

BELLENFANT, PLLC

2919 BERRY HILL DRIVE NASHVILLE, TN 37204

Phone: (615)370-8700 | Fax:

	Acknowledgement and General Information for Entities That File Returns Electronically	2022
Name(s) as shown on return		Employer Identification Number
Entity address	MENT SERVICES INC	**-***0681
3016 NOLENSVI NASHVILLE, TN Thank you for pa		
2. x 990 an electronic sign	ng services were provided by BELLENFANT PLLC	electronically.
	DO NOT SEND A PAPER COPY OF ENTITY'S RETURN OU DO, IT WILL DELAY THE PROCESSING OF THE RE	

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

Α	For the	2022 calend	ar year, or ta	x year beginn	ing		, 2022, a	and endi	ng		, 20
В	Check if a	applicable:	C Name of org	anization YO	UTH ENCOURAGE	SEMENT SERVICES	INC			D Empl	oyer identification number
	Address o	change	Doing busine	ess as							62-0570681
	Name cha								E Telep	hone number	
	nitial retu										(615) 315-5333
	Final retu	ırn/terminated	City or town,	state or province,	country, and ZIP or fore	ign postal code				G Gros	s receipts
	Amended	l return	NASHV	ILLE, TN	37211-2322					\$	1,229,294
	Applicatio	on pending	F Name and a	ddress of principal	officer: VIVA	PRICE			H(a) Is this a	group return	for subordinates? Yes X No
			SAME	AS C ABOV	E				H(b) Are all	subordinat	es included? Yes No
<u>. </u>	Tax-exem	npt status:	501(c)(3)	501(c) () (insert no.)	4947(a)(1) or	527		If "No,"	attach a lis	st. See instructions
J	Website:			COURAGEME	NT.ORG				H(c) Group	exemption	number
K	Form of a	organization: X	Corporation	Trust Ass	ociation Other		L Year of formati	ion: 195	6 м я	State of leg	gal domicile: TN
Pa	rt I	Summar							•		
	1	Briefly descri	ibe the organi	zation's missic	n or most significa	nt activities: YOU'	TH ENCOUP	RAGEMEI	NT SERV	ICES	WAS INCORPORATED
a		AS A NON	PROFIT E	NTITY FOR	THE PURPOSE	OF PROVIDING	PROGRAMS	FOR 1	HE BENI	EFIT (OF INNER CITY
Activities & Governance						PRIMARILY THRO					
Ľ				CHURCHES							,
2	2					rations or disposed of n	nore than 25%	6 of its ne	et assets.		
Ğ	3	Number of vo	oting member	rs of the gover	ning body (Part VI,	line 1a)				3	17
တ္	4		-	_		ody (Part VI, line 1b)				4	17
iţie	5		-	-	-					5	23
Ę	6			s (estimate if n	•	·				6	423
ĕ	7a			`	• /), line 12				7a	0
	b					Part I, line 11				7b	0
									Prior Year		Current Year
	8									5,817	843,842
ne	9		•							,, = :	0
ē	10	-		•	•	d)			1,102	138	4,725
Revenue	11					c, and 11e)				, 505	258,515
_	12				_	, column (A), line 12)			2,149		1,107,082
	13					, , , , ,			2,143	, 100	1,107,002
	14										0
	15					column (A), lines 5-10)					515,179
Expenses			-		olumn (A), line 11e)				- 101	.,090	8,279
ens	1		_		mn (D), line 25)	,					0,213
Ϋ́	17				es 11a-11d, 11f-24e			_	570	,818	555,612
	18	•	•		equal Part IX, colun	•			1,060	•	1,079,070
	19								1,088		28,012
		. 1010.100	o oxponicoo.	Cupi dot mic i				Regir	nning of Curre		End of Year
itso	20	Total assets	(Part X, line 1	6)					3,874		3,874,017
Asse	21		s (Part X, line							,194	97,937
Net Assets or	22				ne 21 from line 20				3,766		3,776,080
	rt II		re Block	oor oddirdorm					3,700	,, ,,,,,,	3,770,000
-	_		_	examined this return	n, including accompanying	ng schedules and statements	, and to the best of	of my knowle	edge and belie	ef, it is	
true,	correct,	and complete. Dec	claration of prepa	rer (other than offic	cer) is based on all infor	mation of which preparer has	any knowledge.				
		VIVA	PRICE								
Sig	n	Signature of office								L Da	te
Her	e e	377378	PRICE, 1	EXECUTIVE	D T D T C T D C T D D						
	•	Type or print nar		EXECUTIVE	DIRECTOR						
		Print/Type pre			Preparer's signature		Date		Check	☐ if	PTIN
Pai	d		LLENFANT	י רים א			08-10-20	123	self-em	_	XXXXX5858
	pare		THE SHULL	BELLENFA	אייי סניכ		pu-10-20		irm's EIN	pioyeu	MANANJOJO
	Only				,						
-50	, J	, Fillis addres	5		RY HILL DRIV	, <u>e</u>			hone no.	61 E	370_8700
Mav	the IRS	S discuss this	return with the		E TN 37204 wn above? See ins	structions					370-8700

