#### **Financial Statements**

June 30, 2022 and 2021





## WIPFLI

#### **Independent Auditor's Report**

Board of Directors Youth Homes Missoula, MT

#### Report on the Audit of the Financial Statements

#### Opinion

We have audited the accompanying financial statements of Youth Homes (the "Agency"), a nonprofit organization, which comprise the statements of financial position as of June 30, 2022 and 2021, and the related statements of activities, functional expenses, and cash flows for the years then ended, and the related notes to the financial statements.

In our opinion, the accompanying financial statements referred to above present fairly, in all material respects, the financial position of Youth Homes as of June 30, 2022 and 2021, and the changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America ("GAAP").

#### **Basis for Opinion**

We conducted our audits in accordance with auditing standards generally accepted in the United States of America ("GAAS") and the standards applicable to financial audits contained in *Governmental Auditing Standards* (2022 only), issued by the Comptroller General of the United States and the standards applicable to financial audits contained in Government Auditing Standards, issued by the Comptroller General of the United States of America. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Youth Homes and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

#### Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about Youth Homes' ability to continue as a going concern for one year after the date the financial statements are available to be issued.

#### Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS and *Government Auditing Standards* (2022 only) and *Government Auditing Standards* will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS and *Government Auditing Standards* (2022 only) and *Government Auditing Standards*, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of Youth Homes' internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about Youth Homes' ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control–related matters that we identified during the audit.

#### **Other Matters**

#### Other and Supplementary Information

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The accompanying Schedule of Expenditures of Federal Awards as required by Title 2 U.S. *Code of Federal Regulations (CFR)* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards*, is presented for purposes of additional analysis, and is not a required part of the financial statements. The Schedule of Expenditures of Federal Awards is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used in the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States. In our opinion, the Schedule of Expenditures of Federal Awards is fairly stated in all material respects in relation to the financial statements as a whole.

#### Other Reporting Required by Government Auditing Standards

In accordance with *Government Auditing Standards* (2022 only), we have also issued our report dated November 2, 2022 on our consideration of the Agency's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts and grant agreements and other matters. The purpose of that report is solely to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of Youth Homes' internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* (2022 only) in considering the Agency's internal control over financial reporting or on compliance.

Wippei LLP

Wipfli LLP

Missoula, Montana November 2, 2022

### Statements of Financial Position

As of June 30,	2022	2021
Assets		
Current Assets		
Cash and cash equivalents	\$ 978,731 \$	1,065,845
Current investments	1,800,303	2,059,159
Accounts receivable, net	388,999	378,334
Receivables from related party	23,946	24,079
Prepaid expenses	18,563	17,730
Total current assets	3,210,542	3,545,147
Property and equipment - Net	1,833,048	1,875,620
Other Assets		
Endowment investments	737,929	824,179
Total other assets	737,929	824,179
Total assets	\$ 5,781,519 \$	6,244,946
Liabilities and Net Assets		
Current Liabilities		
Accounts payable	\$ 40,216 \$	46,716
Accrued payroll and payroll taxes payable	197,033	194,868
Accrued vacation payable	166,338	140,966
Current portion of long-term debt	40,370	42,518
Total current liabilities	443,957	425,068
Long-term debt, less current portion	55,582	102,497
Total liabilities	499,539	527,565
		527,505
Net Assets		
Without donor restrictions	4,838,361	5,293,762
With donor restrictions	443,619	423,619
Total net assets	5,281,980	5,717,381
Total liabilities and net assets	\$ 5,781,519 \$	6,244,946

### Statement of Activities

For the year ended June 30,		2022	
	Net assets		
	without	Net assets	
	donor	with donor	
	restrictions	restrictions	Total
Public Support and Revenue:			
Public Support			
Donations	\$1,522,129	\$ 20,000	\$1,542,129
Revenue			
Grant revenues	1,185,388	-	1,185,388
Contract services	3,785,168	-	3,785,168
Management fees-Partnership	228,342	-	228,342
Rental income	6,000	-	6,000
Investment loss, net	(364,844)	-	(364,844)
Miscellaneous income	276,977	-	276,977
In-kind contributions	45,730	-	45,730
Total Revenues	5,162,761	-	5,162,761
Total support and revenue	6,684,890	20,000	6,704,890
Evenences			
Expenses:			
Program Services	F 707 740		F 707 740
Program support	5,797,712	-	5,797,712
Support Services			
Fundraising	411,444	-	411,444
Administration	931,135	-	931,135
Total Support Services	1,342,579	-	1,342,579
Total expenses	7,140,291	-	7,140,291
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Excess of support and revenue over (under) expenses	(455,401)	20,000	(435,401)
Change in net assets	(455,401)	20,000	(435,401)
Net assets - beginning of year	5,293,762	423,619	5,717,381
	5,235,702	723,013	5,717,501
Net assets - end of year	\$4,838,361	\$ 443,619	\$5,281,980

### Statement of Activities

For the year ended June 30,		2021	
	Net assets		
	without	Net assets	
	donor	with donor	
	restrictions	restrictions	Total
Public Support and Revenue:			
Public Support			
Donations	\$1,136,629	\$ 36,500	\$1,173,129
Revenue			
Grant revenues	624,432	-	624,432
Contract services	3,857,793	-	3,857,793
Management fees-Partnership	199,858	-	199,858
Rental income	5,000	-	5,000
Investment income, net	621,217	-	621,217
Miscellaneous income	1,180,186	_	1,180,186
	1,100,100		1,180,180
Total Revenues	6,488,486	-	6,488,486
	7 625 445	26 500	
Total support and revenue	7,625,115	36,500	7,661,615
Expenses:			
Program Services			
Program support	4,903,514	-	4,903,514
Support Services			
Fundraising	280,509	-	280,509
Administration	856,732	-	856,732
	000)/02		000,702
Total Support Services	1,137,241	-	1,137,241
Total expenses	6,040,755		6,040,755
Total expenses	0,040,755	-	0,040,755
Excess of support and revenue over (under) expenses	1,584,360	36,500	1,620,860
Change in net assets	1,584,360	36,500	1,620,860
Net assets - beginning of year	3,709,402		4,096,521
וויבר מששביש - אבצווווווצ טו אבמו	5,709,402	387,119	4,090,321
Net assets - end of year	\$5,293,762	\$ 423,619	\$5,717,381

### Statement of Functional Expenses

For the year ended June 30,	2022				
		Program			
		Support	Fundraising	Administration	Total
EXPENSES					
Salaries and wages	\$	3,361,979	\$ 245,715	\$ 569,086 \$	4,176,780
Client direct assistance		820,440	-	3,462	823,902
Fringe benefits		460,671	33,669	77,978	572,318
Payroll taxes		257,075	18,797	35,906	311,778
Space costs		219,814	3,000	19,719	242,533
Purchased care services		153,577	-	-	153,577
Depreciation		109,397	-	6,252	115,649
Supplies		80,431	-	27,728	108,159
Events expense		-	105,763	-	105,763
Insurance		57,488	-	27,788	85,276
Training		30,485	-	44,716	75,201
Computer expense		7,799	-	62,516	70,315
Contract services		68,379	-	-	68,379
Travel		62,118	-	5,103	67,221
Repairs and maintenance		46,152	-	6,088	52,240
Advertising		22,410	-	8,973	31,383
Postage, printing, publication		9,022	4,500	11,092	24,614
Professional services		22,169	-	400	22,569
Bank charges		-	-	17,464	17,464
Miscellaneous		1,696	-	6,864	8,560
Interest expense		6,610	-	-	6,610
Total	\$	5,797,712	\$ 411,444	\$ 931,135 \$	7,140,291

### Statement of Functional Expenses

For the year ended June 30,	2021				
		Program			
		Support	Fundraising	Administration	Total
EXPENSES					
Salaries and wages	\$	2,993,448	\$ 202,156	\$ 538,106 \$	3,733,710
Fringe benefits		459,737	33,841	87,674	581,252
Client direct assistance		310,264	-	29	310,293
Payroll taxes		237,474	15,465	35,403	288,342
Space costs		223,870	3,000	14,514	241,384
Purchased care services		137,527	-	-	137,527
Depreciation		114,044	-	6,385	120,429
Supplies		67,154	-	27,029	94,183
Repairs and maintenance		76,776	-	11,177	87,953
Insurance		48,841	-	26,301	75,142
Computer expense		11,647	-	59,693	71,340
Contract services		69,020	-	-	69,020
Travel		48,565	-	3,072	51,637
Training		36,578	-	14,771	51,349
Advertising		24,695	-	4,743	29,438
Postage, printing, publication		9,426	4,500	11,619	25,545
Professional services		22,111	-	400	22,511
Events expense		-	21,547	-	21,547
Bank charges		-	-	11,441	11,441
Miscellaneous		1,563	-	4,375	5,938
Interest expense		5,636	-	-	5,636
Bad debt expense		5,138	-	-	5,138
Total	\$	4,903,514	\$ 280,509	\$ 856,732 \$	6,040,755

### Statements of Cash Flows

Years Ended June 30,		2022	2021
Increase (decrease) in cash			
Increase (decrease) in cash:			
Cash flows from operating activities: Change in net assets	\$	(435,401) \$	1,620,860
	ڔ	(433,401) \$	1,020,800
Adjustments to reconcile change in net assets to net cash from			
operating activities:			
Bad debt		-	5,138
Depreciation		115,649	120,429
Realized and unrealized (gain)/loss on investments		408,830	(574,397)
PPP loan forgiveness		-	(898,478)
Loss on sale of fixed asset		-	663
Changes in operating assets and liabilities:			
Accounts receivable		(10,665)	(96,412)
Due from related party		133	(9,706)
Prepaid expenses		(833)	(42)
Accounts payable		(6,500)	(18,511)
Accrued liabilities		27,537	34,938
Net cash from operating activities		98,750	184,482
Cash flows from investing activities:			
Cash flows from investing activities: Purchases of fixed assets		(73,077)	(26,163)
Cash flows from investments		(73,077) (63,724)	(83,054)
		(136,801)	
Net cash from investing activities		(130,801)	(109,217)
Cash flows from financing activities:			
Cash paid for principal on loans		(49,063)	(43,488)
Net cash from financing activities		(49,063)	(43,488)
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Net change in cash		(87,114)	31,777
Cash at beginning of year		1,065,845	1,034,068
		,,	, - ,
Cash at end of year	\$	978,731 \$	1,065,845
Supplemental cash flow information:			
Cash paid during the year for:	1		
Interest	\$	6,610 \$	5,636

#### **Note 1: Summary of Significant Accounting Policies**

#### Organization

Youth Homes (the "Agency") is a Montana private, non-profit corporation certified as a charitable organization. The Agency's corporate office is located in Missoula, Montana at 550 North California Street. Founded in 1971, Youth Homes provides three core and other services to care for and treat children and youth (ages 0 to 18) who are struggling with abuse, neglect, chaos, emotional challenges, substance abuse, family conflict, poor choices and legal problems. The Agency offers emergency shelters, therapeutic group homes, transitional living program, family care program including foster care, adoptive services and child and family counseling. As a licensed child placing and adoptive agency, Youth Homes recruits, screens, trains and places children into special foster homes. In addition, the Agency provides correctional placements in individual Guide Homes. Services are provided solely to Montana children. Priority is given to serving children closest to their homes. The Agency operates a shelter and four group homes in Missoula and dual licensed shelters in Hamilton and Kalispell. In Helena, the Agency operates a shelter and therapeutic group home. Our family services and family support services operate out of Missoula, Polson and Helena but serve children and youth throughout Western Montana. Youth Homes' efforts are always targeted at eventual family and permanent placement and a future for the children we serve beyond treatment and care and into their adulthood.

#### **Basis of Accounting**

The financial statements of the Agency have been prepared on the accrual basis of accounting in conformity with accounting principles generally accepted in the United States.

#### **Cash and Cash Equivalents**

Cash and cash equivalents include cash in banks and on hand, and highly liquid debt instruments that are readily convertible to known amounts of cash. Such debt instruments have maturities of three months or less from the date of purchase.

#### Investments

Investments consist of debt instruments with original maturities to the Agency in excess of three months and equity securities. The Agency has adopted ASC No. 958-320, Accounting for Certain Investments Held by Not-for-Profit Organizations. ASC No. 958-320 requires that investments in equity securities with readily determinable fair values and all investments in debt securities shall be measured at fair value with realized and unrealized gains and losses on investments reported in the statements of activities.

Per ASU 2016-14, Not-for-Profit Entities (Topic 958) – *Presentation of Financial Statements of Not-for-Profit Entities*, investment income is reported net of investment fees and expenses.

#### Inventories

The Agency does not record inventories in its financial records. Such items consist of office and operating supplies which are expensed when purchased. The amount of inventories on hand as of June 30, 2022 and 2021 are not considered material to these financial statements.

#### **Fee for Service**

Fee for service revenue is reported at the amount that reflects the consideration to which the Agency expects to be entitled in exchange for providing patient care. These amounts are due from patients or third-party payors. Generally, the Agency bills the patients and third-party payors several days after the services are performed. Revenue is recognized as performance obligations are satisfied. Performance obligations are determined based on the nature of the services provided. For revenue from services provided to patients of the Agency, the performance obligation is satisfied as the patient simultaneously receives and consumes the benefits provided as the patient services are performed. In the case of these services, recognition of the obligation over time yields the same result as recognizing the obligation at a point in time. The Agency believes this method provides a faithful depiction of the transfer of services over the term of the performance obligation based on the inputs needed to satisfy the obligation.

The Agency determines the transaction price, which involves significant estimates and judgment, based on standard charges for goods and services provided, reduced by contractual adjustments provided to third-party payors. The Agency determines its estimates of contractual adjustments based on contractual agreements and historical experience.

#### **Contribution Revenue**

Contributions, including promises to give, are considered conditional or unconditional, depending on the nature and existence of any donor or grantor conditions. A contribution or promise to give contains a donor or grantor condition when both of the following are present:

- An explicit identifying of a barrier, that is more than trivial, that must be overcome before the revenue can be earned and recognized.
- An implicit right of return of assets transferred or a right of release of a donor or grantor's obligation to transfer assets promised, if the condition is not met.

Conditional contributions are recognized when the barrier(s) to entitlement are overcome. Unconditional contributions are recognized as revenue when received.

Unconditional contributions or conditional contributions in which the conditions have been substantially met or explicitly waived by the donor are recorded as support with or without donor restrictions, depending on the existence and nature of any donor restrictions. When a restriction expires, net assets with donor restrictions are reclassified to net assets without donor restrictions and reported in the statements of activities as net assets released from restrictions. Contributions that are restricted by the donor are reported as increases in net assets without donor restrictions expire in the fiscal year in which the contributions are recognized.

#### Note 1: Summary of Significant Accounting Policies (Continued)

#### **Grant Revenue**

Grants are either recorded as contributions or exchange transactions based on criteria contained in the grant award.

