Form **990**

Return of Organization Exempt From Income Tax

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

2020

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

		OCCO I I I		www.irs.gov/Form990 for instruc					inspection	
		-	ear, or tax year begii		, 2020, a	and endir			, 20	
	heck if a	pplicable:	C Name of organizationCI	RIST IN YOUTH INC				D Employer identification number		
=	ddress c	hange	Doing business as			1			43-1303328	
<u> </u>	lame cha	ange	Number and street (or F	O. box if mail is not delivered to street address	ss)	Room/suit	te	E Telep	hone number	
	nitial retu	rn	2201 N MAIN S	r					(417)781-2273	
F	inal retur	n/terminated	City or town, state or pro	ovince, country, and ZIP or foreign postal code	e			G Gros	s receipts	
	mended	return	JOPLIN, MO 64	801				\$	6,959,255	
	pplicatio	n pending	F Name and address of pr	incipal officer:			H(a) Is this a g	roup return	for subordinates? Yes X No	
							H(b) Are all s	ubordinat	es included? Yes No	
1 1	ax-exem	pt status: X 501	(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or	527		If "No," a	attach a lis	st. See instructions	
	Vebsite:		EW.CIY.COM	/ (22 2 2 /)			H(c) Group e			
		rganization: X Corp		sociation Other ►	L Year of format	tion: 198			gal domicile: MO	
Pa		Summary	poration riust As	GUIET P	L real of forma	110m. 1 70	<u> </u>	nate or reg	gai domicile. PIO	
·u	1		the organization's miss	sion or most significant activities:	CUDICTIAN D	EVET OD	иемт ∩е	VOIIT	H AND LEADERS	
	'	briefly describe t	the organizations mis	sion of most significant activities.	CHRISTIAN DI	CAETOLI	MENI OF	1001	H AND LEADERS	
ø										
anc										
ern										
Activities & Governance	2			n discontinued its operations or disp				1	I	
യ ഷ	3		-	0 , (, ,					12	
Se	4		_	rs of the governing body (Part VI, li					11_	
įį	5	Total number of	individuals employed i	n calendar year 2020 (Part V, line 2	2a)			5	103	
cţi	6	Total number of	volunteers (estimate if	necessary)				6		
٩	7a	Total unrelated b	ousiness revenue from	Part VIII, column (C), line 12				7a	0_	
	b	Net unrelated bu	usiness taxable income	e from Form 990-T, Part I, line 11.				7b	0	
							Prior Year		Current Year	
	8	Contributions and	d grants (Part VIII, line	e1h)			975	,627	3,058,361	
ē	9			e 2g)			19,821		2,894,531	
Revenue	10	-	•	A), lines 3, 4, and 7d)				,165	2,490	
ě	11			nes 5, 6d, 8c, 9c, 10c, and 11e) .				,565	1,003,873	
ш.	12			(must equal Part VIII, column (A), li			20,856		6,959,255	
	13			IX, column (A), lines 1-3)	•		20,030	,001	0,333,233	
	14			X, column (A), line 4)					0	
	15			e benefits (Part IX, column (A), line			4,815	000	4 057 200	
S							4,815	,090	4,057,299	
Expenses			= :	column (A), line 11e)					0	
ç		•	expenses (Part IX, co	· · · · · · · · · · · · · · · · · · ·	331,183					
Ú	17			,		· -	16,215		2,573,848	
				t equal Part IX, column (A), line 25)			21,031		6,631,147	
	19	Revenue less ex	penses. Subtract line	18 from line 12				,342)	328,108	
26							ning of Curre		End of Year	
Net Assets or Find Balances	20	,	,			•	5,804		4,311,941	
AS	21	Total liabilities (F	. ,			٠	3,768	,546	1,948,117	
				t line 21 from line 20			2,035	, 716	2,363,824	
Pa	rt II	Signature I	Block							
				urn, including accompanying schedules and si ficer) is based on all information of which prep			ledge and beli	ef, it is		
	0011001, 0	and complete. Declarati	ion or proparer (other than or	noor, to based on all information of which prop	Jarof flas any knowledge.					
		MARK HA	AND							
Sig	n	Signature of o	officer					Da	te	
Her	е	MARK HA	AND, VICE PRES	IDENT						
		Type or print i	name and title							
	-	Print/Type preparer	r's name	Preparer's signature	Date		Check	if	PTIN	
Paid	t	William B	Miller CPA	William B Miller CPA	11-15-20	021	self-emp	_	P01252504	
	, parer			iller CPA LLC	F1 10 20		rm's EIN ▶	,	10110101	
	Only			Main Street			hone no.			
-36	- Oilly	i iiii s auuless		ty MO 64870			IIUI IIU.	417	674_1212	
May	the IDG	discuss this ratu		hown above? (see instructions)				41/-	674-1213 X Yes No	

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Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
_	complete Schedule A	1	х	
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> See instructions?	2		Х
3	candidates for public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II			
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	4		Х
,	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		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			
	"Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	_		
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	9		Х
10	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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	х	
b				
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
a	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		v
е	Did the organization report an amount for other liabilities in Part X, line 25? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11e		x
f	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		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	x	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	х	
b	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	46		
10	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
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
_U u		20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х

Form	990 (2020) CHRIST IN YOUTH INC 43-1303	328	F	Page
Pa	rt IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	. 22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	. 23		x
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete 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		† <u></u>
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			1
·	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		+
		. 240		1
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	. 25a		3.5
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	. <u>25a</u>		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	. 25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member or any of these persons? If "Yes," complete Schedule L, Part II	. 26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	. 27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part			
	IV instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	. 28a	x	
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	. 28b	х	
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			1
	"Yes," complete Schedule L, Part IV	. 28c	x	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M			х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
00	conservation contributions? If "Yes," complete Schedule M	. 30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If</i> "Yes," <i>complete Schedule N, Part I</i>			
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes,"</i>	·		Х
32		22		
22		. 32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	. 33		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			Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	. 35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	. 35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? 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 in 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
1 2	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	2		

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	33			
b	Enter the number of Form W-2G included in line 1a. Enter -0- if not applicable	1b	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and					
	reportable gaming (gambling) winnings to prize winners?		 	1c		x