Part IV

62-0570681

Yes 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," 1 Х 2 2 Is the organization required to complete Schedule B, Schedule of Contributors? See instructions Х 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to 3 X Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II 4 x 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, 5 assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III Х 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 6 Х 7 Did the organization receive or hold a conservation easement, including easements to preserve open space. 7 the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Х Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes." 8 complete Schedule D. Part III 8 X 9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or 9 Х 10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V 10 Х 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. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 11a Х b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 11b Х c 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 Х 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 e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e Х Did the organization's separate or consolidated financial 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 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 12a **b** Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b x Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 13 Х 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 Х 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 16 Х 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I See instructions 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 **20 a** Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H* 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 Х

Part IV

2) YOUTH ENCOURAGEMENT SERVICES INC Checklist of Required Schedules (continued) 62-0570681

			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		Х
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		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		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		х
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 or any of these persons? If "Yes," complete Schedule L, Part II	26		х
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		х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L,			
	Part IV, instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		x
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		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		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		х
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		х
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		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		х
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		х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and			
	19? Note: All Form 990 filers are required to complete Schedule O	38	х	
Par				
	Check if Schedule O contains a response or note to any line in this Part V			
	· · · · · · · · · · · · · · · · · · ·		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	х	

Pa	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 23			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		x
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		X
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	7		^
	sponsoring organization have excess business holdings at any time during the year?	8		х
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		v
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		x
10	Section 501(c)(7) organizations. Enter:	30		
	Initiation fees and capital contributions included on Part VIII, line 12			
a	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
b 11	Section 501(c)(12) organizations. Enter:	1		
	Gross income from members or shareholders			
a b	Gross income from other sources (Do not net amounts due or paid to other sources	1		
D	against amounts due or received from them.)			
120	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
12a b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	120		
	Section 501(c)(29) qualified nonprofit health insurance issuers.	-		
13	Is the organization licensed to issue qualified health plans in more than one state?	13a		
а	Note: See the instructions for additional information the organization must report on Schedule O.	13a		
h	Enter the amount of reserves the organization is required to maintain by the states in which			
b	the organization is licensed to issue qualified health plans			
•	Enter the amount of reserves on hand	4		
C 1/1a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		v
14a	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14a 14b		X
b 15		140		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	15		,,
	excess parachute payment(s) during the year?	15		Х
16	If "Yes," see the instructions and file Form 4720, Schedule N.	16		٠,
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	10		Х
17	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	······································	-17		
	If "Yes," complete Form 6069.			

62-0570681

YOUTH ENCOURAGEMENT SERVICES INC

1 0	Governance, Management, and Disclosure For each "Yes response to lines 2 through 7b below, and for a N	VO		
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.			
<u></u>	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	ction 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	4		
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain on Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent [1b]	4		
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		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
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		Х
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		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
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		Х
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		X
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 on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
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 on 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	х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		х
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 Tennessee			
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) available for public inspection. Indicate how you made these available. Check all that apply.			
	Own website			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy.			

18	8 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if a	applicable), 990, and 990-T (section 501(c)				
	(3)s only) available for public inspection. Indicate how you made these available. C	heck 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 po						
	and financial statements available to the public during the tax year.					

20 State the name, address, and telephone number of the person who possesses the organization's books and records.

VIVA PRICE (615)315-5333, 3016 NOLENSVILLE PIKE, NASHVILLE, TN 37211-2322

=,	٦rn	n	ac	n	120)22)
-(וונ	11	95	יטו	121	122

YOUTH ENCOURAGEMENT SERVICES INC

2-(

Page 7

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

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

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

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

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.

	3				,			,,.		
				((C)					
(A)	(B)				sition			(D)	(E)	(F)
Name and title	Average	,				nan <mark>one</mark> s both ar		Reportable	Reportable	Estimated amount
	hours					/trustee)		compensation	compensation	of other
	per week							from the organization (W-2/	from related organizations (W-2/	compensation from the
	(list any hours for	or Ind	Ins	of	€	en E	Fo	1099-MISC/	1099-MISC/	organization and
	related	direc	tituti	Officer	(ey employee	jhes iploy	Former	1099-NEC)	1099-NEC)	related organizations
	organizations	tor tr	onal		Coldi	t cor				
	below	Individual trustee or director	Institutional trustee		ee	nper				
	dotted line)	0	tee			Highest compensated employee				
						8				
(1) VIVA PRICE	40.00									
EXECUTIVE DIRECTOR				Х	Х			85,884	0	0
(2) MCKENNA HEALY	1.00									
DIRECTOR		Х						0	0	0
(3) WAMON BUGGS	1.00									
DIRECTOR		Х						0	0	0
(4) GREG WILDER	1.00									
DIRECTOR		х						0	0	0
(5) JERRY COVER	1.00									
DIRECTOR		х						0	0	0
(6) DAVID SCIORTINO	2.00									
PAST PRESIDENT		Х						0	0	0
(7) MARK_WILLOUGHBY	2.00									
PAST PRESIDENT		х						0	0	0
(8) JEANNE G FAIN	1.00									
DIRECTOR		х						0	0	0_
(9) DAVID KARKAU	1.00									
DIRECTOR		х						0	0	0
(10)DEREK HAMBLEN	1.00									
DIRECTOR		х						0	0	0_
(11)BYRON FANNING	1.00									
DIRECTOR		х						0	0	0
(12)BARI_HARWELL_	1.00									
DIRECTOR		х						0	0	0_
(13)LESLIE FISHER	1.00									
DIRECTOR		х						0	o	0_
(14) JOEY HARWELL	1.00									
DIRECTOR		х						0	0	0

