**Financial Statements** 

June 30, 2021 and 2020







# **Independent Auditor's Report**

Board of Directors Youth Homes Missoula, Montana

#### **Report on the Financial Statements**

We have audited the accompanying financial statements of Youth Homes (the "Agency"), which comprise the statements of financial position as of June 30, 2021 and 2020, and the related statements of activities, functional expenses and cash flows for the years then ended and the related notes to the financial statements.

#### Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States; this includes 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.

#### **Auditor's Responsibility**

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements 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 the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

#### **Opinion**

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Youth Homes as of June 30, 2021 and 2020, 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.

Wipfli LLP

Missoula, Montana September 28, 2021

Wippei LLP

# Statements of Financial Position

As of June 30,	2021	2020
Assets		
Current Assets		
Cash and cash equivalents	\$ 1,065,845 \$	1,034,068
Current investments	2,059,159	1,612,193
Accounts receivable, net	378,334	287,060
Receivables from related party	24,079	14,373
Prepaid expenses	17,730	17,688
Total current assets	3,545,147	2,965,382
Property and equipment - Net	1,875,620	1,970,549
Other Assets		
Other Assets Endowment investments	824,179	613,694
Total other assets	824,179	613,694
Total assets	\$ 6,244,946 \$	5,549,625
Liabilities and Net Assets		
Current Liabilities		
Accounts payable	\$ 46,716 \$	65,227
Accrued payroll and payroll taxes payable	194,868	164,857
Accrued vacation payable	140,966	136,039
Current portion of long-term debt	42,518	433,506
Total current liabilities	425,068	799,629
Long-term debt, less current portion	102,497	653,475
Total liabilities	527,565	1,453,104
Net Assets Without donor restrictions	5,293,762	2 700 402
With donor restrictions  With donor restrictions	423,619	3,709,402
WILLI GOLIOI TESTITICHOLIS	423,013	387,119
Total net assets	5,717,381	4,096,521
Total liabilities and net assets	\$ 6,244,946 \$	5,549,625

# 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
Total Revenues	6,488,486	-	6,488,486
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
Total Support Services	1,137,241	-	1,137,241
Total expenses	6,040,755	-	6,040,755
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	387,119	4,096,521
Net assets - end of year	\$5,293,762	\$ 423,619	\$5,717,381

# Statement of Activities

For the year ended June 30,		2020	
Tor the year chacasane so,	Net assets	2020	
	without	Net assets	
	donor	with donor	
	restrictions	restrictions	Total
Public Support and Revenue:			
Public Support	4		4
Donations	\$1,215,126	\$ 20,100	\$1,235,226
Revenue			
Grant revenues	544,372	-	544,372
Contract services	3,329,690	-	3,329,690
Management fees-Partnership	196,532	-	196,532
Rental income	13,700	-	13,700
Investment income, net	27,907	-	27,907
Miscellaneous income	33,592	-	33,592
Total Revenues	4,145,793	-	4,145,793
Total support and revenue	5,360,919	20,100	5,381,019
Expenses:			
Program Services			
Program support	4,695,575	-	4,695,575
Support Services			
Fundraising	333,595	_	333,595
Administration	799,807	_	799,807
Administration	733,007		755,007
Total Support Services	1,133,402	-	1,133,402
Total expenses	E 020 077		E 020 077
Total expenses	5,828,977		5,828,977
Excess of support and revenue over (under) expenses	(468,058)	20,100	(447,958)
Change in net assets	(468,058)	20,100	(447,958)
Net assets - beginning of year	4,177,460	367,019	4,544,479
rect assets beginning or year	7,177,400	307,013	7,577,77
Net assets - end of year	\$3,709,402	\$ 387,119	\$4,096,521

# **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
Bank charges		-	-	11,441	11,441
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
Interest expense		5,636	-		5,636
Miscellaneous		1,563	-	4,375	5,938
Bad debt expense		5,138		<u>-</u>	5,138
Tatal	<u>,</u>	4 002 54 4	ć 200 F00	, ć 056.333	ć 6040.755
Total	\$	4,903,514	\$ 280,509	\$ 856,732	\$ 6,040,755

# **Statement of Functional Expenses**

For the year ended June 30,	2020				
,		Program			
		Support	Fundraising	Administration	Total
EXPENSES					_
Salaries and wages	\$	2,872,194	\$ 182,238	\$ 488,623 \$	3,543,055
Fringe benefits		470,511	30,507	78,297	579,315
Client direct assistance		306,044	-	7,057	313,101
Payroll taxes		219,553	13,941	28,030	261,524
Space costs		213,099	3,000	12,658	228,757
Depreciation		127,886	-	7,966	135,852
Purchased care services		104,888	-	-	104,888
Events expense		-	99,409	-	99,409
Contract services		81,379	-	-	81,379
Insurance		49,589	-	26,840	76,429
Supplies		40,380	-	25,467	65,847
Repairs and maintenance		60,118	-	8,474	68,592
Travel		55,159	-	5,253	60,412
Computer expense		8,402	-	50,367	58,769
Training		21,302	-	13,139	34,441
Postage, printing, publication		8,539	4,500	17,543	30,582
Professional services		17,570	-	10,944	28,514
Advertising		23,430	-	4,554	27,984
Bank charges		-	-	4,969	4,969
Miscellaneous		3,403	-	9,343	12,746
Interest expense		10,976	-	283	11,259
Bad debt expense		1,153	-	-	1,153
Total	\$	4,695,575	\$ 333,595	\$ 799,807 \$	5,828,977