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

28 Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, Rick of the calculatory vary anding with or within the year occored by this return b If a least one is reported on line 2a, cid the organization file all required federal employment tax returns? Note: If the sum of lines 1 and 2a is granter than 250, you may be required to e-file (see instructions). 30 Old the organization have unrelated business gross income of \$1,000 or more during the year? 31 If "Yes," sha if lited a Form 9801 of the tiles or provided and the comparization for the year? If "Yo" is line 3b, provide an explanation on Schedule O. 32 At any time during the celeradar year, did the organization have an interest in, or a signature or other authority over, of interaction account in a foreign country. 43 At any time during the celeradar year, did the organization have an interest in, or a signature or other authority over, of interaction account or provided the schedule of the celeration and the organization for the provided country to the celeration and the schedule of the celeration and the schedule of the celeration and the celegation and t				Yes	No
b If a least one is reponded on line 2s, did the organization file all required feederid employment tax returns? Note: If the sum of lines 1s and 2s is greatest that 250, you may be required to e-file (see instructions). 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3b If "Yes," has it filed a form 990-17 for low file 30, provide an explanation on Schodule 0. 3b If "Yes," and it for during the calendary year, old 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 If ye if ye if ye if ye if ye in the first of the first organization and provide of the first of year. 5b If "Yes," sing it is a provided to the regardation that it was or is a party to a provibiled tax shelter transaction. 5c If Yes is 10 les 6 or 5b, did the organization that If was or is a party to a provibiled tax shelter transaction. 5c If Yes is 10 les 6 or 5b, did the organization that If was or is a party to a provibiled tax shelter transaction. 5c If Yes is 10 les 6 or 5b, did the organization that If was or is a party to a provibiled tax shelter transaction. 5c If Yes is 10 les 6 or 5b, did the organization that If wear or is a party to a provibiled tax shelter transaction. 5c If Yes is 10 les 6 or 5b, did the organization that If wear or is a party to a provibiled tax shelter transaction. 5c If Yes is 10 les 6 or 5b, did the organization that If wear or is a party to a provibiled tax shelter transaction. 5c If Yes is 10 les 6 or 5b, did the organization that weary solicitation an express statement that such contributions or gifts were not tax deductibles a charibate contributions? 5c If Yes is 10 les 6 or 5b, did the organization received and party and a contribution and party for goods and services provided to the payor? 5c If Yes is 10 les 6 or 5b, did the organization received and payor that were secured to the goods or services pro	2 a				
Note: If the sum of lines 1s and 2s is greater than 250, you may be required to e-file (see instructions). 3		Statements, filed for the calendar year ending with or within the year covered by this return 2a 103			
3a Dit the organization have unrelated business gross income of \$1,000 or more during the year; bit 11 **es*, "Name titled a Form 9007 for this year /1 **Nor 5 file 88, provide an explanation on Schedule O. bit 11 **es*, "North 11 **es*," "North 11 **es*, "North 11 **es*," "North 11	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
b If Yes, "has it flied a Form 90c-T for this year? If "No" is line 48, provide an explanation on Schedule O		Note : If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
4a A army time during the calendary year, did the organization have an interest in, or a signature or other authority over, a financial account in a frozing country (such as a bank account, sectivities account, or other financial accounts (FBAR). 5b If "Yes," enter the name of the foreign country 5b Was the organization of the property of the pro	3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		х
a financial account in a foreign country (such as a bank account, securities account, or other financial account)? by it 1'Yes; a tent than ame of the foreign country. ► See instructions for filling 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? 5b Did any taxable party notify the organization tills the vasor is a party to a prohibited tax shelter transaction? 5c Did have the organization than a mural gross receipts that are normally greater than \$100,000, and did the organization include with every solicitation an express statement that such contributions or gilts were not tax deductible? 6c Did the organization than than y receive deductible contributions under section 170(c). 6c Did the organization than any receive deductible contributions under section 170(c). 6c Did the organization than any receive deductible contributions under section 170(c). 6c Did the organization notify the dorn of the value of the goods or services provided? 7c Organizations and services provided to the payor? 7d Did the organization neceive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7d Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7d Did the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7d Did the organization received a contribution of qualified inhelicutual property, did the organization file Form 8282 required to 1 for the organization file Form 8282 required to 1 for the organization file Form 8282 required to 1 for the organization file Form 8282 required to 1 for the organization file Form 8282 required to 1 for the organization file Form 8282 required to 1 for the organization file Form 8282 required to 1 for the sponsoring organization for years, payments for indirectly, to pay premiums on a personal be	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		
b If "Yes," enter the name of the foreign country \times See instructions for filling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 58 Was the organization aparty to a prohibited tax shelter transaction? 59 Was the organization in the organization life from 8866*7. 60 Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization life from 8866*7. 61 Pres* (in the organization have annual gross receipts that are normally greater than \$100,000, and did the organization include with every solicitation an express statement that such contributions or grist were not tax deductible as charitable contributions? 62 If "Yes," did the organization include with every solicitation an express statement that such contributions or grist were not tax deductible on that deductions that may receive deductible contributions under section 170(c). 63 Did the organization stem may receive deductible contributions under section 170(c). 64 Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided or the payor? 65 To Did the organization notify the donor of the value of the goods or services provided? 66 Did the organization notify the donor of the value of the goods or services provided? 76 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 77 To Did the organization receive any funds, directly or indirectly, on a personal benefit contract? 78 To Did the organization received a contribution of qualified intellectual property, did the organization flee and a contribution of qualified intellectual property, did the organization flee and payment of the payment of the organization flee as Form 1088-02 7. 79 To Did the organizations make any taxashide intellectual property did the organization flee and payment of the	4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 Was the organization party to a prohibited tax shelter transaction? 5 Was 10 lid any teachie party notify the organization life Form 8886-17. 6 Does the organization to 55, dot the organization life Form 8886-17. 6 Does the organization solicit any contributions that were not tax deductible as charitable contributions or gifts were not tax deductible? 6 Ji 11 Yes 1 lid the organization include with every excitation are representative such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 179(c). 8 Did the organization receive a payment in excess of \$75 made party as a contribution and partly for goods and services provided to the payor? 7 Organizations that may receive deductible contributions under section 179(c). 9 If Yes, 1 lid the organization notify the donor of the value of the goods or services provided? 7 To Did the organization receive a promotify the donor of the value of the goods or services provided? 7 To Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to life Form 8282? 7 To Did the organization neceive and y funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 To Did the organization out of the service of the payor of the value of the goods or services provided? 7 To Did the organization members of promises, altered the payor of indirectly on a personal benefit contract? 7 To Did the organization members or promises, directly or indirectly, to pay premiums on a personal benefit contract? 7 To Did the organization members or promises, altered the property, did the organization life Form 8899 as required? 8 Sponsoring organization was altered transaction of the property of the property of the property of		a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		х
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 Did any taxable party nority the organization that it was or is a party to a prohibited tax shelter transaction? 5 C I''Yes' fo line So or Sb, did the organization file Form 88861? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization social any contributions that were not tax deductible as charitable contributions? 6a X 6b I''Yes', did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as charitable contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). 8 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? 7 Did the organization notify the donor of the value of the goods or services provided? 7 Did the organization notify the donor of the value of the goods or services provided? 7 Did the organization notify the donor of the value of the goods or services provided? 7 Did the organization notify the donor of the value of the goods or services provided? 7 Did the organization notify the donor of the value of the goods or services provided? 7 Did the organization organization organization organization, during the year, 9 Did the organization during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 7 Did the organization during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 7 Did the organization fourth organization organ	b	If "Yes," enter the name of the foreign country			
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5					
c If "Yes" to line 5a or 5b, did the organization lie Form 8886-T2. Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization contributions that were not tax deductible as charitable contributions? The standard of the organization include with every solicitation an express statement that such contributions or gitts were not tax deductible? To Organizations that may receive deductible contributions under section 170(c). 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? The standard of the payor? To Did the organization notify the donor of the value of the goods or services provided? The standard of the Form 8222? To Did the organization notify the donor of the value of the goods or services provided? The standard of the Form 8222 filed during the year. Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? To Did the organization receive a contribution of qualified intellectual property, did the organization free form 8899 as required? The province of the organization receive a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? The sponsoring organization have excess business holdings at any time during the year? Soposoring organization make any taxable distributions under section 4966? Social the sponsoring organization make any taxable distributions under section 4966? Social the sponsoring organization make any taxable distributions under section 4966? Social the sponsoring organization make any taxable distributions under section 4966? Social the sponsoring organization make any taxable distributions under section 4966? Social the sponsoring organization make any taxable distributions under section 4966? Social the sponsoring organization make an	5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		х
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Part VI