EEA

Form 990 (2022) YOUTH ENCOURAGEMENT SERVICES INC 62-0570681 Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) Part VII (C) Position (A) (B) (D) (E) (F) (do not check more than one Name and title Average Reportable Reportable Estimated amount box, unless person is both an hours compensation compensation officer and a director/trustee) compensation from the from related per week organization (W-2/ organizations (W-2/ (list any from the 1099-MISC/ 1099-MISC/ organization and Individual trustee Institutional trustee employee Highest compensated Key employee hours for 1099-NEC) 1099-NEC) related organizations related organizations below dotted line) (15)MARK FULFORD ___2.00 VICE PRESIDENT 0 0 X (16)GREG_ALLEN 2.00 PRESIDENT (17)RICHMOND DONNELLY 2.00 TREASURER Х 0 0 (18)J. ISAAC SANDERS SECRETARY X (20)(21) (25)Total from continuation sheets to Part VII, Section A Total (add lines 1b and 1c) 0 0 85,884 2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 0 Yes No Did the organization list any former officer, director, trustee, key employee, or highest compensated 3 employee on line 1a? If "Yes," complete Schedule J for such individual X For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the 4 organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 4 X Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person 5 Х Section B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A)	(B)	(C)
Name and business address	Description of services	Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization

62-0570681

Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) Total revenue Related or exempt Unrelated Revenue excluded function revenue business revenue from tax under sections 512-514 1a 1a Federated campaigns Membership dues . . 1b Contributions, Gifts, Grants and Other Similar Amounts Fundraising events 1c 1d 1e Government grants (contributions) . . All other contributions, gifts, grants, and similar amounts not included above 1f 843,842 Noncash contributions included in 1g h Total. Add lines 1a-1f 843,842 **Business Code** 2a Program Service Revenue f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) 3,275 3,275 Income from investment of tax-exempt bond proceeds 5 (ii) Personal (i) Real 6a Gross rents 6a 6b **b** Less: rental expenses . . c Rental income or (loss) 6c d Net rental income or (loss) (ii) Other (i) Securities 7a Gross amount from sales of assets other than inventory 7a <u>86,091</u> b Less: cost or other basis Other Revenue 7b and sales expenses 84,641 c Gain or (loss) 1,450 d Net gain or (loss) 1,450 1,450 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 8a 113,342 8b 37,571 c Net income or (loss) from fundraising events 75,771 75,771 9a Gross income from gaming activities, See Part IV, line 19 9a **b** Less: direct expenses 9b c Net income or (loss) from gaming activities 10a Gross sales of inventory, less 10a 10b **b** Less: cost of goods sold c Net income or (loss) from sales of inventory **Business Code** Miscellanous Revenue 11a ERTC INCOME 900099 173,727 173,727 b OTHER INCOME 900099 9,017 9,017 \boldsymbol{d} . All other revenue $\boldsymbol{\dots}$ e Total. Add lines 11a-11d 182,744 12 Total revenue. See instructions 1,107,082 182,744 0 80.496

Part IX

62-0570681

Statement of Functional Expenses

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

Check if Schedule O contains a response or note to any line in this Part IX (A) (D) Do not include amounts reported on lines 6b, 7b, (B) (C) Total expenses Program service Management and Fundraising 8b, 9b, and 10b of Part VIII. expenses general expenses expenses 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 5 Compensation of current officers, directors, 85,884 17,177 68,707 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 305,234 370,666 28,616 36,816 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 23,955 15,747 5,863 2,345 9 24,589 10 34,674 7,269 2,816 11 Fees for services (nonemployees): а b С 25,498 25,498 Lobbying d Professional fundraising services. See Part IV, line 17 8,279 8,279 f Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) 49,307 49,307 12 13 48,773 17,247 30,997 529 14 7,402 5,123 1,950 329 15 16 72,219 68,014 4,205 17 303 246 57 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings . . 20 21 Depreciation, depletion, and amortization 22 121,523 121,523 Insurance 23 64,116 44,059 20,057 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) BANKING FEES 273 222 51 PROGRAM MATERIALS 113,193 111,807 1,386 С REPAIRS AND MAINTENANCE 43,049 43,049 d **VEHICLES** 574 9,956 9,382 All other expenses 25 **Total functional expenses.** Add lines 1 through 24e 1,079,070 832,726 195,230 51,114 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here following SOP 98-2 (ASC 958-720)