# Statements of Cash Flows

Years Ended June 30,		2021	2020
In avenue / de avenue \ in each			
Increase (decrease) in cash:  Cash flows from operating activities:			
Change in net assets	\$	1,620,860 \$	(447.059)
Change in het assets	<u> </u>	1,020,800 3	(447,958)
Adjustments to reconcile change in net assets to net cash from			
operating activities:			
Bad debt		5,138	1,153
Depreciation		120,429	135,852
Realized and unrealized gain on investments		(574,397)	(5,778)
PPP loan forgiveness		(898,478)	-
Loss on sale of fixed asset		663	-
Changes in operating assets and liabilities:			
Accounts receivable		(96,412)	65,600
Due from related party		(9,706)	7,973
Prepaid expenses		(42)	(1,313)
Accounts payable		(18,511)	3,364
Accrued liabilities		34,938	(16,185)
Net cash from operating activities		184,482	(257,292)
Cash flows from investing activities:			
Purchases of fixed assets		(26,163)	-
Cash flows from investments		(83,054)	(58,526)
Net cash from investing activities		(109,217)	(58,526)
Cash flows from financing activities:			
Cash paid for principal on loans		(43,488)	(44,493)
Proceeds from line of credit		(43,400)	310,000
Payments on line of credit		_	(310,000)
Proceeds from loans		_	898,478
Net cash from financing activities		(43,488)	853,985
0.00		( - , ,	
Net change in cash		31,777	538,167
Cash at beginning of year		1,034,068	495,901
Cash at end of year	\$	1,065,845 \$	1,034,068
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Supplemental cash flow information:			
Cash paid during the year for:			
Interest	\$	5,636 \$	11,259

## Notes to Financial Statements

# **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, 2021 and 2020 are not considered material to these financial statements.

## Notes to Financial Statements

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

#### **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 if the restrictions expire in the fiscal year in which the contributions are recognized.

## Notes to Financial Statements

# 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.

# Notes to Financial Statements

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

#### **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.

## Notes to Financial Statements

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

#### **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.

## Notes to Financial Statements

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

#### **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 \$29,438 and \$27,984 for the years ended June 30, 2021 and 2020, 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 periods 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.

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 is currently evaluating the impact of the provisions of ASC 958.

## Notes to Financial Statements

# 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, 2021 and 2020. 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:

		2021	2020
Total investments at east	<u></u>	2 520 220 6	1 007 003
Total investments at cost	\$	2,539,238 \$	1,987,982
Total investments at market	\$	2,883,338 \$	2,225,887
Less endowment investments at market		824,179	613,694
Current investments at market	\$	2,059,159 \$	1,612,193

Of the amounts above, the Agency has an established permanent, irrevocable endowment fund in the amount of \$824,179 and \$613,694 for 2021 and 2020, respectively. The principal of restricted funds, \$423,619 and \$387,119, is intended to remain whole in perpetuity, with income earned being available for the charitable purposes of the Agency.

## **Notes to Financial Statements**

# Note 3: Endowment Funds and Investments (Continued)

Activity related to the endowment funds consisted of:

As of June 30, 2021		hout Donor	With Donor Restrictions	
Beginning balance	\$	226,575	\$ 387,11	9
Investment income		18,504		-
Net appreciation		161,156		-
Contributions		-	36,50	0
Investment fees		(5,675)		_
Ending balance	\$	400,560	\$ 423,61	9
		hout Donor	With Donor	
As of June 30, 2020	Re	estrictions	Restrictions	5
Reginning balance	\$	215,990	¢ 267.01	0
Beginning balance Investment income	Ş	14,296	\$ 367,01	.9
Net appreciation		93		_
Contributions		-	20,10	00
Investment fees		(3,804)		_
Ending balance	\$	226,575	\$ 387,11	9

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.

## Notes to Financial Statements

#### **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, 2021 and 2020.

- 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.

# **Notes to Financial Statements**

# 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, 2021	Level 1	Level 2	Level 3	Total Fair Value
Mutual funds/ETFs	\$ 2,847,039 \$	- \$	_	\$ 2,847,039
Total mutual funds/ETFs	2,847,039	-	-	2,847,039
Money markets	36,299	-	-	36,299
Total assets	\$ 2,883,338 \$	- \$	-	\$ 2,883,338
June 30, 2020	Level 1	Level 2	Level 3	Total Fair Value
Mutual funds Common stocks	\$ 649,083 \$ 1,546,742	- \$ -	- -	\$ 649,083 1,546,742
Total mutual funds and common stocks	2,195,825	-	-	2,195,825
Money markets	30,062	-	-	30,062
Total assets	\$ 2,225,887 \$	- \$	-	\$ 2,225,887

## **Note 5: Accounts Receivable**

Accounts receivable consisted of the following at June 30:

	2021	2020
Accounts receivable	\$ 397,993 \$	295,447
Less:		
Allowance for doubtful accounts	(9,491)	(4,353)
Allowance for contractual adjustments	(10,168)	(4,034)
Accounts receivable, net	\$ 378,334 \$	287,060

## Notes to Financial Statements

# 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, 2021 and 2020:

	2021	2020
Furniture and equipment	\$ 100,968 \$	241,330
Vehicles	235,539	238,803
Buildings and improvements	3,327,751	3,311,589
Land	374,243	374,243
Total property and equipment	4,038,501	4,165,965
Less accumulated depreciation	(2,162,881)	(2,195,416)
Property and equipment - Net	\$ 1,875,620 \$	1,970,549

# Note 7: Liquidity and Availability of Financial Resources

The Youth Homes has \$1,468,258 of financial assets available within one year of the statement of financial position date consisting of cash of \$1,065,845, accounts receivable of \$378,334, and receivables from related parties of \$24,079. 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 as board restricted current investments in the amount of \$2,059,159 that can be used at the discretion of the board. As more fully described in Note 11, 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: 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, 2021 and 2020, the 401(k) plan expense was \$52,254 and \$52,439, respectively.

# **Notes to Financial Statements**

## **Note 9: 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 three office spaces in Missoula. These spaces are 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 two facilities in Helena for \$5 and \$1 per year. One lease term is for 5 years with an automatic renewal in 2024 and the other term is for 20 years expiring June 2028.

# **Note 10: Long Term Debt**

As of June 30,		2021	2020
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.	\$	134,221 \$	173,868
Loan payable at 6.84% interest due in monthly payments of principal and interest of \$394 through December 2023; secured by vehicle.		10,794	14,635
Loan payable (Payroll Protection Program) at 1% interest due in monthly payments of principal and interest of \$50,312 beginning November 2020 through April 2022; unsecured. The loan was forgiven in November 2020.		-	898,478
Total debt		145,015	1,086,981
Less current portion		42,518	433,506
Total long-term debt	\$	102,497 \$	653,475
Loan principal matures as follows for the years ending June 30:			
2022	\$	42,518	
2023	·	44,773	
2024		44,708	
2025		13,016	
2026		-	
Thereafter		-	
	\$	145,015	

## Notes to Financial Statements

#### **Note 11: 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 2022, secured by current investments of the Agency. No advances were outstanding as of June 30, 2021 and 2020.