<u>Grant Awards That Are Contributions</u> - Grants awards that are contributions are evaluated for conditions and recognized as revenue when conditions in the award are satisfied. Unconditional awards are recognized as revenue when the award is received. Amounts received in which conditions have not been met are reported as a refundable advance liability.

<u>Grant Awards That Are Exchange Transactions</u> - Exchange transactions are those in which the resource provider or grantor receives a commensurate value in exchange for goods or services transferred. Revenue is recognized when control of the promised goods or services is transferred to the customer (grantor) in an amount that reflects the consideration to which the entity expects to be entitled in exchange for those goods or services. Amounts received in excess of recognized revenue are reflected as a contract liability.

#### **Property and Equipment**

The Agency capitalizes equipment with a purchase price of at least \$5,000 and an expected life of at least 5 years. Property and equipment are carried at cost. Donated assets are valued at their estimated fair value at the date of contribution. Straight-line depreciation is used to depreciate assets over estimated lives of 5 to 27½ years.

#### **Program Activities**

Program Support is the expenses associated with providing shelter, staff support, therapies, and activities and opportunities to the residents and clients of our various programs and services. Each home and service is designed to meet individual needs and provide treatment specific to the youth and families for whom the program is designed. The Agency serves youth ages birth to 18 and in some cases beyond the age of 18. The Agency's homes and services include:

Dan Fox Family Care Program (DFFCP) started with a therapeutic foster care program in 1990. Since then, the program has progressed and grown to provide a broad array of services and approaches, all of which are focused on supporting the development of youth who are appropriate to a family setting.

Today, the DFFCP provides and supports family settings for the care of emotionally disturbed children, ranging in age from birth to eighteen. Services are provided to youth in foster care, kinship care, guardianship, adoptive homes or the child's birth family. DFFCP is also an adoption agency and works closely with the State to secure adoptions for hard-to-place children and adolescents. Families willing and able to foster and/or adopt children are recruited, screened and trained by the Agency, which holds a child-placing and adoption placement licenses from the State of Montana. Training is also available and offered to kinship and birth families.

#### Program Activities (Continued)

In 2001 Youth Homes expanded its model to include In-Home "Home Support Services" to birth families, much like it had done with foster families for over 10 years. Home Support Service provides home-based Treatment Managers and Therapists to families with children diagnosed with "seriously emotionally disturbance". Services include support, case planning, addressing and accessing needed services (from educational to medical), parent training, coaching and therapies. Home Support Services is provided in Missoula, Ravalli, Lake, Flathead, and Lewis and Clark Counties.

DFFCP contracts with the State Department of Public Health and Human Services to provide Transitional Living Support (TLS) in Western Montana. Staff work with youth, ages 15 ½ to 21, who are transitioning into adulthood without a permanent family. Work involves planning for emancipation, skill development and support. Work is done in coordination with other providers and those interested and committed to the youth into their future. TLS staff make weekly contact with the youth while working with them secure housing, employment and continue school. Staff also work with the youth to maintain or create a support system into their future. Length of service for TLS ranges from as little as a month to as long as 6 months.

In 2011 DFFCP assumed the Outpatient services from Friends to Youth. Since then, it has sustained and expanded an array of Outpatient Services to include Assessment, Case Management, and evidence-based Individual, Group, and Family Therapy.

Youth Homes operates four shelters including the Shirley Miller Attention Home in Missoula, the Flathead Youth Home in Kalispell, Linda Massa Youth Home in Hamilton, and the Margaret Stuart Youth Home in Helena. The Shirley Miller Home is licensed as a "Short-term" shelter serving youth for up to 45 days, the other homes are dually licensed to provide both short-term placements and longer term care. All provide 24-hour supervision, are co-educational, are licensed to serve up to 8 youth at a time, and accept youth from 10-17 years of age. All homes are intentionally modeled as "homes," where youth are integrated into the community and afforded opportunities consistent with those of "typical" children. In addition to providing a safe home environment, youth in care are mentored and supported by committed staff while crisis and other challenges are addressed with the intention of stabilizing crises, developing positive behaviors, and eventual transition back to home or other appropriate levels of care.

Tom Roy Youth Guidance Home (TRYGH) provides longer-term care and transition for older adolescents, ages sixteen to eighteen, who are not in a position to emancipate from a family. The Home serves eight youth and is also a coeducational Home and Program. The Program targets preparation for emancipation and independent living with emphasis on finishing high school, skill development for emancipation, gaining work skills and experience, and saving money for independence. As with all of our group homes, we are committed to relationships with the youth in care that can give them the confidence and trust in others. Often these youngsters have a history of legal, emotional, social, academic, substance abuse, or family problems.

#### Program Activities (Continued)

The TRYGH is the site for our Youth Farm. The Farm grows vegetables in collaboration with Garden City Harvest (GCH) and practices sustainable agriculture. A Farm Manager and Farm Assistant, provided by GCH, provides meaningful work and volunteer opportunities for residents of Youth Homes and fresh vegetables for all of our local group homes. Community shares are sold and provided to neighbors, friends and supporters of both agencies and those revenues support much of the costs of operating the Farm.

Youth Homes also provides three (3) "therapeutic group homes" which each meet the unique needs of seriously emotionally disturbed teens. All provide intensive treatment for up to six "severely emotionally disturbed" adolescents, ages twelve to eighteen, with behavior, relationship, trust, sexual, oppositional and conduct-related issues. Treatment goals include improving behavior, the ability to accept care, gaining a level of lesser care and supervision after treatment, and the eventual placement of the youths back into family, birth or substitute or emancipation. Added to the staff of any of our group homes are therapists who are located in and connected closely to the Home's Staff Team.

In Missoula we have the Susan Talbot Home for Girls, Susan Talbot Boys Home and Dennis Radtke Home for Boys. The original Talbot Center was started in 1985 with a 2nd home in 1986 and the 3rd developed in 1997. The homes and program have evolved into more targeted and clinically proven treatment over the years. The two boys' homes serve six boys and the girls' home serves six girls.

All three homes accept applications from throughout Montana with emphasis on placing youth closest to home.

#### **Payroll Protection Program Loan**

In 2020, Youth Homes received a Payroll Protection Program (PPP) loan under the CARES ACT. The Agency elected to account for the loan as a financial liability in accordance with FASB ASC 470. In November 2020, this loan was fully forgiven and the liability was eliminated and a \$898,478 gain on extinguishment was recorded as miscellaneous income on the statement of activities.

#### **Income Taxes**

Youth Homes is a nonprofit organization and is exempt from federal and state income taxes under Section 501(c)(3) of the Internal Revenue Code.

#### **Cost Allocation**

The Agency allocates costs that can be identified specifically with a particular final cost objective, directly to the individual program, benefiting from those costs. Joint costs are allocated directly to individual programs using a base most appropriate to the particular cost being allocated.

#### **Advertising and Promotion**

Advertising and promotion costs are charged to operations when incurred. Advertising and promotion expense was \$31,383 and \$29,438 for the years ended June 30, 2022 and 2021, respectively.

#### **Use of Estimates**

The preparation of financial statements in conformity with accounting principles generally accepted in the United States requires management to make estimates and assumptions that affect the reported assets, liabilities, revenues, and expenditures during the reporting period. Actual results could differ from those estimates.

#### Reclassification

Certain amounts in the prior period have been reclassified to conform to the current period financial statement presentation. These reclassifications have no effect on previously reported changes in net assets.

#### **Accounting Standards Update**

In February 2016, the Financial Accounting Standards Board (FASB) issued Accounting Standards Update (ASU) No. 2016-02, Leases (Topic 842). This ASU provides guidance on the recognition of lease assets and lease liabilities by lessees for those leases classified as operating leases under current accounting standards and new disclosures on key information about leasing arrangements. The new standard supersedes current lease accounting requirements in FASB Accounting Standards Codification (ASC) Topic 840, Leases. When adopted, the amendments in the ASU must be applied using a modified retrospective approach. ASU No. 2016-02 is effective for nonpublic companies for annual periods beginning after December 15, 2021. The Agency is currently evaluating the impact of the provisions of ASC 842.

#### **New Accounting Pronouncements**

On September 17, 2020, the Financial Accounting Standards Board (FASB) issued Accounting Standards Update No. 2020-07, Not-for-Profit Entities (Topic 958): Presentation and Disclosures by Not-for-Profit Entities for Contributed Nonfinancial Assets. The Update is expected to increase transparency around contributed nonfinancial assets (also known as "gifts-in-kind") received by not-for-profit (NFP) organizations, including transparency on how those assets are used and how they are valued. The amendments in this Update should be applied on a retrospective basis and are effective for annual periods beginning after June 15, 2021. The Agency implemented this pronouncement in fiscal year 2022.

#### Note 2: Cash and Cash Equivalents

The Agency participates in a Sweep Repurchase Agreement through a reputable financial institution. Daily, the financial institution sells to the Agency an undivided fractional interest in the principal amount of securities or financial instruments. Market risks associated with this agreement are similar to market risks associated with the security purchased. The securities have a current market value equal to or greater than the principal amount of the transaction. The funds invested in the Sweep Agreement are not considered deposits and are not insured by the Federal Deposit Insurance Corporation; however, the funds are collateralized by the securities purchased with those funds. No amounts are considered at risk as of June 30, 2022 and 2021. Although management has expressed no intention to do so, the Agency may terminate the agreement at any time.

All funds invested in the Sweep Agreement are included in cash and cash equivalents due to the short-term nature of the investment. The funds invested in the Agreement are immediately available from the financial institution.

#### **Note 3: Endowment Funds and Investments**

The Agency's internal investment policy requires diversification between equity holdings, fixed income securities, and cash and cash equivalents. The purpose of the investments is to increase the stability of funding for the Agency and its services through the use of investment income to cover program development, special projects, and serves as an emergency reserve fund.

The Agency's investments consisted of the following as of June 30:

	2022	2021
Total investments at cost	\$ 2,632,684 \$	2,539,238
	 · · ·	<u> </u>
Total investments at market	\$ 2,538,232 \$	2,883,338
Less endowment investments at market	737,929	824,179
Current investments at market	\$ 1,800,303 \$	2,059,159

Of the amounts above, the Agency has an established permanent, irrevocable endowment fund in the amount of \$737,929 and \$824,179 for 2022 and 2021, respectively. The principal of restricted funds, \$443,619 and \$423,619, is intended to remain whole in perpetuity, with income earned being available for the charitable purposes of the Agency.

#### Note 3: Endowment Funds and Investments (Continued)

Activity related to the endowment funds consisted of:

As of June 30, 2022		thout Donor estrictions	With Donor Restrictions
Beginning balance	\$	400,560 \$	423,619
Investment income		18,414	-
Net depreciation		(118,827)	-
Contributions		-	20,000
Investment fees		(5,837)	-
Ending balance	\$	294,310 \$	443,619
	Wi	thout Donor	With Donor
As of June 30, 2021	R	estrictions	Restrictions
Beginning balance	\$	226,575 \$	387,119
Investment income		18,504	-
Net appreciation		161,156	-
Contributions		-	36,500
Investment fees		(5,675)	-
Ending balance	\$	400,560 \$	423,619

Youth Homes' endowment consists of funds established for the support of the Agency. As required by GAAP, net assets associated with the endowment funds are classified and reported based on the existence or absence of donor-imposed restrictions. Agency management has interpreted the State Prudent Management of Institutional Funds Act (SPMIFA) as requiring the preservation of the fair value of the original gift as of the gift date of the donor-restricted endowment funds absent explicit donor stipulations to the contrary. As a result of this interpretation, Youth Homes classifies as net assets with donor restrictions (a) the original value of gifts to the permanent endowment, (b) the original value of subsequent gifts to the permanent endowment, and (c) accumulations to the permanent endowment made in accordance with the direction of the applicable donor gift instrument at the time the accumulation is added to the fund. The remaining portion of the donor-restricted endowment fund that is not classified in net assets with donor restrictions is classified as net assets without donor restrictions. In accordance with SPMIFA, the Agency considers the following factors in making a determination to appropriate or accumulate donor-restricted endowment funds: (1) the duration and preservation of the fund, (2) the purposes of the organization and the donor-restricted endowment fund, (3) general economic conditions, (4) the possible effect of inflation and deflation, (5) the expected total return from income and the appreciation of investments, (6) other resources of the organization, and (7) the investment policies of the organization.

#### Note 4: Fair Value Measurements

ASC No. 820-10-35 prioritizes the inputs into three levels that may be used to measure fair value:

- Level 1: Applies to assets or liabilities for which there are quoted prices in active markets for identical assets or liabilities.
- Level 2: Applies to assets or liabilities for which there are inputs other than quoted prices that are observable for the asset or liability such as quoted prices for similar assets or liabilities in active markets; quoted prices for identical assets or liabilities in markets with insufficient volume or infrequent transactions (less active markets); or model-derived valuations in which significant inputs are observable or can be derived principally from, or corroborated by, observable market data.
- Level 3: Applies to assets or liabilities for which there are unobservable inputs to the valuation methodology that are significant to the measurement of the fair value of the assets or liabilities.

The asset or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used during the years ended June 30, 2022 and 2021.

- Equity and debt securities are valued at the closing price reported on the active market on which the individual securities are traded.
- Money market Valued at \$1 as the net asset value (NAV), which approximates fair value.
- Mutual funds Valued at the daily closing price as reported by the fund. Mutual funds held by the
  Organization are open-end mutual funds that are registered with the Securities and Exchange Commission.
  These funds are required to publish their daily net asset value (NAV) and to transact at that price. The funds
  held by the Organization are deemed to be actively traded.
- Exchange traded funds (ETFs) These consist of marketable securities that track an index, a commodity, bonds, or a basket of assets like an index fund.

The preceding methods described may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Agency believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

#### Note 4: Fair Value Measurements (Continued)

The following tables set forth by level, within the fair value hierarchy, the Agency's assets and liabilities measured at fair value:

June 30, 2022	Level 1	Level 2		Level 3		Total Fair Value
June 30, 2022				Levers		Value
Mutual funds/ETFs	\$ 2,507,336 \$		- \$		- \$	2,507,336
Total mutual funds/ETFs	2,507,336		-		-	2,507,336
Money markets	30,896		-		-	30,896
Total assets	\$ 2,538,232 \$		- \$		- \$	2,538,232
						Tatal Falm
June 30, 2021	Level 1	Level 2		Level 3		Total Fair Value
June 30, 2021 Mutual funds/ETFs	\$ Level 1 2,847,039 \$		- \$	Level 3	- \$	
	\$		- \$	Level 3	- \$	Value
Mutual funds/ETFs	\$ 2,847,039 \$		- \$	Level 3	- \$ -	Value 2,847,039

#### **Note 5: Accounts Receivable**

Accounts receivable consisted of the following at June 30:

	2022	2021
Accounts receivable	\$ 408,658 \$	397,993
Less:		
Allowance for doubtful accounts	(9,491)	(9,491)
Allowance for contractual adjustments	(10,168)	(10,168)
Accounts receivable, net	\$ 388,999 \$	378,334

#### Note 5: Accounts Receivable (Continued)

Accounts receivable represent amounts owed to the Agency from foster and Medicaid service contracts and outpatient therapy visits. Accounts receivable are predominantly for shelter contracts with the Montana State Department of Family Services and reimbursable services through Medicaid, managed care, and other third-party insurance providers.