62-0570681

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part X			
			(A)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing	744,614	1	755,305
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	53,926	4	28,160
	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	
Ø	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
As	9	Prepaid expenses and deferred charges		9	4,997
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 3,614,759			
	b	Less: accumulated depreciation	2,945,183	10c	2,974,016
	11	Investments - publicly traded securities	130,454	11	111,539
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	3,874,177	16	3,874,017
	17	Accounts payable and accrued expenses	33,354	17	36,577
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ies	22	Loans and other payables to any current or former officer, director,			
ilit		trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities		controlled entity or family member of any of these persons		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties	73,840	24	61,360
	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	107,194	26	97,937
S		Organizations that follow FASB ASC 958, check here			
JCe	07	and complete lines 27, 28, 32, and 33.		07	
alaı	27	Net assets without donor restrictions Net assets with donor restrictions	3,656,983	27	3,514,379
B	28	_	110,000	28	261,701
ŭ		Organizations that do not follow FASB ASC 958, check here			
۲F	20	and complete lines 29 through 33.		20	
ts c	29	Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund		29 30	
sse	30 31	Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds		31	
Net Assets or Fund Balances	32	Total net assets or fund balances	2 766 002	32	2 776 000
Re	33		3,766,983	33	3,776,080
		Total liabilities and net assets/fund balances	3,874,177	55	3,874,017

Form	990 (2022) YOUTH ENCOURAGEMENT SERVICES INC	62-057	70681		Pa	.ge 1
Pai	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		1,1	07,	082
2	Total expenses (must equal Part IX, column (A), line 25)	. 2		1,0	79,	070
3	Revenue less expenses. Subtract line 2 from line 1				28,	012
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	. 4		3,7	66,	983
5	Net unrealized gains (losses) on investments	. 5		(18,	915
6	Donated services and use of facilities	. 6				
7	Investment expenses	. 7				
8	Prior period adjustments	. 8				
9	Other changes in net assets or fund balances (explain on Schedule O)	. 9				0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	. 10		3,7	76,	080
Pai	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>				
			_	\	Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on					
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2	2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or					
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		2	2b	х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a					

required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits

Form 990 (2022)

Both consolidated and separate basis

х

х

За

separate basis, consolidated basis, or both:

Consolidated basis

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

If the organization changed either its oversight process or selection process during the tax year, explain on

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the

X Separate basis

Schedule O.

SCHEDULE A (Form 990)

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.

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization Attach to Form 990 or Form 990-EZ.

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

on. Inspection
Employer identification number

YOUTH ENCOURAGEMENT SERVICES INC 62-0570681 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 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 university: 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.) 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**. An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of 12 one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, C its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Typ 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 organization (iii) Type of organization (iv) Is the organization (v) Amount of monetary (vi) Amount of (described on lines 1-10 listed in your governing support (see other support (see above (see instructions)) document? instructions) instructions) Yes Nο (A) (B) (C) (D) (E)

Total

TIM 990) 2022 YOUTH ENCOURAGEMENT SERVICES INC 62-0570681
Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (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.)

	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	345,267	432,302	3,037,454	896,817	843,842	5,555,682
2	Tax revenues levied for the						
	organization'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	345,267	432,302	3,037,454	896,817	843,842	5,555,682
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4 •						5,555,682
	on B. Total Support	i					
	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	345,267	432,302	3,037,454	896,817	843,842	5,555,682
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties, and income from						
_	similar sources	1,835	692	406			2,933
9	Net income from unrelated business						
	activities, whether or not the business						
	is regularly carried on						
10	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)	128,394	130,353	120,104			378,851
11	Total support. Add lines 7 through 10	/ ! !				40	5,937,466
12	Gross receipts from related activities, etc.					12	0)
13	First 5 years. If the Form 990 is for the org						
Cooti	organization, check this box and stop here on C. Computation of Public Suppor					<u> </u>	· · · · · · <u> </u>
				11 column (f))		14	9/
14 15						15	93.57 %
15 16a	Public support percentage from 2021 Sch 33 1/3% support test - 2022. If the organize						90.77 %
10a	box and stop here . The organization quali						
b	33 1/3% support test - 2021. If the organization						
U	this box and stop here. The organization of						_
17a	10%-facts-and-circumstances test - 202	•		-			
174	10% or more, and if the organization meets	_					
	Part VI how the organization meets the fac				-	•	
	organization			-	•		
b	10%-facts-and-circumstances test - 202						
b	15 is 10% or more, and if the organization	_					
	in Part VI how the organization meets the					-	•
	organization			-	•		
18	Private foundation. If the organization did						
.0	instructions						
	mondono riiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	<u> </u>	<u> </u>				<u> </u>

62-0570681

(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.)