43-1303328 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No"

response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.
Check if Schedule O contains a response or note to any line in this Part VI

Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	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			
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		x
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		x
4	Did the organization make any significant changes to its governing documents since the prior Form 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		x
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	x	
b	Each committee with authority to act on behalf of the governing body?	8b	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 Q	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		х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	x	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c	x	
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 in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		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		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed			
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 Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy,			
	and 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			
	MARK HAND (417)781-2273, 2201 N MAIN ST, JOPLIN, MO 64801			

Form 990 (2020) CHRIST IN YOUTH INC 43-1303328 Page 7

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Section A.

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

<u> </u>							, ,		
				(C)					
(A)	(B)			Positio			(D)	(E)	(F)
Name and title	Average				than one is both a		Reportable	Reportable	Estimated amount
	hours	1			or/trustee		compensation	compensation	of other
	per week						from the	from related organizations	compensation from the
	(list any hours for	9 5	Inst	Office	e mg	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	organization and
	related	or director	Institutional trustee	Ger .	employee	mer Past	,		related organizations
	organizations	l of a	onal		blove se				
	below	l ge	trust		9				
	dotted line)		6		employee Key employee	20107			
						1			
(1) TODD HUTCHISON	1.00)							
DIRECTOR		х					0	0	0
(2) PAUL OSBORNE	1.00	b							
DIRECTOR		х					0	0	0
(3) JOHN SAWYER	1.00)							
DIRECTOR		х					0	0	0
(4) JIM GINGRICH	1.00								
DIRECTOR		х					0	0	0
(5) CHARLES ALLCOTT	1.00								
DIRECTOR		х					0	0	0
(6) MICHAEL DEFAZIO	1.00)							
DIRECTOR		х					0	0	0
(7) DAVID ROADCUP	1.00	þ							
DIRECTOR		х					0	0	0
(8) GRANT MEDLIN	1.00	þ							
DIRECTOR		х					0	0	0
(9) JEFF_WALLING	1.00	þ							
DIRECTOR		х					0	0	0
(10)LORI_MURILLO_	1.00	þ							
SECRETARY		х		х			0	0	0
(11)MARK_CHRISTIAN	1.00	þ							
CHAIRMAN		х		х			0	0	0
(12)TIM WHELAN	1.00)							
VICE CHAIRMAN		х		х			0	0	0
(13)JAYSON FRENCH	40.00	י							
PRESIDENT				3	2		0	0	0
(14)MARK_HAND	40.00	þ							
VICE PRESIDENT				3	ζ		0	0	0
									Form 000 (2020)

Part	90 (2020) CHRIST IN YOUTH I VII Section A. Officers, Directors, Trustee		lovee	s, an	nd H	ighe	est Co	amo	ensated Employe		–13033 ued)			age 8
- 541 6	(A) Name and title		Position (do not check more than one box, unless person is both ar officer and a director/trustee)						(D) Reportable compensation from the	(E) Reportal compensation from relations (CONTRINE)	ble tion		(F) lated am of other	
		per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	organizat (W-2/1099-N	ions	fi orga	rom the nization d organiz	and
(15)														
(16)														
(17)														
(18)														
(19)														
(20)														
(21)														
(22)														
(24)														
(25)														
	Subtotal							· •						
2	Total (add lines 1b and 1c)	ted to those I							0 ore than \$100,000	of	0			0
	reportable compensation from the organization												Yes	No C
3	Did the organization list any former officer, direct		•				•		•					
4	employee on line 1a? If "Yes," complete Schedu For any individual listed on line 1a, is the sum of re											3		X
•	organization and related organizations greater th													
	individual											4		х
5	Did any person listed on line 1a receive or accrue	•		-			_					_		
Socti	for services rendered to the organization? If "Yes on B. Independent Contractors	s," complete	Schea	lule J	J for	SUC	h pers	on			• • •	5		X
1	Complete this table for your five highest compensa													
	compensation from the organization. Report comp	Delisation for	ine cai	enua	ai ye	ai e	nuing	WILII	(B)	1120110115 10	х уваг.	(C)		
	Name and business address	SS							Description of service	es	(Compens	ation	
			_									_	_	
2	Total number of independent contractors (including	a but not lim	itad ta	thos	a lic	tod a	ahovo)	wh	0			_		
_	rotal number of independent contractors (includin	ig but HUL IIIII	เเซน เป	11105	C 112	icu c	200VE)	, vv i i	U					