#### **Note 12: Net Assets Without Donor Restrictions**

Net assets without donor restrictions are comprised of the following as of June 30:	2021	2020
Without donor restrictions Board restricted - reserve funds	\$ 3,234,603 \$ 2,059,159	2,097,209 1,612,193
Total net assets without donor restrictions	\$ 5,293,762 \$	3,709,402

#### **Note 13: 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, 2021 and 2020, the Agency received \$199,858 and \$196,532 in management fees and \$3,779 and \$206 in expense reimbursements from the Partnership, respectively. Receivable balances from Partnership totaled \$24,079 and \$14,373 as of June 30, 2021 and 2020, respectively.

# Note 14: 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 15: Concentration of Risk**

The Agency received 28% and 32% of its revenues from contracts with the State of Montana for the fiscal years ended June 30, 2021 and 2020, respectively. The Agency received another 22% and 29% of its revenues from contracts with the State of Montana Medicaid Programs for the fiscal years ended June 30, 2021 and 2020, respectively. A significant change in these contractual arrangements may substantially affect the operations of the Agency.

# **Notes to Financial Statements**

# **Note 16: Subsequent Events**

In accordance with ASC 855, Management has evaluated all subsequent events through September 28, 2021, 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 17: Risk and Uncertainties**

Beginning in March 2020, the United States economy began suffering adverse effects from the COVID 19 Virus Crisis ("CV19 Crisis"). As of the date of issuance of the financial statements, the Agency has seen continued adverse impacts of the CV19 Crisis in the form of an increased cost in wages and a workforce shortage. The future impact of the CV19 Crisis on the Agency cannot be reasonably estimated at this time.

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

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

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

Open to Public Inspection

<u>A I</u>	ror tri	e 2020 calendar year, or tax year beginning 001 1, 2020 and	enaing U	UN 30, 2021	
В	Check if applicab	C Name of organization		D Employer identific	cation number
	Addre chang Name				
	chan	ge Doing business as		81-03313	13
	Initial returr	Number and street (or P.U. box if mail is not delivered to street address)	Room/suite	E Telephone number	
	□Final returr	550 CALIFORNIA STREET		406-721-	
	termi ated	, , , , , , , , , , , , , , , , , , , ,		G Gross receipts \$	7,108,086.
	Amer returr	MISSOULA, MI 59802		H(a) Is this a group re	
	Appli tion	F Name and address of principal officer: ELMER ROBENT HALL		for subordinates	? Yes X No
	pend	SAME AS C ABOVE		<b>H(b)</b> Are all subordinates in	cluded? Yes No
		xempt status: X 501(c)(3) 501(c) ( ) ◀ (insert no.) 4947(a)(1) c	or 527	If "No," attach a	list. See instructions
		ite: ► WWW.YOUTHHOMES.COM		H(c) Group exemption	
		f organization: X Corporation	<b>L</b> Year	of formation: $1971 _{ m N}$	$^{\prime}$ State of legal domicile; ${ m MT}$
Pa	art I	Summary			
e S	1	Briefly describe the organization's mission or most significant activities: <b>GROUS CARE</b>	YOUT	H HOMES AND	FOSTER
ğ	2	Check this box if the organization discontinued its operations or dispos	ad of mara	than 25% of its not ass	uoto.
Jerr	2			1 - 1	14
é	3 4	Number of voting members of the governing body (Part VI, line 1a)  Number of independent voting members of the governing body (Part VI, line 1b)			14
જ	5	Total number of individuals employed in calendar year 2020 (Part V, line 1a)			225
ties	6	Total number of volunteers (estimate if necessary)			20
Activities & Governance	72				0.
Ą	l 'a	Net unrelated business taxable income from Form 990-T, Part I, line 11			0.
_	<b>├</b>	The difference business taxable income from 1990-1, 1 art i, line 11		Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)		1,762,036.	2,962,989.
Jue	9	Program service revenue (Part VIII, line 2g)		3,526,222.	4,057,651.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		36,236.	66,362.
æ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,945.	20,421.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	5,326,439.	7,107,423.	
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
G	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		4,379,381.	4,603,304.
Se	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
Expenses	.   ь	Total fundraising expenses (Part IX, column (D), line 25)   280,50	9.		
ŭ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,400,794.	1,457,656.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		5,780,175.	6,060,960.
	19	Revenue less expenses. Subtract line 18 from line 12		-453,736.	1,046,463.
Net Assets or	3		Ве	ginning of Current Year	End of Year
sets	20	Total assets (Part X, line 16)		5,549,625.	6,244,946.
ASS	21	Total liabilities (Part X, line 26)		1,453,104.	527,565.
<u>F</u>	22	Net assets or fund balances. Subtract line 21 from line 20		4,096,521.	5,717,381.
	art II	Signature Block			
		alties of perjury, I declare that I have examined this return, including accompanying schedules			knowledge and belief, it is
true	, corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of wh	ich preparer	has any knowledge.	
				<u>_</u>	
Sig	n	Signature of officer		Date	
Hei	e	ELMER ROSENTHAL, EXECUTIVE DIRECTOR			
		Type or print name and title	1 -	Data I =	
	_	Print/Type preparer's name Preparer's signature		Date Check Check if	PTIN
Paid		PHILIP L. YASENAK, CPA PHILIP L. YASENA	к, С <sub>1</sub>	0/25/21 "self-employ	
	parer	Firm's name WIPFLI LLP		Firm's EIN ▶	39-0758449
use	Only	Firm's address 101 EAST FRONT STREET #301		D. 40	6 720 10AA
		MISSOULA, MT 59802		Phone no. 4 U	6.728.1800
Ma	y the l	RS discuss this return with the preparer shown above? See instructions			X Yes No