Section A Public Support

Secu	on A. Fublic Support						
Calen	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000		4				
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included on line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First 5 years. If the Form 990 is for the org	•			,	()	` ′ _
	organization, check this box and stop her						
	on C. Computation of Public Suppo					1 1	
15	Public support percentage for 2022 (line 8			. , ,		15	%
16	Public support percentage from 2021 Sch					16	%
	on D. Computation of Investment In				(6)	1 4-1	
17	Investment income percentage for 2022 (li		• •			17	%
18	Investment income percentage from 2021					18	%
19a	33 1/3% support tests - 2022. If the organ						_
_	17 is not more than 33 1/3%, check this bo	-	_				nization [
b	33 1/3% support tests - 2021. If the organization						_
	line 18 is not more than 33 1/3%, check this box a	•					· · · · · · ·
20	0 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions						

Schedule A (Form 990) 2022 EEA

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- 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 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.
- 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).
 - **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?
- 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).
- B Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI**.
 - **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in Part VI*.
- **c** Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in Part VI.*
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 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		
	2		
	За		
t			
	3b		
3)			
	3с		
	4a		
	-iu		
	4b		
	4c		
	5a		
	эa		
	5b		
	5c		
	6		
	7		
	_		
	8		
	9a		
	9b		
	35		
	9с		
	10a		
odii	10b	orm 00	0) 2022

EEA Schedule A (Form 990) 2022

62-0570681

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

3b

(see instructions).

Schedu	e A (Form 990) 2022 YOUTH ENCOURAGEMENT SERVICES INC		62-0570	681 Page 6
Part	71 7 7 7 7 11 0 1			
1	\square Check here if the organization satisfied the Integral Part Test as a qualifying \square		. ,	,
	instructions. All other Type III non-functionally integrated supporting organiz	zatio	ns must complete Sections	A through E.
Sect	on 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	on 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):	Φ.		
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	on C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	lly ir	ntegrated Type III supportin	g organization

EEA Schedule A (Form 990) 2022

Excess from 2022

. . . .

Part	v Type III Non-Functionally integrated 509(a)(3	() Supporting Organi	zations (continue	<u>a)</u>	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish ex	xempt purposes		1	
2	Amounts paid to perform activity that directly furthers exen				
	organizations, in excess of income from activity	2			
3	Administrative expenses paid to accomplish exempt purpo	ses of supported organ	zations	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required) -	provide details in Part \	/I)	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 organization is resp	onsive		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2022	ıs	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022				
	(reasonable cause required - explain in Part VI). See				
	instructions.				
3	Excess distributions carryover, if any, to 2022				
а	From 2017				
b	From 2018				
С	From 2019				
d	From 2020				
е	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2022 distributable amount				
ī	Carryover from 2017 not applied (see instructions)				
Ť	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from				
-	Section D, line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2022 distributable amount				
C	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if				
•	any. Subtract lines 3g and 4a from line 2. For result				
	greater than zero, <i>explain in Part VI</i> . See instructions.				
6	Remaining underdistributions for 2022. Subtract lines 3h				
Ū	and 4b from line 1. For result greater than zero, <i>explain in</i>				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j				
1					
0	and 4c.				
8	Breakdown of line 7:				
a	Excess from 2018				
b	Excess from 2019				
C	Excess from 2020				
d	Excess from 2021				

EEA Schedule A (Form 990) 2022

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

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

Inspection Employer identification number

YOUTE	ENCOURAGEMENT SERVICES INC		62-0570681					
Pa	Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.							
Complete if the organization answered "Yes" on Form 990, Part IV, line 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	vriting that the assets held in donor advised						
-	funds are the organization's property, subject to the organizati	_						
6	Did the organization inform all grantees, donors, and donor a							
•	only for charitable purposes and not for the benefit of the done							
	conferring impermissible private benefit?		Yes No					
Par			111111111111111111111111111111111111111					
	Complete if the organization answered "Yes" of	on Form 990 Part IV line 7						
1	Purpose(s) of conservation easements held by the organization							
•	Preservation of land for public use (for example, recreation		nistorically important land area					
	Protection of natural habitat		ertified historic structure					
	Preservation of open space	Freservation of a c	ertilled historic structure					
2			anaan satian					
2	Complete lines 2a through 2d if the organization held a qualifi	ed conservation contribution in the form of a c	Held at the End of the Tax Year					
	easement on the last day of the tax year. Total number of conservation easements							
a								
b	Total acreage restricted by conservation easements							
C	Number of conservation easements on a certified historic stru		2c					
d	Number of conservation easements included in (c) acquired a		1					
	historic structure listed in the National Register		· · · · · · · · · · · · · · · · · · ·					
3	Number of conservation easements modified, transferred, release	eased, extinguished, or terminated by the orga	anization during the					
_	tax year							
4	Number of states where property subject to conservation eas							
5	Does the organization have a written policy regarding the peri		П., П.,					
_	violations, and enforcement of the conservation easements it							
6	Staff and volunteer hours devoted to monitoring, inspecting, h	andling of violations, and enforcing conservat	ion easements during the year					
_								
7	Amount of expenses incurred in monitoring, inspecting, handle	ing of violations, and enforcing conservation e	easements during the year					
_								
8	Does each conservation easement reported on line 2(d) above							
_								
9	In Part XIII, describe how the organization reports conservation							
	balance sheet, and include, if applicable, the text of the footnot	te to the organization's financial statements the	nat describes the					
Dow	organization's accounting for conservation easements.	of Art Historical Transcures or O	they Cimilay Accets					
Par			uner Similar Assets.					
	Complete if the organization answered "Yes" o		de constant de la con					
1a	If the organization elected, as permitted under FASB ASC 958							
	of art, historical treasures, or other similar assets held for pub		rance of public					
	service, provide in Part XIII the text of the footnote to its finance		ht					
b	If the organization elected, as permitted under FASB ASC 958	•						
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furtheran	ice of public service,					
	provide the following amounts relating to these items:		•					
	(i) Revenue included on Form 990, Part VIII, line 1		· · · · · · ·					
	(ii) Assets included in Form 990, Part X							
2	If the organization received or held works of art, historical trea		n, provide the					
	following amounts required to be reported under FASB ASC 9	S .						
а	Revenue included on Form 990, Part VIII, line 1							
b	Assets included in Form 990, Part X		\$					