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

		Check if Schedule O contains a i	response or no	ote to any line in this	s Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under
	1a	Federated campaigns	1a					sections 512–514
	b	Membership dues						
nts nts	C	Fundraising events						
Gra	١.	Related organizations						
ts, (Am	d	Government grants (contributions)						
Contributions, Gifts, Grants and Other Similar Amounts	e •							
Sim	f	All other contributions, gifts, grants and similar amounts not included a		2 050 261				
er ic			bove 1f	3,058,361				
를	g	Noncash contributions included in	4					
ard		lines 1a-1f			2 050 261			
	h	Total. Add lines 1a-1f			3,058,361			
				Business Code				
φ		PROGRAM SERVICES		711300	2,894,531	2,894,531		
ه ک	b							
Se	C							
am Seve	d							
P. P.	е							
₫.		All other program service revenue						
	g	Total. Add lines 2a-2f			2,894,531			
	3	Investment income (including divide						
		other similar amounts)		+	2,490			2,490
	4	Income from investment of tax-exem		- t				
	5	Royalties		▶				
			(i) Real	(ii) Personal				
	6a	Gross rents 6a						
	b	Less: rental expenses 6b						
	С	Rental income or (loss) 6c						
	d	Net rental income or (loss)		▶				
	7a	Gross amount from	(i) Securities	(ii) Other				
		sales of assets						
		other than inventory 7a						
	b	Less: cost or other basis						
ō		and sales expenses 7b						
venue	С	Gain or (loss) 7c						
4		Net gain or (loss)						
Other Re		Gross income from fundraising						
₹	54	events (not including \$						
O		of contributions reported on line						
		1c). See Part IV, line 18	8a					
	<u>ا</u>	Less: direct expenses						
		Net income or (loss) from fundraisin						
			ig events .					
	9a	Gross income from gaming	0-					
		activities, See Part IV, line 19						
	l .	Less: direct expenses						
	С	Net income or (loss) from gaming a	ctivities					
	10a	Gross sales of inventory, less						
	_	returns and allowances						
		Less: cost of goods sold		-				
	С	Net income or (loss) from sales of in	nventory					
				Business Code				
Miscellanous Revenue		OTHER REVENUE		900099	84,273	84,273		
ano nue	b	PPP SBA REVENUE		900099	919,600	919,600		
eve	С							
Ais. R		All other revenue						
_		Total. Add lines 11a-11d			1,003,873			
	12	Total revenue. See instructions .			6,959,255	3,898,404	0	2,490

Form 990 (2020) CHRIST IN YOUTH INC Part IX Statement of Functional Expenses

i ait ix	Otatement of Fanotional Expenses					
Section 501	1(c)(3) and 501(c)(4) organizations must complete all o	columns. All other orga	nizations must comple	ete column (A).		
	Check if Schedule O contains a response or note to	any line in this Part IX			[_
Do not incl	lude amounts reported on lines 6b, 7b,	(A)	(B)	(C)	(D)	
3b, 9b, and	l 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses	
1 Grant	s and other assistance to domestic organizations					Ī

	ot include amounts reported on lines 60, 70,	Total expenses	Program service	Management and	Fundraising
	0b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
_	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
_	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
_	foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
_	trustees, and key employees	125,000	62,500	31,250	31,250
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	3,281,310	2,832,863	309,381	139,066
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	129,861	107,784	14,285	7,792
9	Other employee benefits	521,128	432,536	72,958	15,634
10	Payroll taxes				
11	Fees for services (nonemployees):				
а	Management				
b	Legal	32,001		32,001	
С	Accounting	11,500		11,500	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17 .				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion	36,246		4,712	31,534
13	Office expenses	23,552		10,834	12,718
14	Information technology				
15	Royalties				
16	Occupancy	85,000		79,050	5,950
17	Travel	38,461	31,153	385	6,923
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	7,765	4,504	3,261	
20	Interest	66,877		66,877	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	482,356	448,591	19,294	14,471
23	Insurance	69,673	53,648	13,238	2,787
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	DIRECT PROGRAM SERVICES	1,366,082	1,352,421		13,661
b	OTHER (WITH ALLOCATIONS)	34,510	12,769	15,874	5,867
С	SHIPPING & SUPPLIES	111,614	18,974	49,110	43,530
d	BAD DEBTS	95,132		95,132	
е	All other expenses	113,079	97,249	15,830	
25	Total functional expenses. Add lines 1 through 24e	6,631,147	5,454,992	844,972	331,183
26	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation. Check here if				
	following SOP 98-2 (ASC 958-720)				