The Agency aggressively pursues payment for the first 180 days and claims are re-billed if the reason for denial can be disputed. Youth Homes has implemented a system to ensure that billed amounts are collected immediately and all disputes are resolved immediately.

#### **Note 6: Property and Equipment**

A summary of property and equipment is as follows as of June 30, 2022 and 2021:

	2022	2021
Furniture and equipment	\$ 106,312 \$	100,968
Vehicles	236,279	235,539
Buildings and improvements	3,382,383	3,327,751
Land	374,243	374,243
Total property and equipment	4,099,217	4,038,501
Less accumulated depreciation	(2,266,169)	(2,162,881)
Property and equipment - Net	\$ 1,833,048 \$	1,875,620

#### Note 7: Liquidity and Availability of Financial Resources

The Youth Homes has \$1,391,676 of financial assets available within one year of the statement of financial position date consisting of cash of \$978,731, accounts receivable of \$388,999, and receivables from related parties of \$23,946. None of the financial assets are subject to donor or other contractual restrictions that make them unavailable for general expenditure within one year of the statement of financial position date. The Youth Homes has a goal to maintain financial assets, which consist of cash and short-term investments, on hand to meet 30 days of normal operating expenses, which are, on average, approximately \$500,000. Youth Homes has board restricted current investments in the amount of \$1,800,303 that can be used at the discretion of the board. As more fully described in Note 12, the Youth Homes also has a line of credit in the amount of \$500,000, which it could draw upon in the event of an unanticipated liquidity needs.

#### **Note 8: In-Kind Contributions**

The Agency recognizes contributed nonfinancial assets within revenue, including contributed services, household goods, clothing, and auction items. Unless otherwise noted, contributed nonfinancial assets did not have donor-imposed restrictions. The total amount of contributed nonfinancial assets in 2022 was \$45,730.

#### Note 9: Employee Benefit Plan

The Agency has a 401(k) plan designed to match employee contributions. The current approved match is 2-1 (employer-employee) up to 3% of employee wages. For the years ended June 30, 2022 and 2021, the 401(k) plan expense was \$53,311 and \$52,254, respectively.

#### Note 10: Leases

The Agency classifies its leases as either operating or capital leases. Currently, all leases are operating leases. The Agency leases office space in Polson for \$250 per month on a month to month basis and in Helena for \$2,100 per month expiring December 2023.

The Agency leases office space in Missoula. These space is currently being leased on a month to month basis at a base rate of \$5,771 per month which includes all common area maintenance.

The Agency also leases one facility in Helena for \$1 per year. The lease term is for 20 years expiring June 2028.

#### Note 11: Long Term Debt

As of June 30,	2022	2021
Loan payable at 5% interest due in monthly payments of principal and interest of \$3,700 through November 2024; secured by land, 825 East Oregon Street, Kalispell.	\$ 95,952 \$	134,221
Loan payable at 6.84% interest due in monthly payments of principal and interest of \$394 through December 2023; secured by vehicle. Paid off in 2022.	-	10,794
Total debt	95,952	145,015
Less current portion	40,370	42,518
Total long-term debt	\$ 55,582 \$	102,497
Loan principal matures as follows for the years ending June 30:		
2023	\$ 40,370	
2024	42,431	
2025	13,151	
	\$ 95,952	

#### Note 12: Line of Credit

The Agency has a \$500,000 line of credit available with First Interstate Bank at the Wall Street Journal Prime Interest Rate (3.25%) due May 2023, secured by current investments of the Agency. No advances were outstanding as of June 30, 2022 and 2021.

#### Note 13: Net Assets Without Donor Restrictions

Net assets without donor restrictions are comprised of the following as of June 30:		2022	2021
Without donor restrictions	\$	3,038,058 \$	3,234,603
Board restricted - reserve funds	7	1,800,303	2,059,159
Total net assets without donor restrictions	\$	4,838,361 \$	5,293,762
Note 14: Net Assets With Donor Restrictions			
Net assets without donor restrictions are comprised of the following as of June 30:		2022	
		2022	2021
Restricted into perpetuity - Endowment funds	\$	443,619 \$	2021 423,619

#### **Note 15: Related Parties**

On July 1, 1999, the Agency entered into a joint venture with Intermountain in Helena, Montana, to form the Partnership for Children (Partnership). The objective of the Partnership is to provide attachment based therapeutic group and foster care in Missoula, Montana.

During the years ended June 30, 2022 and 2021, the Agency received \$228,342 and \$199,858 in management fees and \$497 and \$3,779 in expense reimbursements from the Partnership, respectively. Receivable balances from Partnership totaled \$23,946 and \$24,079 as of June 30, 2022 and 2021, respectively.

#### Note 16: Risk Management

The Agency faces a number of risks including loss or damage to property, general liability, and employee medical insurance. Commercial insurance policies are purchased for loss or damage to property, general liability and employee medical insurance.

#### Note 17: Concentration of Risk

The Agency received 28% and 28% of its revenues from contracts with the State of Montana for the fiscal years ended June 30, 2022 and 2021, respectively. The Agency received another 25% and 22% of its revenues from contracts with the State of Montana Medicaid Programs for the fiscal years ended June 30, 2022 and 2021, respectively. A significant change in these contractual arrangements may substantially affect the operations of the Agency.

#### Note 18: Subsequent Events

In accordance with ASC 855, Management has evaluated all subsequent events through November 2, 2022, which is the date the financial statements were available to be issued. There were no material subsequent events that required recognition or additional disclosure in these financial statements.

#### Note 19: Risk and Uncertainties

As of the date of issuance of the financial statements, the Agency has continued to see adverse impact from current economic conditions in the form of an increased cost in wages and a workforce shortage. Any future impact on the Agency cannot be reasonably estimated at this time.

### Youth Homes Schedule of Expenditures of Federal Awards

Year Ended June 30, 2022

Contract Number	Assistance Listing Number	Program Time Period	Award Amount	Federal Expenditure
Number	Listing Number	Time Period	Award Amount	Expenditure
123FCIP0007	93.674	7/1/2021-6/30/2022	\$ 826,623	\$ 773,06
-	93.667	7/1/2021-6/30/2022	54,700	54,70
3MT306N1099	10.553	7/1/2021-6/30/2022	26,668	26,66
3MT306N1099	10.555	7/1/2021-6/30/2022	29,002	29,00
-	-	7/1/2021-6/30/2022	5,673	5,67
				61,34
	0123FCIP0007 - 3MT306N1099 3MT306N1099 -	- 93.667 3MT306N1099 10.553 3MT306N1099 10.555	- 93.667 7/1/2021-6/30/2022 3MT306N1099 10.553 7/1/2021-6/30/2022 3MT306N1099 10.555 7/1/2021-6/30/2022	- 93.667 7/1/2021-6/30/2022 54,700 3MT306N1099 10.553 7/1/2021-6/30/2022 26,668 3MT306N1099 10.555 7/1/2021-6/30/2022 29,002

Notes to Schedule of Expenditures of Federal Awards

Year Ended June 30, 2022

#### Note 1: Basis of Presentation

The accompanying schedule of expenditures of federal awards ("Schedule") includes the federal award activity of the Agency. The information in this schedule is presented in accordance with the requirements of Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (the "Uniform Guidance"). Because the schedule presents only a selected portion of the operations of the Agency, it is not intended to and does not present the financial position, changes in net assets, or cash flows of the Agency.

#### **Note 2: Summary of Significant Accounting Policies**

Expenditures reported on the Schedule are reported on the accrual basis of accounting. Such expenditures are recognized following the cost principles contained in the Uniform Guidance, wherein certain types of expenditures are not allowable or are limited as to reimbursement.

#### Note 3: Indirect Cost

The Agency has elected not to use the 10-percent de minimis indirect cost rate allowed under the Uniform Guidance.

#### **Note 4: Subrecipients**

The Agency passed no federal awards through to subrecipients.

## WIPFLI

#### Independent Auditor's Report on Internal Control Over Financial Reporting and on Compliance and Other Matters Based on an Audit of Financial Statements Performed in Accordance with *Government Auditing Standards*

Board of Directors Youth Homes Missoula, Montana

We have audited, in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States, the financial statements of Youth Homes as of and for the year ended June 30, 2022, and the related notes to the financial statements, which collectively comprise Youth Homes' basic financial statements, and have issued our report thereon dated November 2, 2022.

#### Auditor's Responsibility

In planning and performing our audit of the financial statements, we considered Youth Homes' internal control over financial reporting ("internal control") to determine the audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing opinions on the effectiveness of the Agency's internal control. Accordingly, we do not express an opinion on the effectiveness of Youth Homes' internal control.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent or detect and correct misstatements on a timely basis. A material weakness is a deficiency, or combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented or detected and corrected on a timely basis. A significant deficiency is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit, we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

#### **Compliance and Other Matters**

As part of obtaining reasonable assurance about whether Youth Homes' financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit and, accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

#### **Purpose of This Report**

The purpose of this report is solely to describe the scope of our testing of internal control and compliance, and the results of that testing, and not to provide an opinion on the effectiveness of Youth Homes' internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the Youth Homes' internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

Wippei LLP

Wipfli LLP

Missoula, Montana November 2, 2022

## WIPFLI

#### Independent Auditor's Report on Compliance for Each Major Federal Program and on Internal Control Over Compliance Required by the Uniform Guidance

Youth Homes Missoula, Montana

#### **Report on Compliance for Each Major Federal Program**

We have audited Youth Homes' compliance with the types of compliance requirements described in the *U.S. Office of Management and Budget (OMB) Compliance Supplement* that could have a direct and material effect on its major federal program for the year ended June 30, 2022. Youth Homes' major federal and state programs are identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs.

#### Management's Responsibility for Compliance

Management is responsible for compliance with the requirements of laws, regulations, contracts, and grants applicable to its federal and state programs.

#### Auditor's Responsibility

Our responsibility is to express an opinion on compliance for each of Youth Homes' major federal and state programs based on our audit of the types of compliance requirements referred to above. We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States; the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States; the audit requirements of Title 2 U.S. *Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Those standards and the Uniform Guidance require that we plan and perform the audit to obtain reasonable assurance about whether noncompliance with the types of compliance requirements referred to above that could have a direct and material effect on a major federal or state program occurred. An audit includes examining, on a test basis, evidence about Youth Homes' compliance with those requirements and performing such other procedures as we considered necessary in the circumstances.

We believe that our audit provides a reasonable basis for our opinion on compliance for each major federal and state program. However, our audit does not provide a legal determination on Youth Homes' compliance.

#### **Opinion on Major Federal Program**

In our opinion, Youth Homes complied, in all material respects, with the types of compliance requirements referred to above that could have a direct and material effect on its major federal program for the year ended June 30, 2022.

#### **Report on Internal Control Over Compliance**

Management of Youth Homes is responsible for establishing and maintaining effective internal control over compliance with the types of compliance requirements referred to above. In planning and performing our audit of compliance, we considered Youth Homes' internal control over compliance with the types of requirements that could have a direct and material effect on a major federal or state program to determine the auditing procedures that are appropriate in the circumstances for the purpose of expressing an opinion on compliance for each major or federal and state program and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, we do not express an opinion on the effectiveness of Youth Homes' internal control over compliance.

A deficiency in internal control over compliance exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent or detect and correct noncompliance with a type of compliance requirement of a federal or state program on a timely basis. A material weakness in internal control over compliance is a deficiency, or combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal or state program will not be prevented or detected and corrected on a timely basis. A significant deficiency is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal or state program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance.

Our consideration of internal control over compliance was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies and therefore material weaknesses or significant deficiencies may exist that were not identified. We did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of that testing based on the requirements of the Uniform Guidance. Accordingly, this report is not suitable for any other purpose.

Wippei LLP

Wipfli LLP

Missoula, Montana November 2, 2022

### Schedule of Findings and Questioned Costs

Year Ended June 30, 2022

#### Section I - Summary of Auditor's Results

Financial Statements	
Type of auditor's report issued:	Unmodified
Internal control over financial reporting:	
Material weakness identified?	yes <u>X</u> no
Significant deficiency(ies) identified ?	yes <u>X</u> none reported
Noncompliance material to the financial statements?	yes <u>X</u> no
Federal Awards	
Internal control over compliance:	
Material weakness identified?	yes <u>X</u> no
Significant deficiency(ies) identified ?	yes X none reported
Type of auditor's report issued on compliance for major programs:	Unmodified
Any audit findings disclosed that are required to be reported in accordance with Uniform Guidance [2 CFR 200.516(a)]?	yes <u>X</u> no
Identification of major federal programs:	
Federal Assistance Listing Number	Name of Federal Program or Cluster
93.674	Federal Chafee Foster Care Independence Program
Dollar threshold used to distinguish between Type A and Type B programs	\$750,000
Auditee qualified as a low-risk auditee?	yesXno

Schedule of Findings and Questioned Costs

Year Ended June 30, 2022

**Section II - Financial Statement Findings** 

None.

Section III – Federal Award Findings

None.