3 Using the organizations acquisitions, accession, and other records, check any of the following that make significant use of its collection terms (check all that apply): a Public exhibition B Scholarly research B Check Check	Par	Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)								
collection terms (check all that apply): a	3								,	,
a Public exhibition d Cam or exchange program b Scholarly research e Other C Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year. did the organization solicit or receive donations of art, historical treasures, or other similar assists to be sole to raise kinds rather than to be maintained as part of the organization's collection? Yes No Part VI Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21, in a 1st heoryanization and part, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X Ind 21 Line Lin					•	· ·	ŭ			
b Scholarly research c Gother C Perovide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII S During the year, did the organization's collections and explain how they further the organization's exempt purpose in Part XIII S During the year, did the organization solicit or receive donations of art, historical treasures, or other similar seasets to be sold to raise funds rather than to be maintained as part of the organization's collection?	а			d	Loan o	r exchange p	rogram			
c Presentation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assests to be sold to raise funds after than to be maintained as part of the organization's collection?	b	一		е	_	0 1	J			
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assests to be soid to traise funds rather than to be maintained as part of the organization's collection?										
Soluting the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization? Ves No No Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. It is the organization an answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. It is the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21, line 21, line 21, line 31, line	4		tions and explain	how they f	urther the	organization's	exempt	purpose in Part		
5 During the year, did the organization solicit or receive donations of art, historical freasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV Escrow and Custodial Arrangements. Complete If the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, inusiee, outstodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. b If "Yes," explain the arrangement in Part XIII and complete the following table: c Beginning balance c Beginning balance d Adottors during the year 1 In I I I I I I I I I I I I I I I I I I				,		J				
Part IV Escrow and Custodial Arrangements.	5	During the year, did the organization solicit or red	ceive donations of	f art, histor	ical treasu	es, or other s	similar			
Part IV Escrow and Custodial Arrangements.		3 , ,		•		,			Yes	□ No
Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, frustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X! II and complete the following table: Beginning balance	Par				J					
990, Part X, line 21. Is its the organization an agent, fursitee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Ves No										
Included on Form 990, Part X?										
Included on Form 990, Part X?	1a	Is the organization an agent, trustee, custodian of	or other intermedia	ary for con	tributions o	r other asset	s not			
b If "Yes," explain the arrangement in Part XIII and complete the following table: Amount									Yes	No
Additions during the year 1d	b	·	complete the follo	owing table	e:				_	_
Beginning balance 1c		, .		9				A	mount	
d Additions during the year 1d 1e	С	Beginning balance					. 1c			
e Distributions during the year f Ending balance 2 Did the organization include an amount on Form 990, Part X, line 21, for escrow or dustodial account liability?	d									
Ending balance 1										
Did the organization include an amount on Form 990, Part X, line 21, for escrow or dustodial account liability?	f									
Description of pear XIII Check here if the explanation has been provided on Part XIII Part V Endowment Funds.	2a	•			_			·	· · Yes	No
Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.	b	-					-		.	. П
1a Beginning of year balance 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 1										
110,000		Complete if the organization an	swered "Yes"	on Form	n 990, P	art IV, line	10.			
18 Beginning of year balance			(a) Current year	(b) Pri	or year	(c) Two years	s back	(d) Three years bac	k (e) Four	years back
b Contributions	1a	Beginning of year balance	110,000	11	10,000	110	,000	110,00	0 1	10,000
d Grants or scholarships	b		- ,				,			,
d Grants or scholarships	С	Net investment earnings, gains, and								
e Other expenditures for facilities and programs										
e Other expenditures for facilities and programs	d	Grants or scholarships								
programs	е	· · · · · · · · · · · · · · · · · · ·								
f Administrative expenses g End of year balance 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,000 110,00		•								
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment % b Permanent endowment	f									
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment	q		110.000	11	10.000	110	.000	110.00	0 1	10.000
a Board designated or quasi-endowment b Permanent endowment c Term endowment		· · · · · · · · · · · · · · · · · · ·					, , , , ,		<u> </u>	
b Permanent endowment% The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations				(- 3, -	(//					
c Term endowment	_									
The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations										
Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations (iii) Related organizations (iii) Reservices 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 (other) (investment) (investment) (other) (other) (d) Book value depreciation 1 Land 106, 236 b Buildings 3, 271, 134 548, 372 2, 722, 762 c Leasehold improvements d Equipment 4 Equipment 6 Other 7 STMD1E 121, 746 58, 203 63, 543	_		egual 100%.							
Organization by: (i) Unrelated organizations Sa(i)	3a		•	ion that ar	e held and	administered	for the			
(i) Unrelated organizations			.							Yes No
(ii) Related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 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 (other) (investment) (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value (d) Book value (d) Book value 106, 236 b Buildings 106, 236 c Leasehold improvements d Equipment 115, 643 34, 168 81, 475 e Other 121, 746 58, 203 63, 543									3a(i)	
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 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 (other) (investment) (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 106,236 b Buildings 106,236 c Leasehold improvements d Equipment 115,643 34,168 81,475 e Other 121,746 58,203 63,543										
4 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 (other) (investment) (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 106, 236 b Buildings 106, 236 548, 372 2, 722, 762 c Leasehold improvements d Equipment 115, 643 34, 168 81, 475 e Other 121, 746 58, 203 63, 543	b	. ,								
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 106,236 106,236 106,236 b Buildings 3,271,134 548,372 2,722,762 c Leasehold improvements 115,643 34,168 81,475 e Other STMD1E 121,746 58,203 63,543	4		•							
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 (other) (b) Cost or other basis (c) Accumulated depreciation 106,236 b Buildings	Par									
Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation										
Ia Land (investment) (other) depreciation b Buildings 106,236 106,236 c Leasehold improvements 3,271,134 548,372 2,722,762 c Leasehold improvements 115,643 34,168 81,475 e Other STMD1E 121,746 58,203 63,543										
b Buildings 3,271,134 548,372 2,722,762 c Leasehold improvements 115,643 34,168 81,475 e Other STMD1E 121,746 58,203 63,543					· ,		` '		(:/ =30.	
b Buildings 3,271,134 548,372 2,722,762 c Leasehold improvements 115,643 34,168 81,475 e Other STMD1E 121,746 58,203 63,543	1a	Land				106,236			1	06,236
c Leasehold improvements 115,643 34,168 81,475 e Other 57MD1E 121,746 58,203 63,543	_							548.372		
d Equipment 115,643 34,168 81,475 e Other 58,203 63,543		· ·			"	,		0.0,0.2		, .
e Other STMD1E. 121,746 58,203 63,543	_	'				115.643		34,168		81.475
			orm 990, Part X.	column (B)					2.9	