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	1,056,165	1	717,666
	2	Savings and temporary cash investments	273,693	2	77,262
	3	Pledges and grants receivable, net	819,398	3	394,819
	4	Accounts receivable, net	225,590	4	
	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	
	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use	58,403	8	
	9	Prepaid expenses and deferred charges	265,083	9	214,287
•	10a	Land, buildings, and equipment: cost or other	2037003		211/20/
		basis. Complete Part VI of Schedule D 10a 8,265,953			
	b	Less: accumulated depreciation 10b 5,399,487	3,042,371	10c	2,866,466
	11	Investments - publicly traded securities	32,927	11	33,063
	12	Investments - other securities. See Part IV, line 11	32,321	12	33,003
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	20 622	15	0 270
	16	Total assets. Add lines 1 through 15 (must equal line 33)	30,632 5,804,262	16	8,378 4,311,941
	17	Accounts payable and accrued expenses	264,696	17	
	18	Grants payable	204,090	18	174,540
	19	Deferred revenue	2 045 160	19	206 205
	20	Tax-exempt bond liabilities	2,045,168	20	306,305
	21	·		21	
	22	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,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%		20	
Lia	22	controlled entity or family member of any of these persons	1 450 600	22	1 465 050
	23 24	. , , , , , , , , , , , , , , , , , , ,	1,458,682		1,467,272
	24 25	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X		25	
	00	of Schedule D	2 560 546		1 040 117
	26	Total liabilities. Add lines 17 through 25	3,768,546	26	1,948,117
		Organizations that follow FASB ASC 958, check here			
es	07	and complete lines 27, 28, 32, and 33.	1 554 400	07	1 000 500
anc	27	Net assets without donor restrictions	1,554,480	27	1,882,588
Bal	28	Net assets with donor restrictions	481,236	28	481,236
2		Organizations that do not follow FASB ASC 958, check here			
Ē	00	and complete lines 29 through 33.		00	
s or	29	Capital stock or trust principal, or current funds		29	
Net Assets or Fund Balances	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
As	31	Retained earnings, endowment, accumulated income, or other funds		31	0.010.001
N et	32	Total net assets or fund balances	2,035,716	32	2,363,824
	33	Total liabilities and net assets/fund balances	5,804,262	33	4,311,941

EEA Form 990 (2020)

	n 990 (2020) CHRIST IN YOUTH INC	43-1303328		Pa	age 1
Pai	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)			959,	
2	Total expenses (must equal Part IX, column (A), line 25)	. 2	6,	631,	147
3	Revenue less expenses. Subtract line 2 from line 1	. 3		328,	108
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	. 4	2,	035,	716
5	Net unrealized gains (losses) on investments	. 5			
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	2,	363,	824
Pai	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
		_		Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		x
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both:				
	Separate basis X Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of				
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	x	

required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits Form **990** (2020) EEA

3a

3b

х

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

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

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2020

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust

▶ Attach to Form 990 or Form 990-EZ.

Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public

CHR	IST IN YOUTH INC 43-1303328								
Pa	rt I	Reason for Public Charity	/ Status. (All o	rganizations must of	complete	this part	See instructions	3.	
The	orgar	nization is not a private foundation bec	ause it is: (For lines	s 1 through 12, check on	ly one box.)			
1		A church, convention of churches, or	association of chu	rches described in sect	tion 170(b)	(1)(A)(i).			
2		A school described in section 170(b)(1)(A)(ii). (Attach	Schedule E (Form 990	or 990-EZ).	.)			
3		A hospital or a cooperative hospital s	service organization	n described in section 1	170(b)(1)(A	A)(iii).			
4	\Box	A medical research organization ope	rated in conjunctio	n with a hospital describ	ped in sect	ion 170(b)	(1)(A)(iii). Enter the		
	_	hospital's name, city, and state:	,	•		. ,			
5		An organization operated for the bene	efit of a college or u	iniversity owned or oper	ated by a c	overnment	al unit described in		
•	ш	section 170(b)(1)(A)(iv). (Complete	•	annonomy omnou or open	a.oa 2, a g	,	a. a a		
6	П	A federal, state, or local government	,	init described in section	170/b\/1\	(Δ)(γ)			
7	=	An organization that normally receive	•				the general public		
•	Ш	,	•		verrimental	unit or non	Title general public		
		described in section 170(b)(1)(A)(vi		,					
8	=	A community trust described in secti					206 - Land mant and a		
9	Ш	An agricultural research organization				•	-	je	
	or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or								
		university:	(4) (1 00	1.4004 614					
10	X	An organization that normally receive	` '	• •					
		receipts from activities related to its e	•	•		•			
		support from gross investment income		,		•	om businesses		
		acquired by the organization after Ju	•	• • • • • • • • • • • • • • • • • • • •	•	,			
11	=	An organization organized and opera	•						
12	Ш	An organization organized and operation	•	•					
		of one or more publicly supported org	-					•	
		Check the box in lines 12a through 12				•		-	
	а	Type I. A supporting organization		•		•		ng	
		the supported organization(s) the			rity of the c	lirectors or	trustees of the		
		supporting organization. You mu	•						
	b		n supervised or co	entrolled in connection w	ith its supp	orted orga	nization(s), by having		
		control or management of the sup	porting organization	on vested in the same pe	ersons that o	control or m	anage the supported		
		organization(s). You must comp	olete Part IV, Sect	ions A and C.					
	С		 A supporting orga 	anization operated in co	nnection w	ith, and fun	ctionally integrated wi	th,	
		its supported organization(s) (see	e instructions). You	u must complete Part I	V, Section	ıs A, D, an	d E.		
	d		rated. A supporting	g organization operated	in connecti	on with its	supported organization	n(s)	
		that is not functionally integrated.	The organization g	generally must satisfy a c	distribution i	equiremen	and an attentiveness		
		requirement (see instructions). Y	ou must complete	e Part IV, Sections A a	nd D, and	Part V.			
	е	Check this box if the organization	received a written	determination from the I	RS that it is	a Type I, T	ype II, Type III		
		functionally integrated, or Type III	non-functionally in	ntegrated supporting org	anization.				
	f	Enter the number of supported organ	izations						
	g	Provide the following information about	ut the supported or	ganization(s).					
	(i)	Name of supported organization	(ii) EIN	(iii) Type of organization	(iv) Is the o	•	(v) Amount of monetary	(vi) Amount of	
				(described on lines 1-10 above (see instructions))	listed in you docum	0 0	support (see instructions)	other support (see instructions)	
				above (see mendenone))	doddiii		motradions)	motraotiono)	
					Yes	No			
(A)									
(/-)									
(B)									
(5)									
(C)									
(J)									
(D)									
(E)									
	1								
Tota									

Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

b 10%-facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported

instructions

EEA

43-1303328

(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.)