	_		Return of Organization Exempt Fro	om In	come Tax	OMB No. 1545-0047
Form <b>990</b> Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)					2021	
Do not enter social security numbers on this form as it may be made public.						
Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.					Open to Public Inspection	
					JN 30, 2022	•
_	heck if		organization		D Employer identificat	tion number
	oplicat				,,	
	Addr	ess ge YOUT	H HOMES			
	Name	9	usiness as		81-0331313	3
	Initia			om/suite	E Telephone number	
		550	CALIFORNIA STREET		406-721-27	704
	termi ated	n	own, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	7,134,056.
	Amer	nded MTCC	OULA, MT 59802	ľ	H(a) Is this a group retu	
	 tion		nd address of principal officer: DANN SWALLOW		for subordinates?	
	pend		AS C ABOVE		H(b) Are all subordinates inclu	
ΙT	ax-e>	empt status:	X 501(c)(3) 501(c) ( )◀ (insert no.) 4947(a)(1) or	527	If "No," attach a lis	t. See instructions
			YOUTHHOMES.COM		H(c) Group exemption r	
		f organization:			f formation: 1971 M S	
	rt I	Summary	· · · · · · · · · · · · · · · · · · ·			
	1	Briefly describ	e the organization's mission or most significant activities: GROUP	YOUTH	HOMES AND F	'OSTER
JCe		CARE				
Governance	2	Check this bo	x      if the organization discontinued its operations or disposed of the second secon	of more t	han 25% of its net asset	5.
ver	3		ing members of the governing body (Part VI, line 1a)			12
	4		ependent voting members of the governing body (Part VI, line 1b)			12
Activities &	5		of individuals employed in calendar year 2021 (Part V, line 2a)			237
itie	6		of volunteers (estimate if necessary)			20
ctiv			d business revenue from Part VIII, column (C), line 12			0.
Ă			business taxable income from Form 990-T, Part I, line 11			0.
					Prior Year	Current Year
	8	Contributions	and grants (Part VIII, line 1h)		2,962,989.	2,743,547.
nue	9		ce revenue (Part VIII, line 2g)		4,057,651.	4,262,317.
Revenue	10		come (Part VIII, column (A), lines 3, 4, and 7d)		66,362.	64,322.
R	11		(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		20,421.	-24,756.
	12		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)		7,107,423.	7,045,430.
	13		nilar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	14		co or for members (Part IX, column (A), line 4)		0.	0.
	15		compensation, employee benefits (Part IX, column (A), lines 5-10)		4,603,304.	5,060,877.
ses			undraising fees (Part IX, column (A), line 11e)		0.	0.
nəc	h		ng expenses (Part IX, column (D), line 25)  322,818			
Expense	17		es (Part IX, column (A), lines 11a-11d, 11f-24e)		1,457,656.	2,011,124.
	18	-	s. Add lines 13-17 (must equal Part IX, column (A), line 25)		6,060,960.	7,072,001.
	19		expenses. Subtract line 18 from line 12		1,046,463.	-26,571.
Sc Ss	13	incrende less			inning of Current Year	End of Year
ance	20	Total assets (F	Part X line 16)		6,244,946.	5,781,519.
Ass( Balá	20 21				527,565.	499,539.
Net Assets or Fund Balances	21		(Part X, line 26) fund balances. Subtract line 21 from line 20		5,717,381.	5,281,980.
Pa	rt II	Signature			5,,1,,501.	5,201,500.
		-	declare that I have examined this return, including accompanying schedules and	1 statemer	nts and to the best of my kn	owledge and belief it is
	-		Declaration of prenarer (other than officer) is based on all information of which r			טווטו, וג וט

Sign Here	Signature of officer         DANN SWALLOW, INTERIM         Type or print name and title	EXECUTIVE DIRECTOR	Date				
Paid	Print/Type preparer's name SAM BRUNSON, CPA	Preparer's signature SAM BRUNSON, CPA	Date Check PTIN if self-employed P01696998				
Preparer	Firm's name <b>WIPFLI LLP</b>	<b>-</b>	Firm's EIN ▶ 39-0758449				
Use Only	Firm's address 101 EAST FRONT S	TREET #301					
	MISSOULA, MT 598	02	Phone no. 406.728.1800				
May the I	RS discuss this return with the preparer shown abo	ove? See instructions	X Yes No				
132001 12-0	32001       12-09-21       LHA       For Paperwork Reduction Act Notice, see the separate instructions.       Form 990 (2021)						

Da		81-0331313	Page
a	rt III Statement of Program Service Accomplishments		_
	Check if Schedule O contains a response or note to any line in this Part III		L
	Briefly describe the organization's mission:		
	THE MISSION OF YOUTH HOMES IS TO HELP EVERY YOUTH FEEL SAM	FE, HAVE A	
	SENSE OF BELONGING, AND FIND A PLACE TO CALL HOME.		
	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ?	Ye	s XI
	If "Yes," describe these new services on Schedule O.		
	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Ye	s XI
	If "Yes," describe these changes on Schedule O.		
	Describe the organization's program service accomplishments for each of its three largest program services, as me	easured by expense	s.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,	the total expenses,	and
	revenue, if any, for each program service reported.		
а	(Code:) (Expenses \$5 , 797 , 712including grants of \$) (Revenue		<u>,487</u>
	SHELTER, GROUP HOME, AND FOSTER CARE FOR ADOLESCENTS AND		
	TEMPORARY CARE, LONG-TERM CARE AND FOSTER CARE PROVIDED FO	OR	
	APPROXIMATELY 495 YOUTHS THIS YEAR.		
b	(Code:) (Expenses \$ including grants of \$) (Revenue	\$	
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		\$ \$   )	

81-0331313	Page 3

Form	990 (2021) YOUTH HOMES 81-0331	313	P	age <b>3</b>
Pa	t 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	<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	<u> </u>
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		<u> </u>
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	Х	<u> </u>
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	<u>11a</u>	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			37
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
с	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			v
	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			v
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		v	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	10	v	
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	400		x
40	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?	<u>14a</u>		
u	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	140		
10	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
10	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,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	<u> </u>		
	1c and 8a? If "Yes," complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes."			
	complete Schedule G, Part III	19		x
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? <i>If "Yes." complete Schedule I. Parts I and II</i>	21		x
132003			990	(2021)

132003 12-09-21

Form	990	(2021)
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 Form 990 (2021)
 YOUTH HOMES

 Part IV
 Checklist of Required Schedules (continued)

			Vee	Na
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
22		22		x
23	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
20	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			
	Schedule K. If "No," go to line 25a	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes, " complete			
	Schedule L, Part I	25b		X X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	07		x
00	entity (including an employee thereof) or family member of any of these persons? <i>If</i> "Yes," <i>complete Schedule L, Part III</i>	27		
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
•	instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
a		28a		x
h	"Yes," complete Schedule L, Part IV	28b		X
	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 non-cash 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	L
	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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			x
07	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	37		x
38	and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i> Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	31		- 23
00	Notes All Free 2000 files and the second to Ochechele O	38	х	
Par				1
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 4			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
132004	¥ 12-09-21	Form	990	(2021)

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	990 (2021) YOUTH HOMES 81-0331	313	P	age <b>5</b>				
Par	<b>V</b> Statements Regarding Other IRS Filings and Tax Compliance (continued)							
			Yes	No				
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 237							
h	, , , , ,	2b	Х					
a	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	20	Λ	<u> </u>				
30	<b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> . See instructions Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		х				
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		<u> </u>				
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	0.0						
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		x				
b	If "Yes," enter the name of the foreign country							
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).							
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х				
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х				
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c						
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit							
	any contributions that were not tax deductible as charitable contributions?	6a		X				
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts							
	were not tax deductible?	6b		L				
7	Organizations that may receive deductible contributions under section 170(c).							
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X				
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<u> </u>				
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7.		x				
لم	to file Form 8282?	7c						
	If "Yes," indicate the number of Forms 8282 filed during the year 7d							
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?							
r a	If the organization, eceived a contribution of qualified intellectual property, did the organization file Form 8899 as required?							
9 h								
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	7h						
•	sponsoring organization have excess business holdings at any time during the year?							
9								
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a						
	<b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?							
10	Section 501(c)(7) organizations. Enter:							
а	Initiation fees and capital contributions included on Part VIII, line 12							
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b							
11	Section 501(c)(12) organizations. Enter:							
а	Gross income from members or shareholders							
b	Gross income from other sources. (Do not net amounts due or paid to other sources against							
	amounts due or received from them.)							
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		<b></b>				
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.							
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		<u> </u>				
	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.							
a	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 Enter the amount of reserves on hand 13c							
		14a		X				
	Did the organization receive any payments for indoor tanning services during the tax year?	14b		<u> </u>				
15								
	excess parachute payment(s) during the year?	15		x				
	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, any disqualified person, or mine operator engage in any							
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17						
	If "Yes," complete Form 6069.							
132005	12-09-21 6	Form	990	(2021)				

_	rt VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 to	hrough			<u>3313</u>			age
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O				101 a	NO I	espor	36
	Check if Schedule O contains a response or note to any line in this Part VI							X
Sec	tion A. Governing Body and Management			<u></u>				
							Yes	N
1a	Enter the number of voting members of the governing body at the end of the tax year	<b>1</b> a			12		100	
	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			12			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	·	any othe	r				
	officer, director, trustee, or key employee?				- I	2		x
3	Did the organization delegate control over management duties customarily performed by or under the				·····			
	of officers, directors, trustees, or key employees to a management company or other person?		•			3		x
4	Did the organization make any significant changes to its governing documents since the prior Form 9					4		X
5	Did the organization become aware during the year of a significant diversion of the organization's ass					5		X
6	Did the organization have members or stockholders?				Г	6		X
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, si	ockho	lders, or		····			
-	persons other than the governing body?					7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year				····			
a	The governing body?			•	- E	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 rea				····· F			
-	organization's mailing address? <i>If "Yes," provide the names and addresses on Schedule O</i>					9		x
ec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue	Code )			-		1
		Venue	0000.				Yes	N
10a	Did the organization have local chapters, branches, or affiliates?				ſ	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such ch				····· F			
		•	, 			10b		
l1a	Has the organization provided a complete copy of this Form 990 to all members of its governing bod				E	11a	Х	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		0					
	Did the organization have a written conflict of interest policy? If "No," go to line 13				[	12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise				Г	12b	Х	
					····· F			
	on Schedule O how this was done	,				12c	Х	
13	Did the organization have a written whistleblower policy?				····· F	13	Х	
14	Did the organization have a written document retention and destruction policy?					14	Х	
15	Did the process for determining compensation of the following persons include a review and approva				·····			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	,						
а	The organization's CEO, Executive Director, or top management official				- I	15a	Х	
	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 arranger	nent w	ith a					
	taxable entity during the year?				- I	16a		x
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat				·····	104		
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ		•	011				
	exempt status with respect to such arrangements?				- 1	16b		
Sec	tion C. Disclosure			<u></u>	·····	100		
17	List the states with which a copy of this Form 990 is required to be filed <b>NONE</b>							
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and	nd 990	-T (sectio	on 501	(c)(3)s	only)	availa	ble
	for public inspection. Indicate how you made these available. Check all that apply.	10 000	1 (0000			erny)	avana	010
	Own website Another's website X Upon request Other (explain	on Sc	hodulo (	ור				
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co				v and	finano	cial	
	statements available to the public during the tax year.			- 2010	,, and		- 141	
20	State the name, address, and telephone number of the person who possesses the organization's boo	oks and	1 records	: ►				
	DANN SWALLOW - $406-721-2704$							
	550 CALIFORNIA STREET, MISSOULA, MT 59802							
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Form 990 (2021)	YOUTH HOMES	81-0331313	Page 7						
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated									
Employees, and Independent Contractors									
Check	k if Schedule O contains a response or note to any line in this Part VII		X						
Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees									
As Considerable to the second state to Barrie to the second state to the second state of the second state to t									

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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B)		(C)		(D)	(E)	(F)			
Name and title	Average	Position (do not check more than one		Position		Reportable	Reportable	Estimated		
	hours per	box	box, unless person is both an officer and a director/trustee)		compensation	compensation	amount of			
	week		cer ar		recio	r/trus	lee)	from	from related	other
	(list any	recto						the	organizations	compensation
	hours for related	e or di	ee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	from the
	organizations	rustee	trust		ee	npens		1099-NEC)	1099-NEC)	organization and related
	below	lual ti	tiona		nploy	st cor yee	L	1000 NEO)		organizations
	line)	ndividual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			organizationo
(1) ELMER ROSENTHAL	32.00				-		4			
EXECUTIVE DIRECTOR	8.00	1		X				85,832.	Ο.	12,186.
(2) DANN SWALLOW	32.00									
CFO	8.00	1		x				82,243.	0.	9,031.
(3) JAYMIE BOWDITCH	2.00									
PRESIDENT		Х		Х				0.	0.	0.
(4) SHANNONE HART	2.00									
VICE PRESIDENT		X		X				0.	Ο.	0.
(5) ERIC PETERSEN	2.00									
SECRETARY/TREASURER		х		X				0.	Ο.	0.
(7) REGHAN BRANDT	1.00									
DIRECTOR		х						0.	Ο.	0.
(8) LARRY FLANAGAN	1.00									
DIRECTOR		X						0.	Ο.	0.
(9) BOB HERMES	1.00									
DIRECTOR		X						0.	Ο.	0.
(10) DR. KIM MCKEARNAN	1.00									
DIRECTOR		Х						0.	Ο.	0.
(11) ANN MUNSEY	1.00									
DIRECTOR		Х						0.	0.	0.
(12) HARRY SAXTON	1.00									
DIRECTOR		X						0.	Ο.	0.
(13) MAEGAN RIDES AT THE DOOR	1.00									
DIRECTOR		Х						0.	0.	0.
(14) CHRISTIAN WOHLFEIL	1.00									
DIRECTOR		х						0.	Ο.	0.
(15) JULI YOBST	1.00									
DIRECTOR		х						0.	Ο.	0.