١				
	Part VII	Investments -	 Other Sed 	curities.

	Complete if the organization answered "Yes" on For	m 990, Part IV, line	e 11b. See Form 990, Part X, line 12.
	(a) Description of security or category	(b) Book value	(c) Method of valuation:

(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. (Column (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
	15 222 5 1 1 (5) 11 12		

Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) Book value
(1) Federal incon	ne taxes	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) mi	ust equal Form 990, Part X, col. (B) line 25.)	

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

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1 1,194,339 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: 2a (18, 915)2b 106,172 2c d Other (Describe in Part XIII.) 2d Add lines 2a through 2d 87,257 3 Subtract line 2e from line 1 1,107,082 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 4a Other (Describe in Part XIII.) Add lines 4a and 4b 4c Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 1,107,082 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements 1,185,242 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: 106,172 2h Other (Describe in Part XIII.) 2d Add lines 2a through 2d 2e 106,172 3 Subtract line 2e from line 1 1,079,070 Amounts included on Form 990. Part IX. line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) c Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 1,079,070 Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information. 01. Footnote for uncertain tax position under FIN 48 (Part X) THE ORGANIZATION HAS EVALUATED ITS TAX POSITIONS IN ACCORDANCE WITH THE CODIFICATION STANDARD RELATING TO ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES. THE ORGANIZATION BELIEVES THAT IT HAS TAKEN NO UNCERTAIN TAX POSITIONS

SCHEDULE G (Form 990)

Department of the Treasury

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

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 ENCOURAGEMENT SERVICES INC 62-0570681 Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations а Solicitation of non-government grants b ☐ Internet and email solicitations Solicitation of government grants Phone solicitations Special fundraising events d In-person solicitations 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (iii) Did fundraiser have (vi) Amount paid to (iv) Gross receipts (i) Name and address of individual (or retained by) custody or control of (or retained by) (ii) Activity from activity or entity (fundraiser) fundraiser listed in contributions? organization col. (i) Yes No 1 3 4 5 6 8 9 10 Total List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming col. (a) through col. (c)) bingo/progressive bingo 1 Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes Rent/facility costs 5 Other direct expenses Yes Yes Yes 6 Volunteer labor Direct expense summary. Add lines 2 through 5 in column (d) Net gaming income summary. Subtract line 7 from line 1, column (d) Enter the state(s) in which the organization conducts gaming activities: Is the organization licensed to conduct gaming activities in each of these states? If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?