Pai	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	THE MISSION OF YOUTH HOMES IS TO HELP EVERY YOUTH FEEL SAFE, HAVE A SENSE OF BELONGING, AND FIND A PLACE TO CALL HOME.
	SENSE OF BEHONGING, AND FIND A FLACE TO CALL HOME:
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes X No
	prior Form 990 or 990-EZ?  Yes X No  If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$4,903,514. including grants of \$) (Revenue \$4,078,072. )
	SHELTER, GROUP HOME, AND FOSTER CARE FOR ADOLESCENTS AND CHILDREN.
	TEMPORARY CARE, LONG-TERM CARE AND FOSTER CARE PROVIDED FOR APPROXIMATELY 505 YOUTHS THIS YEAR.
	APPROXIMATELI 505 TOUTHS THIS TEAR.
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4с	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses ► 4 , 903 , 514 . Form <b>990</b> (2020)
	10111 999 (2020)

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# Form 990 (2020) YOUTH HOMES Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
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		Х
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 Revenue Procedure 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			
Ŭ	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,	۰		
′		7		x
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	<b>-</b> ′-		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			<b> </b> ₩
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	_X_	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
-	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
۵	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	110		
	the organization's separate of consolidated infancial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
120	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	- ' ' '	- 21	
ıza	, ,	40-	Х	
	Schedule D, Parts XI and XII	12a	Λ	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			<b>.</b>
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	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			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		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	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes."			
	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21		x
	5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 -			

032003 12-23-20

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Form 990 (2020) YOUTH HOMES
Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u> X</u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		<u> </u>
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	040		x
h	Schedule K. If "No," go to line 25a	24a 24b		
	Did the organization mivest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		
·	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		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
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
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		<u> X</u>
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			,,
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
_	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor?  f	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 lines 28a or 28b? If	200		
	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		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		<u> </u>
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		<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	34	Х	
35.5	Part V, line 1  Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	21	Х
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?  If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	33a		
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
Do	Note: All Form 990 filers are required to complete Schedule 0	38	X	
Pa				
	Check if Schedule O contains a response or note to any line in this Part V			
4	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		Yes	No
ıa b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable  Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable  1a 3  1b 0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	-		
·	(gambling) winnings to prize winners?	1c	Х	
			000	

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Form 990 (2020)

YOUTH HOMES

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

					Yes	No			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,								
	filed for the calendar year ending with or within the year covered by this return	2a	225						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	ns? .		2b	Х				
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)							
				3a		_X_			
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule			3b					
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a		-	4a		х			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?								
b	If "Yes," enter the name of the foreign country		· /ED A D\						
<b>-</b> -	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A			r-		X			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a 5b		X			
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transal If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c					
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			30					
va	any contributions that were not tax deductible as charitable contributions?			6a		Х			
h	If "Yes," did the organization include with every solicitation an express statement that such contributions.			- Ou					
-	were not tax deductible?			6b					
7	Organizations that may receive deductible contributions under section 170(c).								
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and set	rvices r	provided to the payor?	7a		Х			
b	tame a series of the control of the		. ,	7b					
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	as req	uired						
	to file Form 8282?			7c		X			
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d							
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit c	ontrac	t?	7e		X			
f									
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo			7g					
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	ation fi	le a Form 1098-C?	7h					
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained	d by th	е						
				8					
9	Sponsoring organizations maintaining donor advised funds.								
а				9a					
_b	, , , , , , , , , , , , , , , , , , , ,			9b					
10	Section 501(c)(7) organizations. Enter:	100	I						
a	Initiation fees and capital contributions included on Part VIII, line 12  Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10a 10b							
ь 11	Section 501(c)(12) organizations. Enter:	100	1						
··		11a							
b	Gross income from other sources (Do not net amounts due or paid to other sources against	- 14							
_	amounts due or received from them.)	11b							
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		?	12a					
	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					
	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.								
b	Enter the amount of reserves the organization is required to maintain by the states in which the	ı							
	organization is licensed to issue qualified health plans	13b							
	Enter the amount of reserves on hand	13c							
				14a		_X_			
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu			14b					
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune					77			
	excess parachute payment(s) during the year?			15		X			
40	If "Yes," see instructions and file Form 4720, Schedule N.	<b>4</b> !	0	40		v			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investmen	t incor	ne?	16		X			
	If "Yes," complete Form 4720, Schedule O.								

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 14			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 14			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	X	
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 reached at the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	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 approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► NONE			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s	only)	availa	ble
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	DANN SWALLOW - 406-721-2704			
	550 CALIFORNIA STREET, MISSOULA, MT 59802			

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

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

#### X

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B)			((	C)			(D)	(E)	(F)
Name and title	Average	/ al a	Position		Reportable	Reportable	Estimated			
	hours per	box	(do not check more than one box, unless person is both an		compensation	compensation	amount of			
	week		officer and a director/trustee)		from	from related	other			
	(list any	ector						the	organizations	compensation
	hours for	or dir	9			ated		organization	(W-2/1099-MISC)	from the
	related organizations	ustee	trust		96	Suedu		(W-2/1099-MISC)		organization and related
	below	ualtr	tional		yoldı	t con	_			organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) ELMER ROSENTHAL	32.00		_		<u> </u>	1 0	ш.			
EXECUTIVE DIRECTOR	8.00			Х				84,226.	0.	8,828.
(2) DANN SWALLOW	32.00									-
CFO	8.00			Х				79,486.	0.	8,729.
(3) WHITNEY MAPHIS	2.00									
PRESIDENT		Х		X				0.	0.	0.
(4) JAYMIE BOWDITCH	2.00									
VICE PRESIDENT		Х		X				0.	0.	0.
(5) LAWRENCE KING	2.00									
SECRETARY/TREASURER		Х		Х				0.	0.	0.
(6) LARRY FLANAGAN	1.00								_	_
PAST PRESIDENT		Х		Х				0.	0.	0.
(7) HARRY SAXTON	1.00									
DIRECTOR		Х						0.	0.	0.
(8) SHANNONE HART	1.00									
DIRECTOR		Х						0.	0.	0.
(9) JOE JENSEN	1.00									
DIRECTOR	1 00	X						0.	0.	0.
(10) ERIC PETERSEN	1.00									
DIRECTOR		Х						0.	0.	0.
(11) ANN MUNSEY	1.00									
DIRECTOR	1 00	X						0.	0.	0.
(12) MAEGAN RIDES AT THE DOOR	1.00								•	
DIRECTOR	1 00	Х						0.	0.	0.
(13) ASHELY TRAUTMAN	1.00								•	
DIRECTOR	1 00	Х						0.	0.	0.
(14) CHRISTIAN WOHLFEIL	1.00	.,								
DIRECTOR	1 00	Х						0.	0.	0.
(15) JULI YOBST	1.00	37							_	
DIRECTOR	1.00	Х			_	-		0.	0.	0.
(16) DR. KIM MCKEARNAN DIRECTOR	1.00	Х						0.	0.	
DIRECTOR		Λ	-		$\vdash$			0.	0.	0.
		ł								
				l	l	<u> </u>		<u> </u>		- OOO (2222)