<u> 26</u>	ction A. Public Support						
Cal	endar year (or fiscal year beginning in)▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")	1,692,569	1,740,996	1,686,283	975,627	3,058,361	9,153,836
2	Gross receipts from admissions, merchandise sold or services performed, or facilities fumished in any activity that is related to the						
	organization's tax-exempt purpose	15,549,762	17,158,806	19,237,087	19,860,892	2,894,531	74,701,078
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	17,242,331	18,899,802	20,923,370	20,836,519	5,952,892	83,854,914
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						
	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.)						83,854,914
Sec	ction B. Total Support			1			
	endar year (or fiscal year beginning in)▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9	Amounts from line 6	17,242,331	18,899,802	20,923,370	20,836,519	5,952,892	83,854,914
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources	1,303	1,534	10,281	20,165	2,490	35,773
b	Unrelated business taxable income (less	-		-	-		
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b	1,303	1,534	10,281	20,165	2,490	35,773
	Net income from unrelated business	-		-	-		
	activities not included in 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.)	17,243,634	18,901,336	20,933,651	20,856,684	5,955,382	83,890,687
14	First 5 years. If the Form 990 is for the orga						
	organization, check this box and stop here						· ▶ □
Sec	ction C. Computation of Public Suppo						_
15	Public support percentage for 2020 (line 8, o	column (f), divid	led by line 13,	column (f)) .		15	99.96 %
	Public support percentage from 2019 Sched		-			16	99.96 %
	ction D. Computation of Investment In					<u> </u>	
17	Investment income percentage for 2020 (line			ine 13, column	(f))	17	0.00 %
18	Investment income percentage from 2019 S					18	0.00 %
	33 1/3% support tests - 2020. If the organiz						
	17 is not more than 33 1/3%, check this box						
b	33 1/3% support tests - 2019. If the organiz	-	-	-			
	line 18 is not more than 33 1/3%, check this						
20	Private foundation. If the organization did in	-	-	•			

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.

Department of the Treasury Internal Revenue Service Name of the organization

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

OMB No. 1545-0047

2020

Open to Public Inspection

Employer identification number

CHR	IST IN YOUTH INC		43-1303328
Pa	rt I Organizations Maintaining Donor Advised Fu	ınds or Other Similar Funds or Acco	ounts.
	Complete if the organization answered "Yes" on		
		(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 wi	riting that the assets held in donor advised	
_	funds are the organization's property, subject to the organization	_	
6	Did the organization inform all grantees, donors, and donor adv		
•	only for charitable purposes and not for the benefit of the donor		
	conferring impermissible private benefit?		
Pa	rt II Conservation Easements.		
. u	Complete if the organization answered "Yes" or	n Form 990 Part IV line 7	
1	Purpose(s) of conservation easements held by the organization		
•	Preservation of land for public use (e.g., recreation or edu		f a historically important land area
	Protection of natural habitat		f a certified historic structure
	Preservation of open space	i reservation of	i a certified filstoffe structure
2	Complete lines 2a through 2d if the organization held a qualified	conservation contribution in the form of a co	onconvotion
2	easement on the last day of the tax year.	conservation continuation in the form of a co	
_			Held at the End of the Tax Year
a	Total acreage restricted by conservation easements	• • • • • • • • • • • • • • • • • • • •	
b	Number of conservation easements on a certified historic structure.		
C			<u>2c</u>
d	Number of conservation easements included in (c) acquired af		24
•	· · · · · · · · · · · · · · · · · · ·	and outinguished or terminated by the are	
3	Number of conservation easements modified, transferred, rele	ased, extinguished, or terminated by the org	anization during the
4	tax year	mant in language.	
4	Number of states where property subject to conservation ease		
5	Does the organization have a written policy regarding the period		□ vaa □ Na
_	violations, and enforcement of the conservation easements it h		
6	Staff and volunteer hours devoted to monitoring, inspecting, ha	ndling of violations, and enforcing conservati	ion easements during the year
-	Assessment of a superior and in assessing the second in the second of the second in the second of the second in the second of th		and a second of the second
7	Amount of expenses incurred in monitoring, inspecting, handling	ig of violations, and emorcing conservation e	easements during the year
	► \$	and the second second and a second se	4)/D)/:)
8	Does each conservation easement reported on line 2(d) above		
•		a accompate in its revenue and evenue state	
9	In Part XIII, describe how the organization reports conservation		
	balance sheet, and include, if applicable, the text of the footnote	e to the organizations imancial statements tr	ial describes the
Da	organization's accounting for conservation easements. rt III Organizations Maintaining Collections	of Art Historical Transuras or C	Other Similar Assets
Га	Complete if the organization answered "Yes" of		Allei Sillilai Assets.
10			alanaa ahaat warka
1a	If the organization elected, as permitted under FASB ASC 958		
	of art, historical treasures, or other similar assets held for publi		rance of public
	service, provide, in Part XIII the text of the footnote to its finance.		and alread weather of
b	If the organization elected, as permitted under FASB ASC 958		
	art, historical treasures, or other similar assets held for public e	exhibition, education, or research in furtheran	ice of public service,
	provide the following amounts relating to these items:		
_	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical treas		in, provide the
	following amounts required to be reported under FASB ASC 9	•	
а	·	• • • • • • • • • • • • • • • • • • • •	
b	Assets included in Form 990, Part X		▶ \$