Schedule G (Form 990) 2022 EEA

If "Yes," explain:

SCHEDULE O (Form 990)

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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Employer identification number

YOUTH ENCOURAGEMENT SERVICES INC 62-0570681 01. Form 990 governing body review (Part VI, line 11) FORM 990 IS REVIEWED BY THE BOARD AT THE REGULAR BOARD MEETING PRIOR TO THE FILING OF FORM THE TREASURER CONDUCTS THE REVIEW 02. Conflict of interest policy compliance (Part VI, line 12c) AND COMMITTEE MEMBERS REVIEW THE CONFLICT OF INTEREST BOARD MEMBERS, PRINCIPAL OFFICERS, POLICY ANNUALLY AND SIGN AN AFFIRMATION DOCUMENT 03. CEO, executive director, top management comp (Part VI, line 15a) COMPENSATION IS REVIEWED ANNUALLY BY THE EXECUTIVE COMMITTEE AND THE BOARD. AT COMPENSATION OF PEER REASONABLENESS OF COMPENSATION IS DETERMINED BY LOOKING ORGANIZATIONS AND OBTAINING INPUT FROM CONSULTANTS 04. Other officer or key employee compensation (Part VI, line 15b COMPENSATION IS REVIEWED ANNUALLY BY THE EXECUTIVE COMMITTEE AND THE BOARD. THE REASONABLENESS OF COMPENSATION IS DETERMINED BY LOOKING AT COMPENSATION OF PEER ORGANIZATIONS AND OBTAINING INPUT FROM CONSULTANTS O5. Governing documents, etc, available to public (Part VI, line 19) THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE DURING THE YEAR UPON REQUEST AT THE ADMINISTRATIVE OFFICE

FOR YOUR RECORDS ONLY Federal Supporting Statements	2022 PG01
Name(s) as shown on return	Tax ID Number
YOUTH ENCOURAGEMENT SERVICES INC	62-0570681

FORM 990 - SCHEDULE D - PART VI - LINE 1E INVESTMENTS - OTHER

STATEMENT #D1E

DESCRIPTION OF INVESTMENT				BOOK VALUE	
LAND IMPROVEMENTS VEHICLES	0	8,671 197,716	8,671 117,157	0 80,559	
TOTAL	0	206,387	125,828	80,559	



990	Overflow Statement (This page is not filed with the return. It is for your records only.)	2022 Page 1
Name(s) as shown on return	(This page is not mod with the rotality it is not your root-de only.)	FEIN
YOUTH ENCOURA	GEMENT SERVICES INC	62-0570681
Description		Amount
SUPPLIES		1: \$ 2,324 1: \$ 17,247
	1004	1. Y1/23/
escription		Amount
	CTIVITIES	
XPENSES		7,009
SUPPLIES	mot a	20,586 1: \$ 30,997
	Tota	1: \$ <u>30,997</u>
escription		Amount
FFICE SUPPLI	ES	\$ 529
	Tota	\$ 529 1: \$ 529
Description LAND IMPROVEM		Amount
JEHICLES	ENIS	\$ 8,671 113,075
	Tota	1: \$121,746
escription		Amount
EHICLES		\$ 17,015
	Total	1: \$ <u>17,015</u>
escription		Amount
AND IMPROVEM	ENTS	\$ 8,671
VEHICLES	m.t.	32,517
	Tota	1: \$41,188

Form 990 Worksheet

Schedule A, Line 5 - Excess 2% Limitation Contributors

(This page is not filed with the return. It is for your records only.)

2022

Name(s) as shown on return

YOUTH ENCOURAGEMENT SERVICES INC

Tax ID Number 62-0570681

2% of the amount on Schedule A, Part II, line 11, column (f)

118,749

Name	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total	(g) Excess contributions
Name	2010	2019	2020	2021	2022	iotai	
							(col. (f) minus
DAVID & KATHY STEWART	5,000	l 5,000	10,000	10,000	10,000	40,000	the 2% limitation)
M&W LOGISTICS GROUP INC	5,000	15,000	25,000	30,000	10,000	75,000	
ANN & MICHAEL ROBERTS	12,528	12,876	12,576		12,576	•	
JAMES AND HEATHER LODEN	•	•			12,576	•	
	5,000		5,000			15,000	
DOUG & KELLY BERRY		5,000	6 000	5,000	7 500	10,000	
JOHN BOUCHARD & SONS		6,000		10,700	7,500	•	
GREG & ANGELA ALLEN		6,180	12,500	5,000	18,150		
MARK & LAURA WILLOUGHBY		8,214		5,688		13,902	
STEPHEN & AMANDA JERKINS			5,250	6,000		11,250	
DIANA YELTON			8,000	15,000	9,000	32,000	
BARCLAY AND LESLIE FISHER				5,000	6,000	11,000	
DAVID SCIORTINO	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			10,000	10,000	20,000	
MIKE & BETH MCFARLIN					5,000	5,000	
TY & NANCY OSMAN					5,000	5,000	
THOMAS & SALLY SCHUMPERT					5,000	5,000	
INGRAM INDUSTRIES					6,000	6,000	
DONALD & CHRISTINE PORTELL					6,000	6,000	
CALLIE NEILAND					6,870	•	
TRENT WITHROW					11,000	•	
WILLIAM LASSITER					17,323		
JOEY & BARI HARWELL					26,052	26,052	

ТОТАТ.