132007 12-09-21

	form 990 (2021) YOUTH HOMES 81-0331313 Page 8													
Par	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
	(A) Name and title	<b>(B)</b> Average hours per week (list any	Average hours per week			(C) Position check more than one ess person is both an nd a director/trustee)			(D) Reportable compensation from the	(E) Reportable compensatio from related organization	n t	an	(F) stimate nount other pensa	of
		hours for related organizations below line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC/ 1099-NEC)	(W-2/1099-MIS 1099-NEC)		org an	om the anizat d relate anizatio	ion ed
	Subtotal								168,075.		0.	2	1,2	17.
с	Total from continuation sheets to Part VI	I, Section A							<u> </u>		0.		1,2	0.
 2	Total (add lines 1b and 1c) Total number of individuals (including but n							o re		000 of reportable		2	1,2.	1/•
	compensation from the organization													0
3	Did the organization list any <b>former</b> officer,	-			•	•		Ŭ	• •			0	Yes	No X
4	line 1a? If "Yes," complete Schedule J for s For any individual listed on line 1a, is the su and related organizations greater than \$150	im of reportable	e co	mpe	ensa	tion	and	oth	ner compensation from t	ne organization		3 4		x
5	Did any person listed on line 1a receive or a	accrue compen	sati	on fr	rom	any	unre	elate	ed organization or individ	lual for services		5		X
Sec	rendered to the organization? If "Yes," com tion B. Independent Contractors	piele Schedule	; <u>J</u> [(	<u>or st</u>	<u>ICH </u>	Jers	011 .					5		
1	Complete this table for your five highest control the organization. Report compensation for the organization for the organization compensation compensation for the organization compensation comp										ensat	tion fro	om	
	(A) Name and business	address	NC	ONE	3				<b>(B)</b> Description of s	ervices	C	<b>)</b> ompe	<b>;)</b> nsatio	n
								_						
								_						
2	Total number of independent contractors (in \$100,000 of compensation from the organized structure).	•	ot lin	niteo	d to f	thos (		ted	above) who received mo	ore than				
		F										Form	<b>990</b> (2	2021)

		Check if Schedule O					(A)	(B)	(C)	(D)
							Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue exclud from tax unde sections 512 - 1
2	1 a	Federated campaigns		1a						
	с	Fundraising events			3	26,089.				
		Government grants (cont			1,0	05,100.				
5		All other contributions, gifts			_ / •					
5	•	similar amounts not include			14	12,358.				
2	~				-,-	45,730.				
2	-	Noncash contributions included in					2,743,547.			
3	n	Total. Add lines 1a-1f			1	Business Code	2,743,347.			
	-		770	ΠC	-		2 705 160	2 705 160		
	2 a	CONTRACT SERV		£5	_  -			3,785,168.		
	b	OTHER REVENUE			_	624100	248,807.			
	С	REIMBURSEMENT	'S		_	624100	228,342.	228,342.		
	d				_					
	е									
	f	All other program service	reve	nue	🗋					
	g	Total. Add lines 2a-2f				🕨	4,262,317.			
	3	Investment income (inclu	ding	dividends, int	terest	, and				
		other similar amounts)				►	64,322.			64,32
	4	Income from investment								
	5	Royalties		-						
				(i) Real		(ii) Personal				
	6 9	Gross rents	6a	<u> </u>	).					
		Less: rental expenses	6b		).					
		Rental income or (loss)	6c	C 00/						
				0,000		•	6,000.	6,000.		
		Net rental income or (loss		(i) Securitie		(ii) Other	0,000.	0,000.		
	/ a	Gross amount from sales of			5					
		assets other than inventory	7a							
	b	Less: cost or other basis								
		and sales expenses								
	С	Gain or (loss)	7c							
	d	Net gain or (loss)				🕨				
	8 a	Gross income from fundrais								
		including \$ 326	5,0	89. of						
		contributions reported or	n line	1c). See						
		Part IV, line 18			8a	17,700.				
	b	Less: direct expenses				87,541.				
		Net income or (loss) from		····· L			-69,841.			-69,84
		Gross income from gami		r	<u> </u>					
	5 a	Part IV, line 19	-		9a	12,000.				
	Ŀ			r	9a 9b	1,085.				
		Less: direct expenses		-	90	1,005.	10,915.			10 01
		Net income or (loss) from	-	n -		····· 🕨	10,915.			10,91
1	10 a	Gross sales of inventory,								
		and allowances			10a					
l	b	Less: cost of goods sold			10b					
L	С	Net income or (loss) from	sales	s of inventory	′ <u>.</u> .	►				
ĺ						Business Code				
1	11 a	MISC. INCOME	&	<u>REFUNDS</u>	5	900099	28,170.	28,170.		
	b									
	с				-					
ł		All other revenue			-					
1		Total. Add lines 11a-11d					28,170.			
								4,296,487.	0.	5,39

Form 990 (2021) YOUTH HOMES

Form 990 (2021) YOUTH HOMES
Part IX Statement of Functional Expenses

	501(c)(3) and 501(c)(4) organizations must compl Check if Schedule O contains a respons		his Part IX		
	include amounts reported on lines 6b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Gra	ants and other assistance to domestic organizations				
	d domestic governments. See Part IV, line 21				
	ants and other assistance to domestic				
	dividuals. See Part IV, line 22				
	ants and other assistance to foreign				
	ganizations, foreign governments, and foreign				
	dividuals. See Part IV, lines 15 and 16				
	enefits paid to or for members				
	ompensation of current officers, directors,	206 222	166 001	20 112	10 100
	istees, and key employees	206,332.	166,081.	28,113.	12,138
	mpensation not included above to disqualified				
	rsons (as defined under section 4958(f)(1)) and				
	rsons described in section 4958(c)(3)(B)	2 000 077	2 012 200	E 4 2 0 0 0	004 040
	her salaries and wages	3,992,077.	3,213,308.	543,920.	234,849
	nsion plan accruals and contributions (include		22.000	14 100	
	ction 401(k) and 403(b) employer contributions)	47,416. 503,274.	33,220.	<u>14,196.</u> 60,835.	
	her employee benefits	503,274.	410,042.	60,835.	<u>32,397</u> 18,797
) Pa	lyroll taxes	311,778.	257,075.	35,906.	18,797
	es for services (nonemployees):				
<b>a</b> Ma	anagement				
b Le	gal	477.	477.		
<b>c</b> Ac	counting	21,692.	21,692.		
<b>d</b> Lo	bbying				
e Pro	ofessional fundraising services. See Part IV, line 17				
f Inv	vestment management fees	20,336.		20,336.	
g Ot	her. (If line 11g amount exceeds 10% of line 25,				
col	lumn (A), amount, list line 11g expenses on Sch O.)	222,356.	221,956.	400.	
2 Ad	Ivertising and promotion	31,383.	22,410.	8,973.	
B Of	fice expenses	150,236.	89,452.	56,284.	4,500
	ormation technology	70,315.	7,799.	62,516.	
	yalties				
	ccupancy	242,533.	219,814.	19,719.	3,000
	avel	67,221.	62,118.	5,103.	
	yments of travel or entertainment expenses	-			
	any federal, state, or local public officials				
	onferences, conventions, and meetings				
	erest	6,610.	6,610.		
	yments to affiliates	,	, ,		
	preciation, depletion, and amortization	115,649.	109,397.	6,252.	
	surance	85,276.	57,488.	27,788.	
. Oth abo	her expenses. Itemize expenses not covered ove. (List miscellaneous expenses on line 24e. If e 24e amount exceeds 10% of line 25, column (A).	, ,			
am	iount, list line 24e expenses on Schedule O.)				
	LIENT DIRECT ASSISTANC	823,902.	820,440.	3,462.	
	RAINING	75,201.	30,485.	44,716.	
	EPAIRS AND MAINTENANCE	52,240.	46,152.	6,088.	
d II	NDIRECT FUNDRAISING EX	17,137.			17,137
e All	other expenses	8,560.	1,696.	6,864.	
	tal functional expenses. Add lines 1 through 24e	7,072,001.	5,797,712.	951,471.	322,818
	int costs. Complete this line only if the organization				
	ported in column (B) joint costs from a combined				
	ucational campaign and fundraising solicitation.				
	eck here <b>b</b> if following SOP 98-2 (ASC 958-720)				

132010 12-09-21

81-0331313 Page 11

	Check if Schedule O contains a response or note to any line in this Part X			
		<b>(A)</b> Beginning of year		<b>(B)</b> End of year
1	Cash - non-interest-bearing	5,118.	1	20,763.
2	Savings and temporary cash investments	1,060,727.	2	957,968
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net		4	412,945
5	Loans and other receivables from any current or former officer, director,			
	trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons		5	
6	Loans and other receivables from other disqualified persons (as defined			
	under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
<u>ب</u> 7	Notes and loans receivable, net		7	
Assets	Inventories for sale or use		8	
₹   9	Prepaid expenses and deferred charges	17,730.	9	18,563
10a	Land, buildings, and equipment: cost or other			
	basis. Complete Part VI of Schedule D 10a 4,099,21	.7 .		
b	Less: accumulated depreciation 10b 2,266,16	9. 1,875,620.	10c	1,833,048
11	Investments - publicly traded securities	2,883,338.	11	2,538,232
12	Investments - other securities. See Part IV, line 11		12	
13	Investments - program-related. See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets. See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 33)		16	5,781,519
17	Accounts payable and accrued expenses		17	403,587
18	Grants payable		18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
v 22	Loans and other payables to any current or former officer, director,			
itie	trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities	controlled entity or family member of any of these persons		22	
<sub>23</sub> ا ت	Secured mortgages and notes payable to unrelated third parties	145,015.	23	95,952
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24). Complete Part X			
	of Schedule D		25	
26	Total liabilities. Add lines 17 through 25	527,565.	26	499,539
	Organizations that follow FASB ASC 958, check here 🕨 🗴			
Ses	and complete lines 27, 28, 32, and 33.			
u 27	Net assets without donor restrictions	5,293,762.	27	4,838,361
8 28	Net assets with donor restrictions	423,619.	28	443,619
2	Organizations that do not follow FASB ASC 958, check here 🕨 📃			
린	and complete lines 29 through 33.			
ັ ທີ່ 29	Capital stock or trust principal, or current funds		29	
<u>항</u> 30	Paid in or capital surplus, or land, building, or equipment fund		30	
¥ 31	Retained earnings, endowment, accumulated income, or other funds		31	
Net Assets or Fund Balances 88 25 87 06 87 06 88 25 88 25 88 88 88 88 88 88 88 88 88 88 88 88 88	Total net assets or fund balances		32	5,281,980
2 33	Total liabilities and net assets/fund balances	C 044 04C	33	5,781,519
,				Form <b>990</b> (202