	ule D (Form 990) 2020 CHRIST IN YOUTH						43-130		Page 2
Pai	rt III Organizations Maintaining	Collections of	Art, Hist	orical T	reasures,	or Ot	her Similar <i>A</i>	Assets (c	continued)
3	Using the organization's acquisition, accession	n, and other records,	check any	of the follo	wing that ma	ke signi	ficant use of its		
	collection items (check all that apply):								
а	Public exhibition		d [Loan	or exchange	orogram	s		
b	Scholarly research		е	Other		-			
С	Preservation for future generations		_						
4	Provide a description of the organization's coll	ections and explain	how they fu	rther the c	organization's	exempt	purpose in Part		
_	XIII.		and the same	-1.6					
5	During the year, did the organization solicit or								
D	assets to be sold to raise funds rather than to		art of the org	ganization'	s collection?		· · · · · · · · ·	<u> </u> Ye	s No
Pai	rt IV Escrow and Custodial Arrai	•	–	000 D-	D. / . P				
	Complete if the organization a 990, Part X, line 21.	answered "Yes"	on Form	990, Pa	irt IV, line	9, or re	eported an an	nount on	Form
1a	Is the organization an agent, trustee, custodiar	or other intermedia	ry for contril	outions or	other assets	not			
	included on Form 990, Part X?							🗌 Ye	s 🗌 No
b	If "Yes," explain the arrangement in Part XIII a	nd complete the follo	owing table:						
							A	mount	
С	Beginning balance					. 1c	:		
d	Additions during the year					. 1d	1		
е						. 1e	1		
f	Ending balance					. 1f			
2a	Did the organization include an amount on For							Ye	s No
b	If "Yes," explain the arrangement in Part XIII.								_
	rt V Endowment Funds.	0.1.00.1.1.0.0 ii ti.10 0.1	p.a. a.	. с . с с с					<u> </u>
	Complete if the organization a	answered "Yes"	on Form	990. Pa	rt IV. line	10.			
		(a) Current year	(b) Prio		(c) Two years		(d) Three years bac	k (e) For	ır years back
1a	Beginning of year balance	(a) Current year	(5) 1110	i yeai	(c) Two years	Dack	(u) Three years bac	,K (6) 100	ii years back
ıa h									
С	Net investment earnings, gains, and								
	losses								
d	Grants or scholarships								
е	Other expenditures for facilities and								
	programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of the current	-	(line 1g, col	umn (a)) h	neld as:				
а	Board designated or quasi-endowment								
b	Permanent endowment 9	ó							
С	Term endowment ▶ %								
	The percentages on lines 2a, 2b, and 2c shoul	d equal 100%.							
3a	Are there endowment funds not in the posses	sion of the organizat	tion that are	held and	administered	for the			
	organization by:								Yes No
	(i) Unrelated organizations							3a(i)	
	(ii) Related organizations							3a(ii)	
b	If "Yes" on line 3a(ii), are the related organization	tions listed as require	ed on Sche	dule R?.				3b	
4	Describe in Part XIII the intended uses of the	organization's endov	wment fund	S.					
Pai	rt VI Land, Buildings, and Equip	ment.							
	Complete if the organization a	answered "Yes"	on Form	990, Pa	rt IV, line	11a. S	ee Form 990,	, Part X, I	ine 10.
	Description of property	(a) Cost or oth			other basis		Accumulated		ok value
	1 - 1 - 1 - 1 - 2	(investme			other)		epreciation	(-,	
1a	Land				386,627				386,627
b	Buildings				17,310		675,816	1 .	741,494
c	Leasehold improvements			۵,-	,,5±0		0.0,010	<u> </u>	,
d		•			162,016		4,723,671		738 345
u				٥,4	102,010		I, 143,0/I		738,345
Total	Other	<u> </u>	rt Y colum	(R) line	100.)			2	866 466

Part VII	Investments - Other Securities.		43-	-1303328	Page
Fait VII	Complete if the organization answered "Yes" of	on Form 990. Part IV. line	11b. See Forn	n 990. Part X.	line 12.
	(a) Description of security or category	(b) Book value		c) Method of valuation	
	(including name of security)		Cost o	or end-of-year market va	alue
(1) Financial					
.,	eld equity interests				
(3) Other					
(A)					
(B)					
(C)					
(D) (E)					
(F)					
(G)					
(H)					
_ ` '	nn (b) must equal Form 990, Part X, col. (B) line 12.)				
Part VIII	Investments - Program Related.				
	Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11c. See Form	n 990, Part X,	line 13.
	(a) Description of investment	(b) Book value		c) Method of valuation	
			Cost o	or end-of-year market va	alue
(1)					
(2)					
(3) (4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	nn (b) must equal Form 990, Part X, col. (B) line 13.)				
Part IX	Other Assets.				
	Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11d. See Forn	990, Part X,	line 15.
	(a) Description			(b) Boo	k value
(1)OTHER	ASSETS				8,3
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
	nn (b) must equal Form 990, Part X, col. (B) line 15.)				8,37
Part X	Other Liabilities.				0,5
1 0 71	Complete if the organization answered "Yes" of	on Form 990. Part IV. line	11e or 11f. Se	e Form 990. F	art X.
	line 25.	, , , ,		,	,
1.	(a) Description of liability (b) Book value			
(1) Federal	income taxes				
(2)					
(3)					
(4)					
(5)					
(6)					

(7) (8) (9) **Total.** (Column (b) must equal Form 990, Part X, col. (B) line 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.

Par		i ixetuii	•••
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements	1	6,959,255
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments	-	
b	Donated services and use of facilities	-	
С	Recoveries of prior year grants	-	
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	6,959,255
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	-	
b	Other (Describe in Part XIII.)	-	
_C	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	6,959,255
Pai	Reconciliation of Expenses per Audited Financial Statements With Expenses	per Ke	turn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	6,631,147
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	-	
b	Prior year adjustments	-	
C	Other losses	-	
d	Other (Describe in Part XIII.)		
e	Add lines 2a through 2d	2e	6 621 145
3 4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	3	6,631,147
4 a	Investment expenses not included on Form 990, Part VIII, line 7b		
	investment expenses not included on Form 990, Fait VIII, line 70 44		
-	Other (Describe in Part VIII.)		
b	Other (Describe in Part XIII.)	40	
b c	Add lines 4a and 4b	4c	6 621 147
b c 5 Par	Add lines 4a and 4b	5	6,631,147
b c 5 Par	Add lines 4a and 4b	5	
b c 5 Par	Add lines 4a and 4b	5	
b c 5 Par	Add lines 4a and 4b	5	

