in Part XIII the intended uses of the time to the current of th	rent year end balance 29.1864% % uld equal 100%. ssion of the organiza	e (line 1g, column (a) _% attion that are held an ed on Schedule R? wment funds.	d administered	for the			3a(ii)		No X
g 2 a b c 3a	End of year balance Provide the estimated percentage of the curr Board designated or quasi-endowment Permanent endowment The percentages on lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by: (i) Unrelated organizations? (ii) Related organizations? If "Yes" on line 3a(ii), are the related organization bescribe in Part XIII the intended uses of the	rent year end balance 29.1864% % uld equal 100%. ssion of the organiza	e (line 1g, column (a) _% attion that are held an ed on Schedule R? wment funds.	d administered	for the			3a(ii)		No X
g 2 a b c 3a	End of year balance Provide the estimated percentage of the curr Board designated or quasi-endowment Permanent endowment The percentages on lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by: (i) Unrelated organizations? (ii) Related organizations? If "Yes" on line 3a(ii), are the related organization bescribe in Part XIII the intended uses of the time to the current of th	rent year end balance 29.1864% % uld equal 100%. ssion of the organiza	e (line 1g, column (a) _% ation that are held an ed on Schedule R? wment funds. b, Part IV, line 11a. S ther (b) Cost	ee Form 990, Pa	for the			3a(ii)	Yes	No X X
9 2 a b c 3a b 4 Par	Provide the estimated percentage of the curr Board designated or quasi-endowment Permanent endowment 70.8135 Term endowment 70.8135 Term endowment	rent year end balance 29 • 1864 % % wlid equal 100%. ssion of the organizations listed as require organization's endotent d "Yes" on Form 990 (a) Cost or obasis (investre	e (line 1g, column (a) _% ation that are held an ed on Schedule R? wment funds. b, Part IV, line 11a. S ther (b) Cost	ee Form 990, Pa	for the	ne 10.		3a(ii) 3b	Yes	No X X
9 2 a b c 3a b 4 Par	End of year balance Provide the estimated percentage of the curr Board designated or quasi-endowment Permanent endowment The percentages on lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by: (i) Unrelated organizations? (ii) Related organizations? If "Yes" on line 3a(ii), are the related organizations or percentages on lines and Equipment an	rent year end balance 29.1864% % uld equal 100%. ssion of the organizations listed as require organization's endouent d "Yes" on Form 990 (a) Cost or obasis (investr	e (line 1g, column (a) _% ation that are held an ed on Schedule R? wment funds. b, Part IV, line 11a. S ther (b) Cost	ee Form 990, Pa	for the	ne 10.		3a(ii) 3b	Yes	No X X
9 2 a b c 3a b 4 Par	End of year balance Provide the estimated percentage of the curr Board designated or quasi-endowment Permanent endowment To . 8135 Term endowment The percentages on lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by: (i) Unrelated organizations? (ii) Related organizations? If "Yes" on line 3a(ii), are the related organizations pescribe in Part XIII the intended uses of the tVI Land, Buildings, and Equipm Complete if the organization answere Description of property Land Buildings	rent year end balance 29 • 1864% % uld equal 100%. ssion of the organizations listed as require organization's endouent d "Yes" on Form 990 (a) Cost or or basis (investrement)	e (line 1g, column (a) _% ation that are held an ed on Schedule R? wment funds. b, Part IV, line 11a. S ther (b) Cost	ee Form 990, Pa	for the	ne 10.		3a(ii) 3b	Yes	No X X
9 2 a b c C 3a b 4 Par 1a b c	End of year balance Provide the estimated percentage of the curr Board designated or quasi-endowment Permanent endowment To.8135 Term endowment The percentages on lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by: (i) Unrelated organizations? (ii) Related organizations? If "Yes" on line 3a(ii), are the related organization bescribe in Part XIII the intended uses of the tVI Land, Buildings, and Equipm Complete if the organization answered Description of property Land Buildings Leasehold improvements	rent year end balance 29 • 1864 % % uld equal 100%. ssion of the organizations listed as requir organization's endo ent d "Yes" on Form 990 (a) Cost or o basis (investr	e (line 1g, column (a) _% attion that are held an ed on Schedule R? wment funds. b, Part IV, line 11a. S ther (b) Cost hent) basis	d administered ee Form 990, Pa or other (other)	for the art X, lin (c) Acc depre	ne 10. cumulated	1	3a(ii) 3b	Yes	No X X
9 2 a b c 3a b 4 Par 1a b c d	End of year balance Provide the estimated percentage of the curr Board designated or quasi-endowment Permanent endowment To . 8135 Term endowment The percentages on lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by: (i) Unrelated organizations? (ii) Related organizations? If "Yes" on line 3a(ii), are the related organizations pescribe in Part XIII the intended uses of the tVI Land, Buildings, and Equipm Complete if the organization answere Description of property Land Buildings	rent year end balance 29 . 1864 % % uld equal 100%. ssion of the organization organization organization ent d "Yes" on Form 990 (a) Cost or organization investrement	e (line 1g, column (a) _% ation that are held an ed on Schedule R? wment funds. b, Part IV, line 11a. S ther (b) Cost hent) basis	ee Form 990, Pa	for the art X, lin (c) Acc depre	ne 10.	5.	3a(ii) 3b	Yes	No X X