Part XI       Reconciliation of Net Assets         Check if Schedule O contains a response or note to any line in this Part XI       1         1       Total expenses (must equal Part VIII, column (A), line 12)       2       7, 045, 430         2       Total expenses (must equal Part V, column (A), line 25)       3       -266, 571         2       Revenue less expenses Subtract line 2 from line 1       3       -266, 571         4       Net unrealized gains (losses) on investments       6       -408, 830         5       -408, 830       6       -7         6       7       -408, 830       6         7       0       0.ated services and use of facilities       7         7       10       5, 281, 980       9       0         9       Other changes in net assets or fund balances (explain on Schedule O)       9       0         10       Net assets or fund balances and of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))       10       5, 281, 980         Part XII       Financial Statements and Reporting       X       X       2a       X         11       Accounting method used to prepare the Form 990:       Cash       X Accrual       Other       1       2a       X         11       Accounting m		1 990 (2021) YOUTH HOMES	81-03	31313	Pag	<sub>ge</sub> 12			
1       Total revenue (must equal Part VIII, column (A), line 12)       1       7, 045, 430.         2       Total expenses (must equal Part IX, column (A), line 25)       2       7, 072, 001.         3       -26, 571.         4       Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))       4       5, 7117, 381.         5       Het unrealized gains (losses) on investments       5       -408, 830.         6       Onated services and use of facilities       7         7       Net unrealized gains (losses) on investments       6         9       Other changes in net assets or fund balances (explain on Schedule O)       9       0.         9       Other changes in net assets or fund balances (explain on Schedule O)       9       0.         10       S r, 281, 980.       Part XII       Financial Statements and Reporting         Check if Schedule O contains a response or note to any line in this Part XII       X       X         1       Accounting method used to prepare the Form 990:       Cash       X Accrual       Other         1       Accounting method used to prepare the Form 990:       Cash       X Accrual       Other         1       Accounting method used to prepare the Form 990:       Cash       X Accrual       Other         1	Pa	rt XI Reconciliation of Net Assets							
2       Total expenses (must equal Part IX, column (A), line 25)       2       7,072,001.         3       Revenue less expenses. Subtract line 2 from line 1       3       -26,571.         4       Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))       4       5,717,381.         5       Net unrealized gains (losses) on investments       6       -         7       Investment expenses       7       8         9       Other changes in net assets or fund balances (explain on Schedule O)       9       0.         10       S, 281, 980.       9       0.         Part XII Financial Statements and Reporting       X       X         1       Accounting method used to prepare the Form 990:       Cash       X Accrual       Other         1       Accounting method used to prepare the Form 990:       Cash       X Accrual       Other       2a       X         1       Accounting method used to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:       Yes       No         1       Separate basis, consolidated basis       Both consolidated and separate basis, consolidated basis, or both:       Za       X         1       ft "Yes," check a box below to indicate whether the financial statements for the year were audited on a s		Check if Schedule O contains a response or note to any line in this Part XI							
2       Total expenses (must equal Part IX, column (A), line 25)       2       7,072,001.         3       Revenue less expenses. Subtract line 2 from line 1       3       -26,571.         4       Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))       4       5,717,381.         5       Net unrealized gains (losses) on investments       6       -         7       Investment expenses       7       8         9       Other changes in net assets or fund balances (explain on Schedule O)       9       0.         10       S, 281, 980.       9       0.         Part XII Financial Statements and Reporting       X       X         1       Accounting method used to prepare the Form 990:       Cash       X Accrual       Other         1       Accounting method used to prepare the Form 990:       Cash       X Accrual       Other       2a       X         1       Accounting method used to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:       Yes       No         1       Separate basis, consolidated basis       Both consolidated and separate basis, consolidated basis, or both:       Za       X         1       ft "Yes," check a box below to indicate whether the financial statements for the year were audited on a s									
3       Revenue less expenses. Subtract line 2 from line 1       3       -26,571.         4       Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))       4       5,7117,381.         5       Net unrealized gains (losses) on investments       5       -408,830.         6       5       -408,830.         7       8       7         8       7       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)       5, 281, 980.         Part XII       Financial Statements and Reporting       X       X         1       Accounting method used to prepare the Form 990:       Cash       X Accrual       Other         1       Accounting method used to prepare the Form 990:       Cash       X Accrual       Other       2a       X         1       ft "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:       2b       X       2b       X         1       Yes, the organization's financial statements and selection of an independent accountant?       2b       X       X         1       Se	1	Total revenue (must equal Part VIII, column (A), line 12)	1						
4       Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))       4       5, 717, 381.         5       Net unrealized gains (losses) on investments       5       -408,830.         6       0       6         7       8       6         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))       5, 281, 980.         Part XII       Financial Statements and Reporting       X         Check if Schedule O contains a response or note to any line in this Part XII       X         1       Accounting method used to prepare the Form 990:       Cash       X       Accrual       Other         If fryes, '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:       Yes       Yes       No         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:       Za       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:       Zb       X         If "Y	2	Total expenses (must equal Part IX, column (A), line 25)	2						
5       Net unrealized gains (losses) on investments       5       -408,830.         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       5, 281, 980.         Part XII       Financial Statements and Reporting       X       X       Yes         Check if Schedule O contains a response or note to any line in this Part XII       X       X       Yes       No         1       Accounting method used to prepare the Form 990:       Cash       X       Accrual       Other       Yes       No         1       Accounting method used to prepare the Form 990:       Cash       X       Accrual       Other       2a       X         If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:       Separate basis       Consolidated basis       Both consolidated and separate basis, consolidated basis, or both:       2b       X       Z       Z       X       Z       Z       X       Z <th>3</th> <th>Revenue less expenses. Subtract line 2 from line 1</th> <th></th> <th></th> <th></th>	3	Revenue less expenses. Subtract line 2 from line 1							
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       5, 281, 980.         Part XII       Financial Statements and Reporting       X       X         Check if Schedule O contains a response or note to any line in this Part XII       X       Yes         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 O.       2a       X         If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis.       Donsolidated basis.       Both consolidated and separate basis       2b       X         b       Were the organization's financial statements audited by an independent accountant?       2b       X       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:       2b       X       2b       X       2b	4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	et assets or fund balances at beginning of year (must equal Part X, line 32, column (A))						
7 Investment expenses 7   8 Prior period adjustments 9   9 Other changes in net assets or fund balances (explain on Schedule O) 9   10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 10   Part XIII Financial Statements and Reporting   Check if Schedule O contains a response or note to any line in this Part XII   1 Accounting method used to prepare the Form 990:   1 Accounting method used to prepare the Form 990:   1 Accounting in the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.   2a X   If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:   Separate basis Consolidated basis   b Were the organization's financial statements and the financial statements for the year were audited on a separate basis, consolidated basis, or both:   1 "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:   1 "Yes," to line 2 ao 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?   If "Yes," to line 2 ao r2b, does the organization nequired to undergo an audit or audits as set forth in the Single Audit	5	Net unrealized gains (losses) on investments	5	-408	8,83	<u> 30.</u>			
8Prior period adjustments89Other changes in net assets or fund balances (explain on Schedule O)90.10Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))105, 281, 980.Part XIIFinancial Statements and ReportingX105, 281, 980.Part XIIFinancial Statements and ReportingXXCheck if Schedule O contains a response or note to any line in this Part XIIXX1Accounting method used to prepare the Form 990:CashX AccrualOtherIf the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.2aX2aXYes," 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:Both consolidated and separate basisbWere the organization's financial statements audited by an independent accountant?2bXIf "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:2bXIf "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:2bXIf "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:2bXIf "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	6	Donated services and use of facilities	6						
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       5,281,980.         Part XIII       Financial Statements and Reporting       X       10       5,281,980.         Part XIII       Financial Statements and Reporting       X       X       Yes         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 O.       2a       X         2       Were the organization's financial statements compiled or reviewed by an independent accountant?       2a       X         If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis       Dotholicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:       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       Doth consolidated and separate basis       Doth consolidated and separate basis         b       Were the organization's financial statements audited by an independent accountant?	7	Investment expenses	7						
10       Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))       10       5, 281, 980.         Part XII       Financial Statements and Reporting       X       X         Check if Schedule O contains a response or note to any line in this Part XII       X       X         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 O.       2a       X         1       Mere the organization's financial statements compiled or reviewed by an independent accountant?       2a       X         If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:       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:       2b       X         If "Yes," to heck a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:       2b       X         If "Yes," to heck a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:       2b       X         If "Yes," to heck a box below to indicate whether the financial statements for the year were audited	8		8						
column (B)       10       5,281,980.         Part XII       Financial Statements and Reporting       X         Check if Schedule O contains a response or note to any line in this Part XII       X         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 O.       2a       X         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:       2a       X         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:       2b       X         If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis       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:       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:       2b       X         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 <th>9</th> <th>Other changes in net assets or fund balances (explain on Schedule O)</th> <th>9</th> <th></th> <th></th> <th>0.</th>	9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.			
Part XII       Financial Statements and Reporting         Check if Schedule O contains a response or note to any line in this Part XII       X         1       Accounting method used to prepare the Form 990:       Cash       X       Accrual       Other       Yes       No         1       Accounting method used to prepare the Form 990:       Cash       X       Accrual       Other       Z       Yes       No         2a       Were the organization's financial statements compiled or reviewed by an independent accountant?       2a       X         If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:       Separate basis       Consolidated basis       Both consolidated and separate basis       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       Both consolidated and separate basis       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:       Z       Z       Z         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:       Z       Z       Z       Z         If "Yes," to line 2a or 2b, does the organization have a committee t	10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,							
Check if Schedule O contains a response or note to any line in this Part XII   Yes   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 O.   2a   X      If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:   Separate basis   Consolidated basis, or both:   If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis   b   Were the organization's financial statements audited by an independent accountant?   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:   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:   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:   X   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?   If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.   3a As a result of a			10	5,281	.,9	80.			
1       Accounting method used to prepare the Form 990:       Cash       X       Accrual       Other	Pa	rt XII Financial Statements and Reporting							
1       Accounting method used to prepare the Form 990:       Cash       X       Accrual       Other       Image: Cash in the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.       2a       X         2a       Were the organization's financial statements compiled or reviewed by an independent accountant?       2a       X         If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:       2b       X         Separate basis       Consolidated basis       Both consolidated and separate basis       2b       X         If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis       2b       X         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:       2b       X         If "Yes," check a box below to indicate basis       Both consolidated and separate basis       2b       X         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       X         If the organization changed either its oversig		Check if Schedule O contains a response or note to any line in this Part XII				X			
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.   2a   Were the organization's financial statements compiled or reviewed by an independent accountant?   If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:   Separate basis   Consolidated basis   Both consolidated and separate basis   Were the organization's financial statements audited by an independent accountant?   If "Yes," check a box below to indicate whether the financial statements accountant?   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:   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:   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?   If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.   3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit					Yes	No			
2a       Were the organization's financial statements compiled or reviewed by an independent accountant?       2a       X         If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:       2b       X         Separate basis       Consolidated basis       Both consolidated and separate basis       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:       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:       2b       X         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       X         If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.       3a       As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit       4       4	1	Accounting method used to prepare the Form 990: Cash X Accrual Other		-					
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:       Image: Consolidated basis, or both:         Image: Separate basis       Consolidated basis       Both consolidated and separate basis         If "Yes," check a box below to indicate whether the financial statements audited by an independent accountant?       Image: Consolidated basis, or both:         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:       Image: Consolidated basis, or both:         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:       Image: Consolidated basis, or both:         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?       Image: Consolidate co		If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.						
separate basis, consolidated basis, or both:   Separate basis   Separate basis   Consolidated basis   Both consolidated and separate basis   b   Were the organization's financial statements audited by an independent accountant?   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:   X   Separate basis   Consolidated basis   Both consolidated and separate basis, consolidated basis, or both:   X   Separate basis   Consolidated basis   Both consolidated and separate basis   c   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?   If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.   3a   As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit	2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X			
<ul> <li>Separate basis</li> <li>Consolidated basis</li> <li>Both consolidated and separate basis</li> <li>Were the organization's financial statements audited by an independent accountant?</li> <li>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:</li> <li>X Separate basis</li> <li>Consolidated basis</li> <li>Both consolidated and separate basis</li> <li>Consolidated basis</li> <li>Both consolidated and separate basis</li> <li>Consolidated basis</li> <li>Consolidated basis</li> <li>Both consolidated and separate basis</li> <li>Consolidated basis</li> <li>Consolidated basis</li> <li>Both consolidated and separate basis</li> <li>Consolidated basis</li> <li>Consolidated basis</li> <li>Both consolidated and separate basis</li> <li>Consolidated basis</li> <li>Consolidated basis</li> <li>Both consolidated and separate basis</li> <li>Consolidated basis</li> <li>Consolidated basis</li> <li>Both consolidated and separate basis</li> <li>Consolidated basis</li> <li>Consolidated basis</li> <li>Both consolidated and separate basis</li> <li>Consolidated basis</li> <li>Consolidated basis</li> <li>Both consolidated and separate basis</li> <li>Consolidated basis</li> <li>Consolidated basis</li> <li>Both consolidated and separate basis</li> <li>Consolidated basis</li> <li>Consolidated basis</li> <li>Consolidated basis</li> <li>Both consolidated and separate basis</li> <li>Consolidated basis</li>     &lt;</ul>		If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a						
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:       2b       X         X       Separate basis       Consolidated basis       Both consolidated and separate basis       Image: Consolidated basis       Consolidated basis       Both consolidated and separate basis       Image: Consolidated basis       C									
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:       Image: Consolidated basis       Image:		Separate basis Consolidated basis Both consolidated and separate basis							
consolidated basis, or both:       Image: Consolidated basis       Both consolidated and separate basis       Image: Consolidated basis	b	Were the organization's financial statements audited by an independent accountant?		<b>2</b> b	X				
X       Separate basis       Consolidated basis       Both consolidated and separate basis       Image: Consolidated basis		If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,						
<ul> <li>c 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?</li> <li>If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.</li> <li>3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit</li> </ul>									
review, or compilation of its financial statements and selection of an independent accountant?2cXIf the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.Image: Compilation of the selection process during the tax year, explain on Schedule O.Image: Compilation of the selection process during the tax year, explain on Schedule O.Image: Compilation of tax year, explain on Schedule O.3aAs a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single AuditImage: Compilation of tax year, explain on Schedule O.		X Separate basis Consolidated basis Both consolidated and separate basis							
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit	С								
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit		review, or compilation of its financial statements and selection of an independent accountant?		2c	Х				
Act and OMB Circular A-133?	3a		gle Audit						
		Act and OMB Circular A-133?		3a		X			
<b>b</b> If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit	b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit						
or audits, explain why on Schedule O and describe any steps taken to undergo such audits		or audits, explain why on Schedule O and describe any steps taken to undergo such audits							

Form **990** (2021)

Department of the Treasury

(Form 990)

Total

# 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.

1	OMB No. 1545-0047
	2021
	Open to Public Inspection

Internal Re	evenue Servi	ce 🕨	Go to www.irs.gov	/Form990 for instruction	ons and th	ne latest ir	nformation.		Inspection		
Name	of the org	anization						Employer	identification number		
		YOUT	H HOMES						1-0331313		
Part	I Re	ason for Public (	Charity Status.	(All organizations must c	omplete th	his part.) S	ee instructior	IS.			
The org	ganization	is not a private found	ation because it is: (F	For lines 1 through 12, cl	heck only	one box.)					
1	🗌 A chu	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).									
2	A sch	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)									
3	A hos	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).									
4	A me	dical research organiz	ation operated in cor	njunction with a hospital	described	l in sectio	n 170(b)(1)(A	)(iii). Enter	the hospital's name,		
	city, a	ind state:									
5	An or	ganization operated fo	or the benefit of a col	llege or university owned	l or operat	ed by a go	vernmental u	nit describe	ed in		
	secti	section 170(b)(1)(A)(iv). (Complete Part II.)									
6	A fed	eral, state, or local go	vernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).				
7 X	ζ An or	ganization that norma	Ily receives a substa	ntial part of its support fr	om a gove	ernmental	unit or from t	ne general p	oublic described in		
	section	on 170(b)(1)(A)(vi). (C	omplete Part II.)								
8	A con	nmunity trust describe	ed in section 170(b)(	(1)(A)(vi). (Complete Par	t II.)						
9	🔄 An ag	ricultural research org	ganization described	in section 170(b)(1)(A)(	ix) operate	ed in conju	inction with a	land-grant	college		
	or uni	versity or a non-land-g	grant college of agric	ulture (see instructions).	Enter the i	name, city	, and state of	the college	or		
	unive	rsity:									
10	An or	ganization that norma	Illy receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	ns, membersh	ip fees, and	d gross receipts from		
	activit	ies related to its exen	npt functions, subjec	t to certain exceptions; a	and (2) no	more than	33 1/3% of it	s support fi	rom gross investment		
	incom	ne and unrelated busir	ness taxable income	(less section 511 tax) fro	m busines	sses acqui	red by the or	anization a	Ifter June 30, 1975.		
_	_	ection 509(a)(2). (Co									
11 _	An or	ganization organized a	and operated exclusi	vely to test for public sat	fety. See	section 50	)9(a)(4).				
12 🗌			-	vely for the benefit of, to	-			•			
			-	d in section 509(a)(1) o					Check the box on		
r		-	• •	f supporting organizatior		-		-			
a				upervised, or controlled	• • • •	-					
				gularly appoint or elect a	majority c	of the direc	tors or truste	es of the su	ipporting		
r	<sup>_</sup>	anization. <b>You must c</b>	-								
b			-	or controlled in connect			-		•		
		-		anization vested in the sa	ame perso	ns that co	ntrol or mana	ge the supp	ported		
r	<sup>_</sup>	anization(s). <b>You mus</b>									
c		-		g organization operated				ly integrate	d with,		
				). You must complete I							
d		-		oorting organization oper				-			
		•		ation generally must sat	-		-	l an attentiv	/eness		
ſ				nplete Part IV, Sections							
e				written determination from			Type I, Type	II, Type III			
				nally integrated supporting		ation.					
		umber of supported o	•	-1							
<u> </u>		e following information of supported	ii) EIN	d organization(s).	(iv) Is the orga	anization listed	(v) Amount o	fmonetary	(vi) Amount of other		
	.,	anization	(	(described on lines 1-10	in your governi Yes	ing document?	support (see i	2	support (see instructions)		
	-			above (see instructions))	163						

#### Schedule A (Form 990) 2021

YOUTH HOMES

81-0331313 Page 2

 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) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	1769259.	1706407.	1762036.	2962989.	2743547.	10944238.
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	1769259.	1706407.	1762036.	2962989.	2743547.	10944238.
	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)						747,690.
6	Public support. Subtract line 5 from line 4.						10196548.
	tion B. Total Support						
	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	<b>(e)</b> 2021	(f) Total
	Amounts from line 4	1769259.	1706407.	1762036.	2962989.	2743547.	10944238.
	Gross income from interest,						
Ŭ	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	52,473.	44,922.	49,936.	72,025.	70,322.	289,678.
9	Net income from unrelated business				,	,	
Ŭ	activities, whether or not the						
	business is regularly carried on	19,434.	19,745.			10,915.	50,094.
10	Other income. Do not include gain					20,7200	
10	or loss from the sale of capital						
	assets (Explain in Part VI.)	17,948.	14,515.	33,592.	15,421.		81,476.
11	<b>Total support.</b> Add lines 7 through 10	1775100	11/0100	5575521	13/1210		11365486.
	Gross receipts from related activities,	etc. (see instructio	ne)				,929,037.
	First 5 years. If the Form 990 is for th	(	,	ourth or fifth tax y	year as a section 50		///////////////////////////////////////
10	organization, check this box and <b>stor</b>	-		-			
Sec	tion C. Computation of Publi	c Support Per	centage				
	Public support percentage for 2021 (I			olumn (f))		14	89.72 %
	Public support percentage from 2020					15	89.34 %
	<b>16a 33 1/3% support test - 2021.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and						
	stop here. The organization qualifies as a publicly supported organization						
b	b 33 1/3% support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box						
	and stop here. The organization qual	ifies as a publicly s	upported organiza	tion			
17a	10% -facts-and-circumstances test	- 2021. If the org	anization did not c				
	and if the organization meets the fact						
	meets the facts-and-circumstances te			-	•		
b	10% -facts-and-circumstances test	-		• • • •			
	more, and if the organization meets th						
	organization meets the facts-and-circu						
18	Private foundation. If the organizatio		•				s <b>&gt;</b>
							(Ferm 000) 0001

Schedule A (Form 990) 2021

132022 01-04-22

	Schedule A	Form 990	) 202
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YOUTH HOMES

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.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or bus-						
	iness 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						
	Amounts included on lines 1, 2, and						
b	3 received from disqualified persons 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						
	Public support. (Subtract line 7c from line 6.)						
	tion B. Total Support						_
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Amounts from line 6	, , , , , , , , , , , , , , , , ,					
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for th	e organization's f	irst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) organiza	tion,
	check this box and stop here	<u></u>					
Sec	ction C. Computation of Public	c Support Pe	rcentage				
15	Public support percentage for 2021 (li	ne 8, column (f), d	divided by line 13,	column (f))		15	%
	Public support percentage from 2020					16	%
Sec	ction D. Computation of Inves	tment Incom	e Percentage				
17	Investment income percentage for 20	<b>21</b> (line 10c, colu	ımn (f), divided by l	ine 13, column (f))		17	%
18	Investment income percentage from 2	2020 Schedule A,	, Part III, line 17			18	%
19a	33 1/3% support tests - 2021. If the	organization did	not check the box	on line 14, and line	e 15 is more than	33 1/3%, and line	17 is not
	more than 33 1/3%, check this box an	d stop here. The	e organization qual	ifies as a publicly s	supported organiz	ation	
b	33 1/3% support tests - 2020. If the	organization did	not check a box or	n line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%,	and
	line 18 is not more than 33 1/3%, chec	ck this box and <b>s</b>	top here. The orga	anization qualifies	as a publicly supp	orted organizatior	۱ <b>&gt;</b>
20	Private foundation. If the organization	n did not check a	u box on line 14, 19	a, or 19b, check tl	his box and see in	structions	<b>&gt;</b>
13202	23 01-04-22					Schedule	A (Form 990) 2021

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Yes No

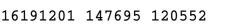
### Part IV Supporting Organizations

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

### Section A. All Supporting Organizations

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

132024 01-04-21



Schedule A						HOME
Part IV	Suppor	ting	Organiza	ations	(co	ntinued

1

2

#### Yes No 11 Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls, either alone or together with persons described 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 c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide <u>detail in P</u>art VI 11c Section B. Type I Supporting Organizations Yes No Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or 1 more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No." describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the

supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,

supervised	l. or controlled th	ne supportina ol	rganization.
Section C. Ty	ype II Suppo	rting Organ	izations

Yes No 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 1 the supported organization(s)

Section 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		

#### Section 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	ie vear	(see instructions).
-		ic ycar	(

- The organization satisfied the Activities Test. Complete line 2 below. а
- h The organization is the parent of each of its supported organizations. Complete line 3 below.