EEA Schedule D (Form 990) 2020

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

OMB No. 1545-0047

► Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

► Attach to Form 990. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

	ST IN YOUTH INC				43-13033	
Part			Outside the U	Inited States. Complete if t	the organization answered	"Yes" on
1	Form 990, Part IV, line For grantmakers. Does the org		toin records to	aubatantiata the amount of its a	ronto and	
ļ	other assistance, the grantees' el			•		
	award the grants or assistance?		-			x Yes No
	· ·					
2	For grantmakers. Describe in Foutside the United States.	Part V the orga	nization's proce	dures for monitoring the use of	its grants and other assistance	
3	Activities per Region. (The follow	ring Part I, line	3 table can be d	uplicated if additional space is n	eeded.)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
E	JROPE (INCLUDING					
(1) I (CELAND AND GREENLAND)					
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
10)						
11)						
12)						
13)						
14)						
15)						
16)						
17)	Subtotal					
3a b	Subtotal					
	sheets to Part I					
С	Totals (add lines 3a and 3b)					

Schedule F (Form 990) 2020 CHRIST IN YOUTH INC

Page 2

Page 1

Grants and Other Assistance to Organizations or Entities Outside the United States Complete if the organization answered "Vos" on Form 990

1	(a) Name of	(b) IRS code	eceived more than \$5,0 (c) Region	(d) Purpose of	(e) Amount of	(f) Manner of	(g) Amount of	(h) Description	(i) Method of valuation
	organization	section and EIN (if applicable)		grant	cash grant	cash disbursement	noncash assistance	of noncash assistance	(book, FMV, appraisal, other)
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									
e	exempt 501(c)(3) organizat	tion by the IRS, or for which t	e that are recognized as char he grantee or counsel has pro	ovided a section 501(c	c)(3) equivalency letter	r			
3 E	Enter total number of other	organizations or entities .					>		

EEA

Schedule F (Form 990) 2020 CHRIST IN YOUTH INC 43-1303328

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

· ·	ed il additional space is needed.						T
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
_(3)							
(4)							
_(5)							
(6)							
<u>(7)</u>							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
<u>(16)</u>							
(17)							
<u>(</u> 18)							

Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	s [] No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	s [No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	s [] No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	s [No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	s [] No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	s [] No

EEA Schedule F (Form 990) 2020

Schedule F (Form 990) 2020 Page **5**

Part V	Provide the information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

EEA Schedule F (Form 990) 2020

SCHEDULE L

(Form 990 or 990-EZ)

Transactions With Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

► Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047 2020

Department of the Treasury Internal Revenue Service Name of the organization

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

Open To Public Inspection

	YOUTH INC								13033					
Part I	Excess Benefit		•			. , . , .		. , , ,	•			• /		
	Complete if the	organization a	nswered "Yes'	on For	m 990,	Part IV, li	ne 25a	or 25b, or Form	990-l	EZ, Pa	art V,	line 4	0b.	
1 (a) Name of disqualified person		on	(b) Relationship between disqualified person and				(c) Description of transaction						(d) Corr	
			C	organization	1			(,,					Yes	No
(1)														
_(')														
(2)														
(3)														
	ne amount of tax inc	curred by the org	anization manag	ers or di	squalified	persons d	luring the	e year						
under s	ection 4958									▶ \$;			
3 Enter th	ne amount of tax, if	any, on line 2, ab	ove, reimbursed	by the o	rganizati	on				▶ \$;			
Part II	Loans to and/o				000	- 7 D ()	, II 0		ъ.	N / 1:	00			
	Complete if the organization rep							8a or Form 990	, Part	IV, IIN	e 26;	or if t	ne	
	<u> </u>													
(a) Name of	interested person	(b) Relationship with organization	(c) Purpose of		oan to or m the	(e) Ori		(f) Balance due	(g) In (default?		proved ard or	(i) Wr	
		Will organization	loan	organ	ization?	principal	arriourit				1	nittee?	agree	nont.
				То	From				Yes	No	Yes	No	Yes	No
(1)														
(2)										<u> </u>		<u> </u>		
(2)														
(3)												-		
(4)														
(5)														
Total							. • \$;						
Part III	Grants or Ass													
	Complete if the	organization a	answered "Yes	s" on Fo	rm 990,	Part IV,	line 27.							
(a) Name	of interested person		hip between intereste	d (c) Amount of	assistance	(c	1) Type of assistance		(е) Purpos	se of ass	sistance	
		person a	nd the organization											
(1)														
(2)														
(3)														
(4)														
				1										

(5)

	Involving Interested Persons. ion answered "Yes" on Form 990	0, Part IV, line 28a,	28b, or 28c.		
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sha organiz reven	ation's
				res	NO
(1) MADISON CHRISTIAN	D-I-L OF TRUSTEE	650	MUSICAL PERFORMANCE		х
(2) JEFF WALLING	TRUSTEE	3,000	SPEAKING ENGAGEMENTS		х
(3)					
(4)					
(5)					
Part V Supplemental Information					
Provide additional informa	tion for responses to questions of	on Schedule L (see	instructions).		

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

CHRIST IN YOUTH INC 43-1303328 01. Form 990 governing body review (Part VI, line 11) THE 990 IS REVIEWED BY EXECUTIVE MANAGEMENT OF THE ORGANIZATION PRIOR TO FILING OF THE FORM 990 02. Conflict of interest policy compliance (Part VI, line 12c) AS CONFLICTS ARE REPORTED, THEY ARE REVIEWED BY THE EXECUTIVE COUNCIL AND THE APPROPRIATE ACTION TO RESOLVE THE CONFLICT IS DETERMINED 03. CEO, executive director, top management comp (Part VI, line 15a) THE VICE PRESIDENT FOLLOWS THESE STEPS IN DETERMINING COMPENSATION FOR THE PRESIDENT -1) RESEARCH SALARY COMPARATIVES ON SIMILARLY SIZED NONPROFIT ORGANIZATIONS - 2) PUT TOGETHER SALARY INCREASE RECOMMENDATIONS FOR THE BOARD OF TRUSTEES AND REVIEW WITH PRESIDENT -3) ENTIRE BOARD REVIEWS SALARIES AND APPROVES AMOUNTS PAID 04. Other officer or key employee compensation (Part VI, line 15b SAME PROCEDURES AS USED IN FORM 990 PART VI LINE 15A 05. Governing documents, etc, available to public (Part VI, line 19) NO DOCUMENTS AVAILABLE TO THE PUBLIC