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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

· ui	Section A. Officers, Directors, Trus	1	DIOM	ees,			gnes	it C	ompensated Employee	s (continued)			
	(A) Name and title	(B) Average hours per	box	not cl	Pos heck i ss per	more rson i	than dis both	n an	( <b>D)</b> Reportable compensation	<b>(E)</b> Reportable compensation	l l		
		week (list any hours for		cer an	a d	irecto	or/trus		from the organization	from related organizations (W-2/1099-MISC		oth omper from	sation
		related organizations	ustee or d	trustee		9	pensated		(W-2/1099-MISC)	(88-2/1099-181150		organiz and re	ation
		below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				organiz	
			=	드	10	Α¥	王吉	윤					
											+		
											+		
											+		
			<u> </u>								$\perp$		
			<u> </u>								_		
	Subtotal  Total from continuation sheets to Part VI								163,712.		).	17,	557. 0.
	Total (add lines 1b and 1c)								163,712.		).	17,	557.
2	Total number of individuals (including but no compensation from the organization							o re	eceived more than \$100,	000 of reportable			0
3	Did the organization list any <b>former</b> officer,	director, trust	ee. k	ev e	empl	ove	e. or	hia	hest compensated empl	ovee on		Ye	s No
	line 1a? If "Yes," complete Schedule J for s	uch individual									. 3	3	X
4	For any individual listed on line 1a, is the su and related organizations greater than \$150	0,000? If "Yes,	," co	mple	ete S	Sche	edule	J f	or such individual		4	<u> </u>	X
5	Did any person listed on line 1a receive or a rendered to the organization? If "Yes," com	· · · · · · · · · · · · · · · · · · ·				-					5	5	X
	ction B. Independent Contractors					4		41		100 000 of common		<b></b>	
1	Complete this table for your five highest co the organization. Report compensation for										nsation		
	(A) Name and business	address	NC	ONE	3				<b>(B)</b> Description of s	ervices	Com	(C) pensa	tion
2	Total number of independent contractors (i		ot lir	nited	d to			ted	above) who received mo	ore than			
	\$100,000 of compensation from the organic	zation				(	)				For	m <b>99</b> 0	) <sub>(2020)</sub>

032008 12-23-20

YOUTH HOMES 81-0331313 Page 9 Form 990 (2020) Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) Related or exempt Unrelated Revenue excluded Total revenue from tax under function revenue business revenue sections 512 - 514 1 a Federated campaigns 1a Contributions, Gifts, Grants and Other Similar Amounts 1b **b** Membership dues c Fundraising events ..... 1c 1d d Related organizations 1,495,669. e Government grants (contributions) 1e f All other contributions, gifts, grants, and 1,467,320 similar amounts not included above ... 1f 4,200 g Noncash contributions included in lines 1a-1f 2,962,989. h Total. Add lines 1a-1f **Business Code** 3,857,793.3,857,793. 2 a CONTRACT SERVICES 624100 Program Service Revenue **b** REIMBURSEMENTS 900099 199,858. 199,858. С f All other program service revenue ..... 4,057,651. g Total. Add lines 2a-2f Investment income (including dividends, interest, and 67,025. 67,025. other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties ..... (i) Real (ii) Personal 5,000. 6 a Gross rents 0. 6b **b** Less: rental expenses ... 5,000. c Rental income or (loss) 5,000. 5,000. d Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of assets other than inventory 7a b Less: cost or other basis 663. Other Revenue and sales expenses 7b -663. c Gain or (loss) \_\_\_\_\_\_7c -663. -663. d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ contributions reported on line 1c). See Part IV, line 18 **b** Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 9a **b** Less: direct expenses 9b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns 10a and allowances **b** Less: cost of goods sold .....

032009 12-23-20

66,362. Form **990** (2020)

**Business Code** 

900099

c Net income or (loss) from sales of inventory

11 a MISC. INCOME OR REFUND

d All other revenue

e Total. Add lines 11a-11d

**12** Total revenue. See instructions

107,423.4,078,072.

15,421.

15,421.