с [		The organization supported a governmental entity.	Describe in <b>Part VI</b> how you supported a governmental entity (see instruction <u>s).</u>	
-----	--	---	--	--

- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes." then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes." explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- Parent of Supported Organizations. Answer lines 3a and 3b below. 3
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.
- b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.

No Yes 2a 2b 3a 3b

Schedule A (Form 990) 2021

132025 01-04-22

Part V Type III Non-Functionally Integrated 509(a)(3) Supp	porting Organia	zations	
1 Check here if the organization satisfied the Integral Part Test as a q	ualifying trust on N	ov. 20, 1970 ( <i>explain in</i>	Part VI). See instructions.
All other Type III non-functionally integrated supporting organization	is must complete S	Sections A through E.	1
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
<b>b</b> Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
<b>d</b> Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors			
(explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amou	int,		
see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 0.035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1		
2 Enter 0.85 of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-fun	ctionally integrated	Type III supporting orga	inization (see

instructions).

Schedule A (Form 990) 2021

YOUTH HOMES

Schedule A (Form 990) 2021

81-0331313 Page 6

132026 01-04-22

YOUTH HOMES

Sche	dule A (Form 990) 2021 YOUTH HOMES			8	1-0331313 Page 7
Par	t V Type III Non-Functionally Integrated 509(	a)(3) Supporting Orga	nizations <sub>(continu</sub>	ied)	
Secti	on 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.			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.			8	
9	Distributable amount for 2021 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2021	IS	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2021 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2021				
а	From 2016				
b	From 2017				
с	From 2018				
d	From 2019				
е	From 2020				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2021 distributable amount				
i	Carryover from 2016 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2021 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2021 distributable amount				
с	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2021, 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 2021. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2022. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
а	Excess from 2017				
	Excess from 2018				
	Excess from 2019				
	Excess from 2020				
	Excess from 2021				

Schedule A (Form 990) 2021

Schedule A	(Form 990) 2021		HOMES			81-0331313 Page 8
Part VI	Supplemental Infor Part IV, Section A, lines 1 line 1; Part IV, Section D,	, 2, 3b, 3c, 4 lines 2 and 3	b, 4c, 5a, 6, 9a, 9b, 9c, <sup>-</sup> 3; Part IV, Section E, line	required by Part II, line 10; F 11a, 11b, and 11c; Part IV, S s 1c, 2a, 2b, 3a, and 3b; Pa	Section B, lines 1 a rt V, line 1; Part V,	7b; Part III, line 12; and 2; Part IV, Section C, Section B, line 1e; Part V,
	Section D, lines 5, 6, and (See instructions.)	8; and Part V	V, Section E, lines 2, 5, a	nd 6. Also complete this pa	rt for any additiona	al information.
132028 01-04-2	22					Schedule A (Form 990) 2021
				21		, ,

Department of the Treasury

Internal Revenue Service Name of the organization

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.



Employer identification number

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_	YOUTH HOMES			81-0331313
Par			Similar Funds or A	ccounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin			
		(a) Donor advise	ed 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 v	writing that the assets he	eld in donor advised fun	ds
	are the organization's property, subject to the organization's	exclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that gr	ant funds can be used o	only
	for charitable purposes and not for the benefit of the donor of	r donor advisor, or for a	ny other purpose confer	ring
	impermissible private benefit?		-	Yes No
Par				
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).		
	Preservation of land for public use (for example, recrea		7	orically important land area
	Protection of natural habitat	, <u> </u>	-	ified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contrib	oution in the form of a co	preservation easement on the last
_	day of the tax year.			Held at the End of the Tax Year
а				2a
b				2b
c	Number of conservation easements on a certified historic stru			2c
	Number of conservation easements included in (c) acquired a			
u		,		2d
2	listed in the National Register			
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or	terminated by the organ	ization during the tax
	year ▶			
4	Number of states where property subject to conservation eas			
5	Does the organization have a written policy regarding the per			
	violations, and enforcement of the conservation easements it			
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, a	nd enforcing conservation	on easements during the year
	▶			
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and er	nforcing conservation ea	sements during the year
	▶\$			
8	Does each conservation easement reported on line 2(d) above	e satisfy the requiremen	ts of section 170(h)(4)(B	)(i)
	and section 170(h)(4)(B)(ii)?			
9	In Part XIII, describe how the organization reports conservation	on easements in its reve	nue and expense staten	nent and
	balance sheet, and include, if applicable, the text of the footn	note to the organization's	s financial statements th	at describes the
_	organization's accounting for conservation easements.	· · · · · · · · - ·	<b>A</b> A	
Par	t III Organizations Maintaining Collections of		easures, or Other S	Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.		
1a	If the organization elected, as permitted under FASB ASC 95	8, not to report in its rev	enue statement and bal	ance sheet works
	of art, historical treasures, or other similar assets held for pub	olic exhibition, education	, or research in furthera	nce of public
	service, provide in Part XIII the text of the footnote to its finan	ncial statements that des	scribes these items.	
b	If the organization elected, as permitted under FASB ASC 95	8, to report in its revenu	e statement and balance	e sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, c	or research 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	asures, or other similar a	assets for financial gain,	provide
	the following amounts required to be reported under FASB A	SC 958 relating to these	e items:	
а	Revenue included on Form 990, Part VIII, line 1	-		. • \$
	Assets included in Form 990, Part X			
	For Paperwork Reduction Act Notice, see the Instructions			Schedule D (Form 990) 2021
	10-28-21			
		27		

47		
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Sche	dule D (Form 990) 2021 YOUTH H						033131		age <b>2</b>
Par	t III Organizations Maintaining C	ollections of Art	, Historical Tre	asures, or (	Other S	Similar Ass	ets <sub>(conti</sub>	nued)	
3	Using the organization's acquisition, accession	on, and other records	, check any of the f	ollowing that m	nake sign	ificant use of i	ts		
	collection items (check all that apply):								
а	Public exhibition	d	Loan or exc	hange program	1				
b									
с	Preservation for future generations								
4	Provide a description of the organization's co	ellections and explain	how they further th	e organization'	s exemp	t purpose in P	art XIII.		
5	During the year, did the organization solicit o	r receive donations of	f art, historical treas	sures, or other s	similar as	sets			
	to be sold to raise funds rather than to be ma	aintained as part of th	e organization's co	llection?			Yes		No
Par	t IV Escrow and Custodial Arrang	gements. Comple	te if the organizatio	n answered "Ye	es" on Fo	orm 990, Part	IV, line 9, o	r	
	reported an amount on Form 990, Par		-						
1a	Is the organization an agent, trustee, custodia	an or other intermedia	ary for contributions	s or other asset	s not inc	luded			
	on Form 990, Part X?		-				Yes		No
b	If "Yes," explain the arrangement in Part XIII a	and complete the follo	owing table:						
			-				Amour	nt	
с	Beginning balance					1c			
	Additions during the year					1d			
	Distributions during the year					1e			
f	Ending balance					1f			
2a	Did the organization include an amount on Fo					?	Yes		No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the exp	planation has been	provided on Pa	rt XIII				
Par	t V Endowment Funds. Complete i	f the organization and	wered "Yes" on Fo	rm 990, Part IV	', line 10.				
		(a) Current year	(b) Prior year	(c) Two years	back (d	) Three years ba	ack <b>(e)</b> Fou	r years	back
1a	Beginning of year balance	824,179.	613,694.	633,	009.	572,51	2.	,	,178.
b	b Contributions 20,000. 36,500. 20,100. 30,175. 20,00							,000.	
с	Net investment earnings, gains, and losses -100, 413. 173, 985. 10, 585. 30, 322.						2.	38,	,334.
d	Grants or scholarships								
е	Other expenditures for facilities								
	and programs								
f	Administrative expenses	5,837.		50,	000.				
g	End of year balance	737,929.	824,179.	613,	694.	633,00	9.	572,	,512.
2	Provide the estimated percentage of the curr	ent year end balance	(line 1g, column (a)	) held as:					
а	Board designated or quasi-endowment	39.8830	_%						
b	Permanent endowment ► 60.1170	%							
с	Term endowment	%							
	The percentages on lines 2a, 2b, and 2c show	uld equal 100%.							
3a	Are there endowment funds not in the posses	ssion of the organizat	ion that are held ar	nd administered	for the o	organization			
	by:							Yes	No
	(i) Unrelated organizations						3a(i)		X
	(ii) Related organizations						3a(ii)		X
b	If "Yes" on line 3a(ii), are the related organization	tions listed as require	ed on Schedule R?				3b		
4	Describe in Part XIII the intended uses of the		vment funds.						
Par	t VI Land, Buildings, and Equipm								
	Complete if the organization answered			ee Form 990, F	Part X, lin	e 10.			
	Description of property	(a) Cost or ot	( )	or other	• •	umulated	( <b>d)</b> Boo	ok valu	е
		basis (investm	,	(other)	depre	eciation	~ -		12
	Land			4,243.	1 0 -	F 200	37	4,2	$\frac{43.}{62}$
	Buildings		3,38	2,383.	т,95	5,320.	1,42	1,0	<u>vj.</u>
	Leasehold improvements		2.4		1	0 0 4 0		1 🗖	4.0
	Equipment		34	2,591.	31	0,849.	3	1,7	44.
	Other						1 0 0	2 0	10
Tota	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part X	(, column (B), line 1	0c.)			1,83		
						Sched	lule D (Fori	n 990)	2021

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<b>Part VII</b> Investments - Other Securities. Complete if the organization answered "Yes"	on Form 990 Part IV line	11b See Form 990 Part X line 12	
(a) Description of security or Category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ► Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Complete if the organization answered "Yes"	on Form 990 Part IV line	11d See Form 990 Part X line 15	
	Description		(b) Book value
(1)	Description		
(1)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	e 15.)		
Part X Other Liabilities.		· •	
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25.	
1.(a) Description of liability			(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	e 25.)		

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

Schedule D (Form 990) 2021

132053 10-28-21

X

Pa	rt XI Reconciliation of Revenue per Audited Financial Stateme	nts With	Revenue per Re	turn.	
	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	6,704,890.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	-408,830.		
b	Donated services and use of facilities	2b			
с	Recoveries of prior year grants				
d	Other (Describe in Part XIII.)	2d	88,626.		
е	Add lines 2a through 2d			2e	-320,204. 7,025,094.
3	Subtract line 2e from line 1			3	7,025,094.
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	20,336.		
b	Other (Describe in Part XIII.)	4b			
С	Add lines <b>4a</b> and <b>4b</b>			4c	20,336.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	7,045,430.
Ра	rt XII Reconciliation of Expenses per Audited Financial Stateme		i Expenses per F	letur	n.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total expenses and losses per audited financial statements			1	7,140,291.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	88,626.		
е	Add lines <b>2a</b> through <b>2d</b>			2e	88,626.
3	Subtract line 2e from line 1			3	7,051,665.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	20,336.		
b	Other (Describe in Part XIII.)	4b			
С	Add lines <b>4a</b> and <b>4b</b>			4c	20,336.
с _5	Add lines <b>4a</b> and <b>4b</b> Total expenses. Add lines <b>3</b> and <b>4c.</b> ( <i>This must equal Form 990, Part I, line 18.</i> ) <b>rt XIII Supplemental Information.</b>			4c 5	20,336. 7,072,001.

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:

Schedule D (Form 990) 2021

THE AGENCY HAS AN ESTABLISHED PERMANENT, IRREVOCABLE ENDOWMENT FUND IN THE

AMOUNT OF \$737,929. THE PRINCIPAL OF RESTRICTED FUNDS, \$443,619, IS

INTENDED TO REMAIN WHOLE IN PERPETUITY, WITH INCOME EARNED BEING AVAILABLE

FOR THE CHARITABLE PURPOSES OF THE AGENCY.

YOUTH HOMES

PART X, LINE 2:

YOUTH HOMES IS A NONPROFIT ORGANIZATION AND IS EXEMPT FROM FEDERAL AND

STATE INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE.