Schedule D (Form 990) 2023

Schedule D (Form 990) 2023 WITH YOUTH

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Description of security or category (including name of security) Financial derivatives Closely held equity interests Other			
Closely held equity interests	(b) Book value	(c) Method of valuation: Cost or er	nd-of-year market value
Closely held equity interests			
Othor			
(A) VANGUARD FUND	384,183.	END-OF-YEAR MARKET	' VALUE
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)	201 102		
tal. (Col. (b) must equal Form 990, Part X, line 12, col. (B)) Part VIII Investments - Program Related.	384,183.		
Complete if the organization answered "Yes	s" on Form 990 Part IV line	11c See Form 990 Part Y line 13	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or er	nd-of-vear market value
(1)	(S) DOOK VAIGO	(5) Metrica of Valuation. Cost of G	ia or your market value
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
tal. (Col. (b) must equal Form 990, Part X, line 13, col. (B)) Part IX Other Assets Complete if the organization answered "Yes		11d. See Form 990, Part X, line 15.	(h) Dooleyshie
<u>`</u>	a) Description		(b) Book value
(1)			
(2)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
ptal. (Column (b) must equal Form 990, Part X, line 15, or Part X Other Liabilities	col. (B))		
Complete if the organization answered "Yes	s" on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 2	5
(a) Description of liability			(b) Book value
(1) Federal income taxes			
(2)			
(2)			
(2)			
(2) (3) (4)			
(2) (3) (4) (5)			
(2) (3) (4) (5) (6)			
(2) (3) (4) (5) (6) (7)			
(2) (3) (4) (5) (6) (7) (8)			

Schedule D (Form 990) 2023 V

WITH YOUTH

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Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return			
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.			
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
С	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
С	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	e 12.)	5
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return			
	Complete if the organization answered "Yes" on Form 990, Part I		
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1	
а	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
С	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
е	Add lines 2a through 2d		
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
	Add lines 4a and 4b		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, li	ne 18.)	5
Part XIII Supplemental Information			
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.			
PART V, LINE 4:			
THE ORGANIZATION'S ENDOWMENT FUNDS ARE USED TO SUPPLEMENT THE MISSION OF			
P.R.A.Y. AND IN LINE WITH ORIGINAL DONOR GIFT GUIDELINES.			
PART X, LINE 2:			
MANAGEMENT OF THE ODGANIZATION HAG THAT HATTER THE TAY DOGETIONS OF THE			
MANAGEMENT OF THE ORGANIZATION HAS EVALUATED THE TAX POSITIONS OF THE			
ODCANTANTON AND DELTEVER MUAM NO INCERMATN MAY DOCUMENTONG BYTCM AM TIME			
ORGANIZATION AND BELIEVES THAT NO UNCERTAIN TAX POSITIONS EXIST AT JUNE			
30 2024 ANTO 2023			
30	2024 AND 2023.		

SCHEDULE O (Form 990)

Department 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.

2023
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

PROGRAMS OF RELIGIOUS ACTIVITIES WITH YOUTH

Employer identification number 43-1166906

Schedule O (Form 990) 2023

FORM 990, ITEM K, OTHER FORM OF ORGANIZATION: NON-PROFIT FORM 990, PART VI, SECTION A, LINE 6: LINE 6 EXPLANATION - THE ORGANIZATION HAS MEMBERS THAT EVALUATE THE OVERALL PERFORMANCE OF THE ORGANIZATION AND THE MEMBERS HAVE THE AUTHORITY OVER THE BOARD AND OFFICERS. FORM 990, PART VI, SECTION A, LINE 7A: LINE 7A EXPLANATION - THE BOARD OF DIRECTORS AND OFFICERS ARE SUBJECT TO EVALUATION AND APPROVAL BY THE MEMBERS OF THE ORGANIZATION. FORM 990, PART VI, SECTION A, LINE 7B: LINE 7B EXPLANATION - THE SELECTION OF BOARD MEMBERS AND OFFICERS OF THE ORGANIZATION ARE SUBJECT TO APPROVAL BY THE MEMBERS OF THE ORGANIZATION. FORM 990, PART VI, SECTION B, LINE 11B: LINE 11B EXPLANATION - THE REVIEW COMMITTEE PERFORMS A DETAILED REVIEW OF THE FORM 990 AND PRESENTS IT TO THE BOARD OF DIRECTORS PRIOR TO FILING. ENTIRE BOARD AND SELECTED MEMBERS OF MANAGEMENT IS PROVIDED A COPY OF FORM 990 PRIOR TO FILING. FORM 990, PART VI, SECTION B, LINE 12C: ON AN ANNUAL BASIS, ALL BOARD MEMBERS ARE PROVIDED WITH A COPY OF THE CONFLICT OF INTEREST POLICY AND ARE REQUIRED TO COMPLETE AND SIGN THE CONFLICT OF INTEREST FORM. A BOARD COMMITTEE THEN REVIEWS THESE FORMS AND

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

Schedule O (Form 990) 2023 Page 2 Name of the organization PROGRAMS OF RELIGIOUS ACTIVITIES **Employer identification number** WITH YOUTH 43-1166906 REPORTS BACK TO THE BOARD. FORM 990, PART VI, SECTION B, LINE 15: THE BOARD OF DIRECTORS PERFORMS PERFORMANCE REVIEWS OF THE CEO AND ASSISTANT CEO. THE ORGANIZATION USES THE PERFORMANCE REVIEWS, COMPARATIVE DATA, REVIEW AND APPROVAL FROM INDEPENDENT PERSONS, AND SUBSTANTIATION OF DELIBERATION/DECISION TO DETERMINE COMPENSATION AND BENEFITS. FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, FORM 990, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC ON ITS WEBSITE. FORM 990, PART XII, LINE 2C: PROCESS HAS NOT CHANGED.