15,421

# Form 990 (2020) YOUTH HOMES Part IX Statement of Functional Expenses

Secti	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).									
	Check if Schedule O contains a response or note to any line in this Part IX									
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses					
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21									
2	Grants and other assistance to domestic									
_	individuals. See Part IV, line 22									
3	Grants and other assistance to foreign									
	organizations, foreign governments, and foreign									
	individuals. See Part IV, lines 15 and 16									
4	Benefits paid to or for members									
5	Compensation of current officers, directors,									
	trustees, and key employees	197,541.		197,541.						
6	Compensation not included above to disqualified									
	persons (as defined under section 4958(f)(1)) and									
	persons described in section 4958(c)(3)(B)									
7	Other salaries and wages	3,504,477.	2,957,199.	345,122.	202,156.					
8	Pension plan accruals and contributions (include									
	section 401(k) and 403(b) employer contributions)	47,560.	36,249.	11,311.						
9	Other employee benefits	565,384.	459,737.	71,806.	33,841.					
10	Payroll taxes	288,342.	237,474.	35,403.	15,465.					
11	Fees for services (nonemployees):									
а	Management									
b	Legal	1,663.	1,663.							
С	Accounting	20,448.	20,448.							
d	Lobbying									
е	Professional fundraising services. See Part IV, line 17									
f	Investment management fees	20,205.		20,205.						
g	Other. (If line 11g amount exceeds 10% of line 25,	225 245	226 545	400						
	column (A) amount, list line 11g expenses on Sch O.)	206,947.	206,547.	400.						
12	Advertising and promotion	29,438.	24,695.	4,743.	4 500					
13	Office expenses	131,169.	76,580.	50,089.	4,500.					
14	Information technology	71,340.	11,647.	59,693.						
15	Royalties	241 204	222 070	14 514	2 000					
16	Occupancy	241,384. 51,637.	223,870.	14,514.	3,000.					
17	Travel	31,03/•	48,565.	3,072.						
18	Payments of travel or entertainment expenses									
	for any federal, state, or local public officials									
19	Conferences, conventions, and meetings	5,636.	5,636.							
20	Interest	3,030.	3,030.							
21	Payments to affiliates	120,429.	114,044.	6,385.						
22		75,142.	48,841.	26,301.						
23 24	Insurance Other expenses. Itemize expenses not covered	13,144.	±0,0±1•	20,301.						
24	above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A)									
_	amount, list line 24e expenses on Schedule 0.) CLIENT DIRECT ASSISTANC	310,293.	310,264.	29.						
a	REPAIRS AND MAINTENANCE	87,953.	76,776.	11,177.						
b	TRAINING	51,349.	36,578.	14,771.						
Q C	INDIRECT FUNDRAISING EX	21,547.	30,370.	<u> </u>	21,547.					
d	All other expenses	11,076.	6,701.	4,375.	<u> </u>					
	Total functional expenses. Add lines 1 through 24e	6,060,960.	4,903,514.	876,937.	280,509.					
<u>25</u> 26	Joint costs. Complete this line only if the organization	0,000,000	+,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	010,0010	200,303					
20	reported in column (B) joint costs from a combined									
	educational campaign and fundraising solicitation.									
	Check here if following SOP 98-2 (ASC 958-720)									
	II TOHOWING OUT 30-2 (AGO 308-720)				Form <b>990</b> (2020)					

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Form 990 (2020)

Part X | Balance Sheet

Pai	rt X	Balance Sheet			
		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	38,042.	1	5,118.
	2	Savings and temporary cash investments		2	1,060,727.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	402,413.
	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	
ţ	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
Ř	9	Prepaid expenses and deferred charges	17,688.	9	17,730.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 4,038,500			
	b	Less: accumulated depreciation 10b 2,162,88		10c	1,875,620. 2,883,338.
	11	Investments - publicly traded securities		11	2,883,338.
	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	6 244 046
	16	Total assets. Add lines 1 through 15 (must equal line 33)		16	6,244,946. 382,550.
	17	Accounts payable and accrued expenses		17	304,330.
	18	Grants payable		18	
	19 20	Deferred revenue		19 20	
	21	Tax-exempt bond liabilities		21	
	22	Escrow or custodial account liability. Complete Part IV of Schedule D  Loans and other payables to any current or former officer, director,		21	
ties	~~	trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities				22	
Ë	23	controlled entity or family member of any of these persons  Secured mortgages and notes payable to unrelated third parties	100 502	23	145,015.
	24	Unsecured notes and loans payable to unrelated third parties		24	0.
	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		26	527,565.
		Organizations that follow FASB ASC 958, check here			
Ses		and complete lines 27, 28, 32, and 33.			
<u>a</u>	27	Net assets without donor restrictions	3,709,402.	27	5,293,762.
Ba	28	Net assets with donor restrictions	387,119.	28	423,619.
pur		Organizations that do not follow FASB ASC 958, check here			
Ę.		and complete lines 29 through 33.			
SO	29	Capital stock or trust principal, or current funds		29	
set	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or other funds		31	
Se	32	Total net assets or fund balances	4,096,521.	32	5,717,381.
	33	Total liabilities and net assets/fund balances	<u>.</u> 5,549,625.	33	6,244,946.

Form 990 (2020) YOUTH HOMES 81-0331313 Page **12** 

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	7,10		
2	Total expenses (must equal Part IX, column (A), line 25)	2	6,06		
3	Revenue less expenses. Subtract line 2 from line 1	3	1,04		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	4,09		
5	Net unrealized gains (losses) on investments	5	57	4,3	97.
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,				
	coluṃn (B))	10	5,71	7,3	81.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Э.			
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				
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:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		. 2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit			
	Act and OMB Circular A-133?		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		. 3b		
			Form	990	(2020)

#### SCHEDULE A

Department of the Treasury

(Form 990 or 990-EZ)

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service **Employer identification number** Name of the organization YOUTH HOMES 81-0331313 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other n your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 032021 01-25-21

Schedule A (Form 990 or 990-EZ) 2020

## 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.)

Section A. Public Support								
Cale	ndar year (or fiscal year beginning in)	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total	
1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")	1428514.	1769259.	1706407.	1762036.	2962989.	9629205.	
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	1428514.	1769259.	1706407.	1762036.	2962989.	9629205.	
5								
	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)						674,543.	
6	Public support. Subtract line 5 from line 4.						8954662.	
Section B. Total Support								
Cale	ndar year (or fiscal year beginning in)	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total	
	Amounts from line 4	1428514.	1769259.	1706407.	1762036.	2962989.	9629205.	
	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties,							
	and income from similar sources	53,620.	52,473.	44,922.	49,936.	72,025.	272,976.	
9	Net income from unrelated business		•	,		•	,	
	activities, whether or not the							
	business is regularly carried on		19,434.	19,745.			39,179.	
10	Other income. Do not include gain		,	,			<u> </u>	
	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		,	,	,		10022836.	
	Gross receipts from related activities,	etc. (see instruction	ons)		•		,280,823.	
	Gross receipts from related activities, etc. (see instructions)  First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3)							
	organization, check this box and <b>stop here</b>							
Section C. Computation of Public Support Percentage								
14	Public support percentage for 2020 (I	ine 6, column (f), d	ivided by line 11, o	column (f))		14	89.34 %	
	Public support percentage from 2019					15	87.99 %	
	16a 33 1/3% support test - 2020. 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 - 2019. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box							
	and stop here. The organization qualifies as a publicly supported organization							
17a	17a 10% -facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more,							
	and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization							
	meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization							
b	b 10% -facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or							
	more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the							
	organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization							
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions								
	Schedule A (Form 990 or 990-EZ) 2020							