#### PART XI, LINE 2D - OTHER ADJUSTMENTS:

#### DIRECT FUNDRAISING EXPENSES

132054 10-28-21

Schedule D (Form 990) 2021

81-0331313 Page 4

Schedule D (Form 990) 2021 YOUTH HOMES	81-0331313 Page 5
Part XIII   Supplemental Information (continued)	
DIRECT GAMING EXPENSES	1,085.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	88,626.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
DIRECT FUNDRAISING EXPENSES	87,541.
GAMING EXPENSES	1 095
	<b>89 676</b>
TOTAL TO SCHEDULE D, PART XII, LINE 2D	00,020.
122055 10.29.21	Schedule D (Form 990) 2021

16191201 147695 120552

SCHEDULE G	Suppleme	rities	OMB No. 1545-0047						
(Form 990)	(Form 990) Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.								
Department of the Treasury Attach to Form 990 or Form 990-EZ.						or if the <b>2021</b> Open to Public			
Internal Revenue Service		to www.irs.gov/Form990 for instru	uction	s and	the latest information	on.		Inspection	
Name of the organization	n YOUTH H	OMES					Employer ide 81-0331	entification number	
	<b>sing Activities.</b> complete this part	Complete if the organization answe	red "Y	es" or	n Form 990, Part IV, I	ine 1	7. Form 990-E	Z filers are not	
<ol> <li>Indicate whether th         <ul> <li>a Mail solicitat</li> <li>b Internet and</li> <li>c Phone solici</li> <li>d In-person so</li> </ul> </li> <li>2 a Did the organization key employees list</li> </ol>	e organization rais tions email solicitations itations blicitations on have a written o ted in Form 990, P 0 highest paid indiv	ed funds through any of the followin e Solicitat f Solicitat g Special or oral agreement with any individual art VII) or entity in connection with pr viduals or entities (fundraisers) pursu	tion of tion of fundra (includ	non-g gover iising ling of onal fi	overnment grants nment grants events ficers, directors, trus undraising services?	-	Ye		
(i) Name and addres or entity (fund		<b>(ii)</b> Activity	(iii) fundr have ci or con contribu	aiser ustody itrol of	(iv) Gross receipts from activity	tò (	Amount paid or retained by) fundraiser ted in col. <b>(i)</b>	<b>(vi)</b> Amount paid to (or retained by) organization	
			Yes	No					
Total 3 List all states in whi	ich the organizatio	n is registered or licensed to solicit c	ontrib	▶ utions	or has been notified	it is	exempt from re	egistration	
or licensing.									
LHA For Paperwork R	eduction Act Noti	ice, see the Instructions for Form 9	90 or	990-E	Z.		Schedul	e G (Form 990) 2021	

132081 10-21-21

	rt II Fundraising Events. Complete if the	e organization answered	I "Yes" on Form 990, Par	t IV, line 18, or reported	more than \$15,000
	of fundraising event contributions and gro	ss income on Form 990	EZ, lines 1 and 6b. List e	vents with gross receipt	
		<b>(a)</b> Event #1	<b>(b)</b> Event #2	(c) Other events	(d) Total events
		SUMMER PARTY	MARATHON	1	(add col. (a) through
Ð		(event type)	(event type)	(total number)	col. <b>(c)</b> )
Hevenue	1 Gross receipts	196,289.	77,187.	70,313.	343,789
-	2 Less: Contributions	186,389.	77,187.	62,513.	326,089
	<b>3</b> Gross income (line 1 minus line 2)	9,900.		7,800.	17,700
	4 Cash prizes				
	5 Noncash prizes				
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	6 Rent/facility costs				
כיי באממי יסכי	7 Food and beverages				
i	8 Entertainment	47 500	10 412	20.000	07 541
	9 Other direct expenses	47,528.		29,600.	87,541 87,541
	<ul><li>10 Direct expense summary. Add lines 4 through</li><li>11 Net income summary. Subtract line 10 from lin</li></ul>	<i>、,</i>		•	-69,841
а	rt III Gaming. Complete if the organization a				057011
	\$15,000 on Form 990-EZ, line 6a.				
2		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (d
			singe, progreeelve singe		
	1 Gross revenue				
	2 Cash prizes				
	3 Noncash prizes				
	· · · · · · · · · · · · · · · · · · ·				
	4 Rent/facility costs				
	5 Other direct expenses				
	5 Other direct expenses	Yes %	Yes %	Yes %	
	6 Volunteer labor		□ No	□ No	
	7 Direct expense summary. Add lines 2 through				
	7 Direct expense summary. Add lines 2 through				
_	8 Net gaming income summary. Subtract line 7	from line 1, column (d)		<b>&gt;</b>	
	Enter the state(s) in which the organization condu	ete gaming activitios:			
	Is the organization licensed to conduct gaming ac				Yes N
	If "No," explain:				
	Were any of the organization's gaming licenses re	woked suspended or te	rminated during the tax y	vear?	Yes
a	If "Yes," explain:				

Sch	edule G (Form 990) 2021	YOUTH	HOMES	81-03	331:	313	Page <b>3</b>
11	Does the organization conduct ga	ming activitie	s with nonmembers?		· 🗌	Yes	No No
12	Is the organization a grantor, bene	eficiary or true	stee of a trust, or a member of a partnership or other entity formed				
	to administer charitable gaming?				<u> </u>	Yes	No
13	Indicate the percentage of gaming	g activity con	ducted in:				
а	The organization's facility				13a		%
b	An outside facility			[	13b		%
14	Enter the name and address of the	e person who	prepares the organization's gaming/special events books and reco	rds:			
	Name ►						
	Address 🕨						
15a	Does the organization have a cont	tract with a th	nird party from whom the organization receives gaming revenue? $\dots$			Yes	No No
b	If "Yes," enter the amount of gami	ing revenue r	eceived by the organization 🕨 \$ and the an	nount			
	of gaming revenue retained by the	e third party	►\$				
с	If "Yes," enter name and address	of the third p	arty:				
	Name 🕨						
16	Gaming manager information:						
	Name						
	Gaming manager compensation	\$					
	Description of some income visited						
	Description of services provided						
	Director/officer	Employ	ree Independent contractor				
17	Mandatory distributions:						
	•	state law to	make charitable distributions from the gaming proceeds to				
	and the state second and the second				<u> </u>	Yes	No No
b			er state law to be distributed to other exempt organizations or spent				
	organization's own exempt activiti	•					
Pa			ovide the explanations required by Part I, line 2b, columns (iii) and (	/); and Part	III, line	es 9, 9	9b, 10b,
	15b, 15c, 16, and 17b, as	applicable. A	Also provide any additional information. See instructions.				
13208	33 10-21-21			Schedu	le G (F	orm	990) 2021

T art IV	oupplemental information	(continued)		
				Schedule G (Form 990)

132084 11-18-21

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#### SCHEDULE M (Form 990)

# **Noncash Contributions**

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

2021 **Open to Public** Inspection

Internal Revenue Service		Go to www.irs.gov/Form990 for instructions and the latest information.
Name of the organization	1	

YOUTH HOMES

nployer identification number
81-0331313

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En

Par	t I Types of Property							
		<b>(a)</b> Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu		•	s
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods	X		42,730.	FAIR MARKET	VA	LUE	
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded							
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ► ()							
26	Other ► ()							
27	Other ► ()							
28	Other ► ( )							
29	Number of Forms 8283 received by the organized	zation during	g the tax year for c	ontributions				
	for which the organization completed Form 82	83, Part V, D	onee Acknowledg	ement 29				
							Yes	No
30a	During the year, did the organization receive by	•						
	must hold for at least three years from the date		l contribution, and	which isn't required to be us	sed for			
	exempt purposes for the entire holding period	?				30a		X
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance p				ions?	31		X
32a	Does the organization hire or use third parties contributions?		0	, i ,		32a		x
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in c	olumn (c) fo	r a type of property	/ for which column (a) is cheo	cked,			
	describe in Part II.							
LHA	For Paperwork Reduction Act Notice, see	the Instruct	tions for Form 990	).	Schedule N	l (Forn	n 990)	2021

Schedule M (Form 990) 2021 $$ Y	OUTH	HOMES
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**Part II** Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

132142 11-17-21	Schedule M (Form 990) 2021

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SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

# 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.



Employer identification number 81-0331313

YOUTH HOMES

#### FORM 990, PART VI, SECTION A, LINE 8B:

NO COMMITTEE MAKES DECISIONS ON BEHALF OF THE BOARD. ALL COMMITTEES MEET

FOR DISCUSSION PURPOSES AND THEN PRESENT ANYTHING THAT NEEDS APPROVAL TO

THE BOARD AS A WHOLE AND IT BECOMES DOCUMENTED IN THE BOARD MINUTES.

FORM 990, PART VI, SECTION B, LINE 11B:

THE ORGANIZATION IS PROVIDED A COPY OF ITS 990 AND IT IS APPROVED BY THE

BOARD BEFORE IT IS FILED.

FORM 990, PART VI, SECTION B, LINE 12C:

BOARD MEMBERS ARE REQUIRED TO SUBMIT A CONFLICT OF INTEREST REPORT. THIS

POLICY IS REGULARLY REVIEWED.

FORM 990, PART VI, SECTION B, LINE 15A:

EXECUTIVE DIRECTOR COMPENSATION IS SET AT MARKET VALUE AND REVIEWED AND

APPROVED BY THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION C, LINE 19:

YOUTH HOMES MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND

FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART VII, SECTION A, LINE 1A, COLUMN B:

DANN SWALLOW AND ELMER ROSENTHAL SPEND APPROXIMATELY 8 HOURS A WEEK

WORKING WITH PARTNERSHIP FOR CHILDREN.

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

Schedule O (Form 990) 2021

THE PROCESS HAS NOT CHANGE	D FROM THE	E PRIOR YEAR.	
132212 11-11-21		39	Schedule O (Form 990) 20

Page **2** 

YOUTH HOMES

Schedule O (Form 990) 2021

Name of the organization

132161 11-17-21 LHA

(Form 990)	
Department of the Treasury Internal Revenue Service	

SCHEDULE R

Name of the organization

### **Related Organizations and Unrelated Partnerships**

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

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

Open to Public Inspection Employer identification number

2021

YOUTH HOMES

81-0331313

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

<b>(a)</b> Name, address, and EIN (if applicable) of disregarded entity	<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile (state or foreign country)	<b>(d)</b> Total income	<b>(e)</b> End-of-year assets	<b>(f)</b> Direct controlling entity
	1				
	1				

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(	<b>g)</b> 512(b)(13)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Exempt Code section	Public charity status (if section	narity Direct controlling ection entity	cont	512(b)(13) rolled ity?
				501(c)(3))		Yes	No
PARTNERSHIP FOR CHILDREN - 81-0526281							
PO BOX 8134	ATTACHMENT BASED TREATMENT						
MISSOULA, MT 59807	PROGRAM	MONTANA	501(C)(3)	LINE 10			Х

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

Schedule R (Form 990) 2021

#### Schedule R (Form 990) 2021 YOUTH HOMES

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	()	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets		ortionate tions?			or Percentage ownership
		country)		sections 512-514)		400010	Yes	No	K-1 (Form 1065)	Yes	10
	-										
	-										
	-										
	1										
											+
	1										
	{										
	4										

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

<b>(a)</b> Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(C) Legal domicile (state or foreign	<b>(d)</b> Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	<b>(f)</b> Share of total income	<b>(g)</b> Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
		country)						Yes	No
	]								

#### Schedule R (Form 990) 2021 YOUTH HOMES

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

lote: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	s N
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		2
b Gift, grant, or capital contribution to related organization(s)			
c Gift, grant, or capital contribution from related organization(s)			
d Loans or loan guarantees to or for related organization(s)			
e Loans or loan guarantees by related organization(s)			
f Dividends from related organization(s)	1f		
g Sale of assets to related organization(s)			
h Purchase of assets from related organization(s)			
i Exchange of assets with related organization(s)	1i		
Lease of facilities, equipment, or other assets to related organization(s)			-
Lease of facilities, equipment, or other assets from related organization(s)			
Performance of services or membership or fundraising solicitations for related organization(s)		X	
n Performance of services or membership or fundraising solicitations by related organization(s)			
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			
Sharing of paid employees with related organization(s)	_		
Reimbursement paid to related organization(s) for expenses			
Reimbursement paid by related organization(s) for expenses		X	+
Other transfer of cash or property to related organization(s)	1r		
s Other transfer of cash or property from related organization(s)			

<b>(a)</b> Name of related organization	<b>(b)</b> Transaction type (a-s)	<b>(c)</b> Amount involved	(d) Method of determining amount involved
(1) PARTNERSHIP FOR CHILDREN	L	228,342.	FINANCIAL STATEMENTS
(2) PARTNERSHIP FOR CHILDREN	Q	497.	FINANCIAL STATEMENTS
(3)			
(4)			
(5)			
<u>(6)</u>			

#### Schedule R (Form 990) 2021 YOUTH HOMES

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a)	(b)	(c)	(d)	(6	a)	(f)	(g)	(۲	n)	(i)	(j)		(k)
Name, address, and EIN	Primary activity	Legal domicile	Predominant income	(€ Are partne 501(i org	all	Share of	Share of	Dispr tior	• <b>,</b> opor-	Code V-UBI	Genera	l or Per	rcentage
of entity		(state or foreign	(related, unrelated,	501(	c)(3) s ?	total	end-of-year	tion allocat	iate tions?	amount in box 20	manag	ing ow	vnership
-		country)		Yes		income	assets	Yes	No	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Yes	NO	
			,	100									
												_	
												_	
											$\left  \right $		

Schedule R (Form 990) 2021

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

132165 11-17-21

Schedule R (Form 990) 2021

(Rev. January 2022)

## Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service

#### File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

**Electronic filing (e-file).** You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits*.

#### Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Туре о	r Name of exempt organization or other filer, see instru	Taxpayer identification number (TIN)								
print	YOUTH HOMES		81-0331313							
File by th due date filing you	the te for Number, street, and room or suite no. If a P.O. box, see instructions.									
return. Se instructio	rn. See									
Enter t	he Return Code for the return that this application is for (fi	le a separa	te application for each return)							
Application Return Application										
ls For		Code	Is For							
Form 9	90 or Form 990-EZ	01	Form 1041-A		08					
Form 4	720 (individual)	03	Form 4720 (other than individual)	09						
Form 9	90-PF	04	Form 5227			10				
Form 9	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11				
Form 9	90-T (trust other than above)	06	Form 8870			12				
Form 9	90-T (corporation) DANN SWALLOW	07								
<ul> <li>If th</li> <li>If th</li> <li>box </li> <li>1</li> <li>1</li> <li>t</li> <li>t</li> <li>2</li> </ul>	request an automatic 6-month extension of time until	Group Exe and atta <u>MA</u> ganization's , an check reaso	mption Number (GEN) I ch a list with the names and TINs of <u>X 15, 2023</u> , to file return for: d ending <u>JUN 30, 2022</u> on: Initial return	f this is fo all membe	r the whole <u>(</u> ers the exter npt organizat 	group, check this				
	f this application is for Forms 990-PF, 990-T, 4720, or 606 any nonrefundable credits. See instructions.	9, enter the	tentative tax, less	3a	\$	0.				
	b       If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and         estimated tax payments made. Include any prior year overpayment allowed as a credit.       3b									
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by					- <del>-</del>	0.				
using EFTPS (Electronic Federal Tax Payment System). See instructions.				3c	\$	0.				
	n: If you are going to make an electronic funds withdrawa				1 1	-TE for payment				
LHA	For Privacy Act and Paperwork Reduction Act Notice	, see instru	ictions.		Form 8	3868 (Rev. 1-2022)				

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