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

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

Se	ction A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not	ļ					
	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	ļ					
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-	ļ					
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to	ļ					
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to	ļ					
	the organization without charge	ļ					
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support				•	•	
Cale	endar year (or fiscal year beginning in)	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Amounts from line 6		, ,	` '			
	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties,						
	and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses	ļ					
	acquired after June 30, 1975	ļ					
(	Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is	ļ					
	regularly carried on						
12	Other income. Do not include gain						
	or loss from the sale of capital assets (Explain in Part VI.)						
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)						
	First 5 years. If the Form 990 is for the	ne organization's fir	rst, second, third,	fourth, or fifth tax	year as a section 5	01(c)(3) organization	on,
	_						
Se	ction C. Computation of Publi	c Support Per	centage				
	Public support percentage for 2020 (I			column (f))		15	%
16	Public support percentage from 2019	Schedule A, Part	III, line 15			16	%
Se	ction D. Computation of Inves	tment Income	e Percentage				
17	Investment income percentage for 20	)20 (line 10c, colur	mn (f), divided by li	ne 13, column (f))		17	%
18						18	%
	a 33 1/3% support tests - 2020. If the						
	more than 33 1/3%, check this box ar						<b>&gt;</b>
k	33 1/3% support tests - 2019. If the						ınd
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization						<b>&gt;</b>

# 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 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 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 in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes." provide detail in **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
_		
За		
3b		
3с		
4a		
41-		
4b		
4c		
40		
5a		
5b		
5c		
30		
6		
J		
7		
8		
9a		
9b		
9с		
30		
10a		
. 34		
10b		
100		

	11 5 5 (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described in line 11a above?	11b		
С	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes." explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see ins	struction	s).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in 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.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
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.	3b		

Par	rt V   Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Organi:	zations							
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 ( explain in Part VI). See instructions.									
	All other Type III non-functionally integrated supporting organizations mu	st complete S	Sections A through E.							
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)						
1	Net short-term capital gain	1								
2	Recoveries of prior-year distributions	2								
3	Other gross income (see instructions)	3								
4	Add lines 1 through 3.	4								
5	Depreciation and depletion	5								
6	Portion of operating expenses paid or incurred for production or									
	collection of gross income or for management, conservation, or									
	maintenance of property held for production of income (see instructions)	6								
7	Other expenses (see instructions)	7								
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8								
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)						
1	Aggregate fair market value of all non-exempt-use assets (see									
	instructions for short tax year or assets held for part of year):									
а	Average monthly value of securities	1a								
b	Average monthly cash balances	1b								
С	Fair market value of other non-exempt-use assets	1c								
d	Total (add lines 1a, 1b, and 1c)	1d								
е	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 amount,									
	see instructions).	4								
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5								
6	Multiply line 5 by 0.035.	6								
7	Recoveries of prior-year distributions	7								
8	Minimum Asset Amount (add line 7 to line 6)	8								
Sect	ion C - Distributable Amount			Current Year						
1	Adjusted net income for prior year (from Section A, line 8, column A)	1								
2	Enter 0.85 of line 1.	2								
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3								
4	Enter greater of line 2 or line 3.	4								
5	Income tax imposed in prior year	5								
6	Distributable Amount. Subtract line 5 from line 4, unless subject to									
	emergency temporary reduction (see instructions).	6								
7	Check here if the current year is the organization's first as a non-function	ally integrated	Type III supporting orga	nization (see						
	instructions).									

Schedule A (Form 990 or 990-EZ) 2020

Par	t v   Type III Non-Functionally integrated 509	(a)(3) Supporting Orga	nizaτions <sub>(continued</sub>	<u>d)</u>	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exe	1			
2	Amounts paid to perform activity that directly furthers exemp		$\top$		
	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 - pri	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 2020 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount		1	10	
		(i)	(ii)		(iii)
Secti	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2020		Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020 (reason-				
	able cause required - explain in Part VI). See instructions.				
_3_	Excess distributions carryover, if any, to 2020				
a	From 2015				
b	From 2016				
с	From 2017				
d	From 2018				
е	From 2019				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2020 distributable amount				
ī	Carryover from 2015 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2020 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2020 distributable amount				
С	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2020, 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 2020. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2021. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
	Excess from 2016				
	Excess from 2017				
	Excess from 2018				

Schedule A (Form 990 or 990-EZ) 2020

d Excess from 2019e Excess from 2020

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

# **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

YOUTH HOMES

**Employer identification number** 81-0331313

Par	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds o	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advise	d funds
	are the organization's property, subject to the organization's $% \left( 1\right) =\left( 1\right) \left( 1$	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be u	sed only
	for charitable purposes and not for the benefit of the donor o	r donor advisor, or for any other purpose c	onferring
_			
Par	t II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990, P	art IV, line 7.
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (for example, recrea	. —	a historically important land area
	Protection of natural habitat	Preservation of a	a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form o	
	day of the tax year.		Held at the End of the Tax Year
	Total number of conservation easements		l l
	-		
	Number of conservation easements on a certified historic stru		
d	Number of conservation easements included in (c) acquired a		l l
	listed in the National Register		
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by the o	organization 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		□ v <sub>aa</sub> □ Na
6	violations, and enforcement of the conservation easements it Staff and volunteer hours devoted to monitoring, inspecting,		
6	Starr and volunteer riours devoted to morntoning, inspecting,	rialiding of violations, and emorcing conse	ervation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conservation	on essements during the year
′	\$	illing of violations, and emorcing conservation	on easements during the year
8	Does each conservation easement reported on line 2(d) abov	e satisfy the requirements of section 170/h	)(4)(B)(i)
Ū	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation		
•	balance sheet, and include, if applicable, the text of the footn	•	
	organization's accounting for conservation easements.		
Par	t III Organizations Maintaining Collections of	Art, Historical Treasures, or Oth	er 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 revenue statement an	d balance sheet works
	of art, historical treasures, or other similar assets held for pub	olic exhibition, education, or research in fur	therance of public
	service, provide in Part XIII the text of the footnote to its finar	ncial statements that describes these items	i.
b	If the organization elected, as permitted under FASB ASC 95	8, to report in its revenue statement and ba	alance sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in further	erance 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 treatments	asures, or other similar assets for financial	gain, provide
	the following amounts required to be reported under FASB A	SC 958 relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1		• \$
b	Assets included in Form 990, Part X		> \$
LHA	For Paperwork Reduction Act Notice, see the Instructions	s for Form 990.	Schedule D (Form 990) 2020

by:

(i) Unrelated organizations

(ii) Related organizations

(iii) Related organizations

(iii) Related organizations

(iii) Related organizations

(iiii) Related organizations

(iiiii) Related organizations

Describe in Part XIII the intended uses of the organization's endowment funds.

### Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		374,243.		374,243.
<b>b</b> Buildings		3,327,751.	1,854,180.	1,473,571.
c Leasehold improvements				
d Equipment		336,507.	308,701.	27,806.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equ	1,875,620.			

Schedule D (Form 990) 2020

Part VII Investments - Other Securities.			<b>g</b> -
Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(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
<u>(1)</u>			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► Part IX Other Assets.			
Complete if the organization answered "Yes"		11d. See Form 990, Part X, line 15.	
(a)	Description		(b) Book value
<u>(1)</u>			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	e 15.)	<b>&gt;</b>	
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)	<del>-</del>		
Total (Column /b) must agual Form 000 Port V and (P) line	0E )		

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 ... X

Schedule D (Form 990) 2020

Schedule D (Form 990) 2020



## **SCHEDULE 0**

Internal Revenue Service

(Form 990 or 990-EZ) Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

Name of the organization

**Employer identification number** 

YOUTH HOMES	81-0331313
FORM 990, PART VI, SECTION A, LINE 8B:	
NO COMMITTEE MAKES DECISIONS ON BEHALF OF THE BOARD. ALL C	OMMITTEES MEET
FOR DISCUSSION PURPOSES AND THEN PRESENT ANYTHING THAT NEE	DS APPROVAL TO
THE BOARD AS A WHOLE AND IT BECOMES DOCUMENTED IN THE BOAR	D MINUTES.
FORM 990, PART VI, SECTION B, LINE 11B:	
THE ORGANIZATION IS PROVIDED A COPY OF ITS 990 AND IT IS A	PPROVED BY THE
BOARD BEFORE IT IS FILED.	
FORM 990, PART VI, SECTION B, LINE 12C:	
BOARD MEMBERS ARE REQUIRED TO SUBMIT A CONFLICT OF INTERES	T 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 INT	EREST 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 HOU	RS 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 or 990-EZ) 2020

## **SCHEDULE R** (Form 990)

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.

Department of the Treasury Internal Revenue Service Name of the organization

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

81-0331313

Part I Identification of Disregarded Entities. Comp	lete if the organization answered "Yes"	on Form 990, Part IV, line 3	3.					
	(b)	(c)	(d)	(e)		(f)		
Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state of foreign country)	or Total inco	me End-of-year	assets		ontrolling ntity	I
Part II Identification of Related Tax-Exempt Organizations during the tax year.	zations. Complete if the organization	answered "Yes" on Form 990	0, Part IV, line 34, t	pecause it had one	or more r	elated tax-exer	npt	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	1	<b>(f)</b> t controlling entity	Section 5 contro	rolled
PARTNERSHIP FOR CHILDREN - 81-0526281							163	NO
PO BOX 8134 MISSOULA, MT 59807	ATTACHMENT BASED TREATMENT PROGRAM	MONTANA	501(C)(3)	LINE 10				х
,								

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

YOUTH HOMES

Schedule R (Form 990) 2020

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)	(1	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total	Share of end-of-year assets	(h) Disproportionate allocations?			General	Percentage
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes N	<u> </u>
	1										
	1										
	1										
	1										
	1										
	1										
	l	l	l	1		l			<u> </u>	$\perp$	

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.

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

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

Yes No

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

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) in	terest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled en	ntity			1a		X	
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)								
g Sale of assets t	o related organization(s)				1g		X	
h Purchase of assets from related organization(s)								
i Exchange of assets with related organization(s)								
j Lease of faciliti	es, equipment, or other assets to related organization(s)				1j		X	
k Lease of faciliti	es, equipment, or other assets from related organization(s)				1k		X	
	services or membership or fundraising solicitations for related or				11	Х		
m Performance of services or membership or fundraising solicitations by related organization(s)								
	ities, equipment, mailing lists, or other assets with related organiz				1n		X	
	employees with related organization(s)				10		Х	
<b>p</b> Reimbursemen	t paid to related organization(s) for expenses				1p		Х	
p Reimbursement paid to related organization(s) for expenses  q Reimbursement paid by related organization(s) for expenses								
•	, , , , , , , , , , , , , , , , , , , ,				1q			
r Other transfer	of cash or property to related organization(s)				1r		Х	
r Other transfer of cash or property to related organization(s)  s Other transfer of cash or property from related organization(s)								
	any of the above is "Yes," see the instructions for information or							
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	<b>(d)</b> Method of determining amount in	volved			
1) PARTNERSH	HIP FOR CHILDREN	L	199,858.	FINANCIAL STATEMENTS				
2) PARTNERSI	PARTNERSHIP FOR CHILDREN Q 3,779. FINANCIAL STATEMENTS							
3)								
4)								
5)								
6)								
6)				Schodula	D (For	n 000	2020	

Schedule R (Form 990) 2020 YOUTH HOMES 81-0331313 Page 4

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) Name, address, and EIN of entity	(b) Primary activity	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec. 501(c)(3) orgs.?  Yes No	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproptionate allocation Yes N	Code V-UBI amount in box 2 of Schedule K-	General of managing partner?  Yes No	(k) r Percentage ownership